



**Council  
20 July 2021  
Committee Annual Reports**

<b>Classification</b>	Public
<b>Purpose</b>	For noting
<b>Issue</b>	Each Committee is required to report annually on its work to Council.
<b>Recommendations</b>	To note the Annual Reports of the:  a. Policy and Education Committee b. Remuneration and Appointments Committee
<b>Financial and resourcing implications</b>	The cost of each committee is contained within the respective annual report.
<b>Equality and diversity implications</b>	Each committee considers matters relating to equality and diversity and these are set out in more detail within the Committee Annual Reports.
<b>Communications implications</b>	None arising.
<b>Annexes</b>	A. Policy and Education Committee Annual Report B. Remuneration and Appointments Committee Annual Report
<b>Author</b>	Matthew Redford, Fiona Browne, Amanda Chadwick

## Annual Report of the Policy and Education Committee 2020-21

### *Introduction*

1. The role of the Policy and Education 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 at the annex.

### *Membership*

4. The Committee consists of five members of Council and four external appointed members. The members of the Committee are listed at paragraph 38 below.
5. In addition, the key osteopathic sector organisations 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. These members are:
  - the Council of Osteopathic Education Institutions (COEI)
  - the Institute of Osteopathy (iO)
  - the National Council for Osteopathic Research (NCOR)
  - the Osteopathic Alliance (OA)
7. The Policy and Education Committee met seven times during the period under review – in June 2020, October 2020, December 2020, and March 2021. All meetings were held online in accordance with the relevant restrictions and guidance during the coronavirus pandemic. Consequently, as a result of increased business, the public and private meetings were held on different days to facilitate sufficient breaks and proper consideration of both public and private items. This report summarises the work of the Committee. Full minutes of all the meetings have already been reported to Council.
8. Whilst specifications for visits, visit reports are considered in public. Other matters related to educational institutions are considered in private due to the commercial nature of the osteopathic educational institutions. If, as a result of the information provided, there were issues affecting the Recognised

## Annex A to 17

Qualification, we will take steps to put this information in the public domain.  
Quality assurance of 'recognised qualifications'

9. During the course of the year, as part of our approach to informing advice to 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:

<b>Activity</b>	<b>June 2020</b>	<b>October 2020</b>	<b>December 2020</b>	<b>March 2021</b>
Agreement to RQ specifications (including new RQs, renewal of RQs and monitoring visits) / appointment of Education Visitors			Two OEIs	Two OEIs
Consideration of Education Visitor RQ report (including new RQs, renewal of RQs and monitoring visits)	One OEI			
RQ change notifications and consideration of reports and evidence submitted in relation to general and specific conditions and in response to specific requests to all OEIs with respect to coronavirus adaptations.	Three OEIs	Nine OEIs plus consideration of a separate matter involving two OEIs together.		
Consideration of annual report analysis (including external examiner reports and internal annual monitoring reports and information about student fitness to practise.)				Nine OEIs
Recommendation of removal of RQ expiry dates to Council			One OEI	

### *Quality Assurance – Annual Report template 2020-21*

10. In June 2020, the Committee agreed the annual report template to be completed by the osteopathic educational institutions for the 2020/21 academic year and due for submission in December 2020 which forms part of the quality assurance picture for each osteopathic educational institution. The aim is to ensure that mechanisms are in place to identify, manage and monitor issues impacting on the quality of education and to ensure that only students meeting the Osteopathic Practice Standards are awarded a 'recognised qualification'. The information from the Annual Reporting process and ongoing review enable the Committee to ensure that it is able to make appropriate recommendations to

## Annex A to 17

Council about the award (or withdrawal) of 'recognised qualifications' and helps to ensure that standards are carefully monitored and maintained.

11. The Annual Report template included questions on:

- Good practice
- Quality assurance and governance processes (and includes consideration of external examiner reports, institutional annual monitoring reports, consideration of complaints and appeals)
- Evidence of implementation of the OPS (and adaptations to design and delivery due to the necessary changes made as a result of the coronavirus pandemic)
- Clinical experience – A specific question was included this year to explore the way in which students achieved their clinical experience during a time when clinics were affected by the pandemic.
- Stakeholder feedback (patients, students and staff), key issues and how they have been addressed.
- Student data – including data in relation to student enrolment, progression and enrolment and protected characteristics in relation to these aspects. These are provided in a standard form to GOsC and analysed to provide a sector picture and trends.
- Educator data
- Equality, diversity and inclusion
- Updates on specific conditions, areas for development or requirements in relation to matters that are being monitored by the Committee
- Student protection plan
- Student fitness to practise

### *Impact of the coronavirus on osteopathic education*

12. In June 2020, the Committee noted the ongoing engagement and collaboration between the institutions and the executive in this time of rapid change and the general approaches taken to date within the osteopathic education sector in response to the Coronavirus pandemic. The Committee also noted the steps taken by osteopathic educational institutions to assure themselves that final year students, graduating in 2020, had met the appropriate outcomes to enable them to graduate. The Committee requested an update on any further changes to programme delivery and assessment and the broader impact of the Coronavirus pandemic on osteopathic educational institutions for the October meeting.

## Annex A to 17

13. In October 2020, the Committee considered the responses from the OEIs in relation to impact of the coronavirus pandemic for students in earlier years and in particular how courses had been changed and the governance structures overseeing these changes to ensure that graduates would meet the Osteopathic Practice Standards at the point of graduation. Specific information and approaches were provided in relation to:

- Teaching and learning
- Practical classes
- Assessment
- Clinical provision
- Student learning and welfare support
- Governance and quality assurance
- Equality and diversity
- Student numbers
- Financial impact on the organisation
- Student protection plans

14. The response to the sector was consistent with a variety of consistent mechanisms being used to deliver the Osteopathic Practice Standards. Examples of changes included:

- Approach to infection control including risk assessments of clinics, personal protective equipment, smaller student bubbles, staggered arrival and departure times
- Implementation of a blended approach including face to face, remote and virtual clinics
- Additional clinics over holiday periods
- More online teaching both live and streamed
- Adaptation of the assessment process, for example open book assessments
- Increased student support mechanisms
- Increased staff training and support
- Use of governance mechanisms to manage and monitor changes made (including consultation and feedback)

## Annex A to 17

15. An overarching analysis of this data was considered by the Committee in March 2021 and demonstrated key areas for the Committee to consider further as it takes forward its risk based approach to quality assurance and the review of the Guidance for Osteopathic Pre-registration Education and Standards for Training.

### *Quality Assurance development*

16. In June and October 2020, the Committee noted the progress of the procurement exercise and the appointment of Mott MacDonald as new quality assurance providers from 1 July 2021 following the conclusion of a robust procurement process.
17. In October 2020, the Committee noted the progress made in reviewing the quality assurance process, including the development of a new Quality Assurance Handbook. This included a detailed understanding of the transition of quality assurance provider to Mott MacDonald and the engagement, consultation and insight they had undertaken with stakeholders including osteopathic educational institutions and visitors to adapt and develop the quality assurance processes.
18. In December 2020, the Committee agreed the Interim Quality Assurance Handbook for use in conjunction with the RQ Renewal visits for the College of Osteopaths and the London College of Osteopathic Medicine in 2021. This included the development of specific criteria to inform the themes used in the quality assurance to aid transparency about how the themes would be assessed. The Handbook will be further developed following feedback from these visits and further engagement during 2021.
19. In March 2021, the Committee noted an update on the Quality Assurance framework including the approach and findings to the analysis of the nine OEI annual reports submitted and plans for further development drawing on the Standards for Education and Training and drawing together criteria in the Mott MacDonald Interim Handbook. The Committee continue to monitor the quality of osteopathic education in the sector.

### *The review of the Guidance for Osteopathic Pre-registration Education and Training*

20. In June 2020, the Committee noted the progress of the Guidance for Osteopathic Pre-registration Education and Training. This included the feedback on the current draft, the draft Standards for Education and Training and the plans for further pre-consultation development prior to publication and consultation with a Stakeholder Reference Group.
21. In October 2020, the Committee considered the progress of the Review of the Guidance for Osteopathic Pre-registration Education and Standards for Education and Training including the deliberations of the Stakeholder Reference Group which included patients, new graduates, the Institute of Osteopathy, the Council of Osteopathic Educational Institutions, the Osteopathic Alliance, the National Council for Osteopathic Research, the Chartered Society of Physiotherapists. The Committee provided feedback on the draft Guidance and Standards.

## Annex A to 17

22. In March 2021, the Committee noted the further development of the Guidance for Osteopathic Pre-registration Education and Standards for Education and Training including the findings from the equality, diversity and inclusion focus groups and the advice of the equality consultants on the further development of the Equality Impact Assessment and further feedback from a stakeholder reference group and the issues for consultation distilled by our stakeholders. The Committee agreed to recommend that Council publish the Guidance for Osteopathic Pre-registration Education including Standards for Education Training for consultation

### *Osteopathic Practice Standards (OPS) Implementation and evaluation*

23. In June 2020, the Committee noted the draft report of the Osteopathic Regulation Survey which explored the implementation of the Osteopathic Practice Standards.

24. In October 2020, The Committee considered the issues raised in the follow up research by Professor Gerry McGivern and team on exploring and explaining the dynamics of osteopathic regulation and compliance with standards. The Committee considered the findings, the insight generated by the findings and next steps for the General Osteopathic Council to continue to enhance engagement, embedding and embodying of the Osteopathic Practice Standards. Much of this related to communications and engagement, recognising the diversity of the profession as outlined in the report.

### *Continuing Professional Development (CPD)*

25. In July 2020, the Committee noted the approach to the evaluation of the CPD scheme during the coronavirus pandemic.

26. In October 2020, the Committee considered and noted the analysis of a range of data sources (registration and renewal data, fitness to practise data, feedback from ongoing webinars and planning and preparations for the CPD Evaluation Survey 2020) and the implications for the implementation of CPD scheme including key messages and next steps.

27. In March 2021, the Committee noted the findings of the CPD evaluation survey 2020, including:

- Reasonable confidence that the CPD scheme is bedding in as expected.
- High proportion of osteopaths reported using the four themes of the Osteopathic Practice Standards in their CPD and undertaking CPD in the area of communication and consent. (80% + and 75% respectively)
- A range in relation to how many osteopaths are undertaking objective activities (between 35% and 59%). This was an area that continued to be promoted.
- Barriers to reflection were reduced but further work ongoing to promote completed examples and reflective questions to support osteopaths to do this.

## Annex A to 17

- Reported lack of preparedness for the peer discussion review remained relatively significant at 39%. But a high proportion of osteopaths had identified their peer and more than 2/3 of osteopaths had had an initial conversation. Our recorded webinar (which goes through the process and a completed example) had received good feedback from osteopaths in terms of understanding what to do. So, there was confidence that continued promotion and signposting of these resources will enable osteopaths to comply.
- There was no evidence that people with particular protected characteristics were not engaging with the scheme, but numbers were still small and the areas continued to be monitored.
- New graduates were likely to be much more prepared for and engaged with the scheme.

28. The findings were subsequently considered by Council along with further supplementary analysis of other sources of evidence.

### *Fitness to practise: screeners guidance*

29. In October 2020, the Committee considered the draft Screeners guidance which had been substantially updated and modified to enable Screeners to make consistent, fair and proportionate decisions. The Committee agreed that it should be recommended to Council for consultation.

### *Fitness to practise: Acting as an expert or professional witness on the osteopathic context*

30. In October 2020, the Committee agreed that the advice set out in the Academy of Royal Medical Colleges 'Acting as an Expert or Professional Witness – guidance for healthcare professionals', is consistent with our own standards and guidance. The Committee also agreed to a review of the GOsC's existing guidance and further engagement with the expert witness working group.

### *Patients*

31. In June 2020, the Committee noted the patient focus groups and considered and gave feedback on the GOsC approach to patient engagement moving towards a partnership model of patient engagement in osteopathic education.

32. In March 2021, the Committee considered the development of patient engagement which had been informed by consultation with osteopathic patient representatives and external stakeholders including patient leaders in health care. It considered how safer spaces had been developed for patients to foster a greater understanding of osteopathy, health regulation and how patients can input and induction and support provided prior to and post meeting debriefings. It set out examples of the impact of greater patient engagement in current projects including:

- the Review of Guidance for Osteopathic Pre-registration Education;



## Annex A to 17

- Fitness to practise guidance about remote hearings;
- Expert witness guidance working group;
- Development of additional patient feedback templates to take into account the coronavirus pandemic;
- The draft Communications and Engagement Strategy 2021-24.

33. The Committee also noted plans for the patient and public involvement in education seminar held jointly with the General Chiropractic Council. Finally, the Committee noted the future plans for establishing a framework to support and consolidate and embed patient engagement within the work of GOsC.

### *Horizon scanning: external inquiries, reviews and reports*

34. In October 2020, the Committee considered the findings from a range of reports related to regulation and health including recent Inquiries and relevant research and reports from patients' organisations and the implications for its work. Key themes for consideration included:

- listening to patients and the regulatory system working as a whole;
- the need to focus on changes in culture to support dialogue,
- trust empathy and care
- the erasure and reintroduction of the patient voice.
- the changing patient experience of healthcare.
- changing patients' expectations and understanding of touch.

### *Coronavirus Pandemic: ongoing reflections for regulation in the osteopathic sector*

35. In March 2021, the Committee considered the reflections and learning from the coronavirus pandemic. These included the perceived expectations of the GOsC in the context of the pandemic; the consideration of the GOsC as organisation and how it might facilitate/develop an evolution around professional judgement and consideration and perceptions of the GOsC systems. The Committee also noted the publication of case studies in relation to re-integrating the patient voice back into regulation and producing COVID specific updated guidance; our reflections on health regulation in the context of the pandemic within a Regulatory Briefing document produced by Nockolds Solicitors and production of a briefing about osteopathic regulation as a resource to support employers, other health professionals and others across the UK to increase knowledge about the quality of osteopathic regulation across the UK.

### *Development of the Profession*

36. In June 2020, the Committee considered the development of the profession in the context of the coronavirus pandemic exploring matters such as the impact of the pandemic on undergraduate and pre-registration and CPD, perceptions of the

## Annex A to 17

profession on the role of the regulator and its function, and the need to both preserve osteopathic identify and osteopaths' work in the future and the diverging health systems and needs in the four countries.

37. In March 2021, the Committee noted the White Paper, published in February 2021, and proposals to enable change to the shape of the regulatory sector and the work of the Osteopathic Development Group which considers the sector and how osteopathic practice delivers care to patients in a changing environment. The Committee also provided space on the agenda for an update from the observers with speaking rights and heard from the Council of Osteopathic Educational Institutions, the Institute of Osteopathy, the National Council for Osteopathic Research and the Osteopathic Alliance. The Committee appreciated the opportunity to hear reports from the external observers and to better understand the external environment.

### *Committee Development*

38. The Committee was redesignated the Policy and Education Committee (from the previous Policy Advisory Committee) and a new Chair began her role in June 2021, shortly after her appointment to Council. It was important to evaluate the Committee's function and effectiveness. The Chair instigated a Committee Review and Evaluation exercise in March 2021 using a questionnaire adapted from the Board Practice team at the Tavistock Institute.

39. In April 2021, all members of the Committee and those who are in regular attendance were invited to complete the questionnaire. It comprised 20 Likert scale questions covering the full range of Committee activity and function with two open questions to which respondents could write free text comments.

40. The feedback from the review and evaluation will inform a facilitated discussion at the private meeting of the Committee in June 2021.

### *Membership*

41. During the period April 2020 to March 2021 the Policy and Education Committee membership comprised:

<b>Name</b>	<b>Member details</b>	<b>Meetings attended</b>
Daniel Bailey	Council registrant member	7/7
Sarah Botterill	Council lay member	7/7
Professor Deborah Bowman (Chair)	Council lay member	7/7
Dr Marvelle Brown	External lay member	6/7
Bob Davies	External registrant member	7/7

## Annex A to 17

<b>Name</b>	<b>Member details</b>	<b>Meetings attended</b>
Elizabeth Elander	Council registrant member	6/7
Dr Joan Martin	Council lay member	7/7
Professor Raymond Playford	External lay member	7/7
Nick Woodhead	External registrant member	7/7

42. Members' allowances and expenses for the Committee in 2020-21 were £7,570. In 2019-20 members' allowances and expenses were £10,408. The decrease is due to all meetings being held online as a consequence of the pandemic so although attendance fees for external members increased, venue, catering and travel expenses decreased.

43. Observers with speaking rights attended public meetings:

<b>Name</b>	<b>Meetings attended</b>
The Council for Osteopathic Education Institutions	2
The Institute of Osteopathy	3
The National Council for Osteopathic Research	3
The Osteopathic Alliance	3

# Annex A to 17

## Terms of reference and membership of the Policy and Education Committee

The role of the Policy and Education Committee is to contribute to the development of Council policy. To do this it will:

- a. Advise Council on all matters of policy including:
  - i. The standards required for initial registration and appropriate means for assessing those standards.
  - ii. On all matters relating to pre-registration education and training of osteopaths, including the standards of osteopathic practice required for registration.
  - iii. Post-registration education and training, including the requirements for ensuring osteopaths remain fit to practise.
  - iv. The management, investigation and adjudication of concerns about the fitness to practise of registrants.
  - v. Matters relating to the exercise of powers under section 32 of the act (protection of title).
  - vi. The development of the osteopathic profession.
  - vii. Measures to encourage research and research dissemination within the osteopathic profession.
  - viii. Any research needs to support the GOsC's work.
- b. Take into account the decisions of fitness to practise committees, information from the PSA and other relevant sources, and external legal or other requirements.
- c. Ensure that policy development has been informed by effective engagement with the full range of the GOsC's stakeholders.
- d. Make an annual report for Council on the work of the Committee.

The Committee will also undertake the statutory functions that are reserved to the Education Committee, which are to:

- a. Advise Council on the recognition of qualifications in accordance with section 14(6) of the Act.
- b. Appoint and manage the performance of visitors to conduct the evaluation of courses under section 12 of the Act.
- c. Advise Council on matters relating to the withdrawal of recognition of a qualification in accordance with sections 16(1) and 18(5) of the Act.

## **Annex A to 17**

- d. Exercise powers to require information from osteopathic educational institutions in connection with its statutory functions in accordance with Section 18 of the Act.

### **Meeting Frequency**

Three times yearly or more frequently if required. Some business may be conducted out of committee where required.

### **Membership**

#### *Ordinary members*

- Five members of Council, of whom two shall be osteopaths and three shall be lay members. One of the lay members shall be appointed by Council to be Chair of the Committee.
- Four members who are not members of Council.

#### *Co-opted members*

The Committee may co-opt up to five members in accordance with Rule 3 of the Statutory Committee Rules.

#### *Observers with speaking rights*

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 Education Committee.

### **Quorum**

Five, of which:

- at least one must be a lay person and one must be an osteopath.
- at least two must be members of Council and two must be members who are not members of Council.

## Remuneration and Appointments Committee Annual Report 2020-21

1. The Remuneration and Appointments Committee (RaAC) met on three occasions during 1 April 2020 until 31 March 2021: in June 2020, October 2020 and March 2021.
2. The terms of reference of the RaAC are attached at Annex A, and the prior year's Annual Report is annexed for comparison purposes.

### *Appointments*

3. During the course of the year, the RaAC received papers considering the following non-executive appointments processes.
4. Five Fitness to Practise positions:
  - a. Two members of Investigating Committee (IC), one lay and one registrant position.
  - b. Three members of Professional Conduct Committee (PCC), one lay Chair of the PCC and two lay members of which one was eligible for panel chair.
5. The Committee considered the following:
  - a. Advertising and promotional strategy;
  - b. diversity and inclusion throughout the process;
  - c. the information pack, application forms and competencies which underpin the process; and,
  - d. interview/assessment process.
6. The recruitment process generated a significant volume of work with +250 applications received for the five positions. This was the most successful recruitment campaign, in terms of the number of applications received, that GOsC has ever run.
7. The Committee considered re-appointment processes for:
  - a. Two Council members;
  - b. Four members of Policy and Education Committee;
  - c. Six members of Investigating Committee; and
  - d. Eight members of Professional Conduct Committee.
8. The Council member re-appointment process was overseen by the RaAC, scrutinised by the Professional Standards Authority, with the re-appointments approved by the Privy Council. The Policy and Education Committee and Fitness to Practise re-appointment process was overseen by RaAC with the re-appointments approved by Council. The latter process included a new stage which saw the RaAC scrutinise the recommendation decisions of the Chair of Council.

## **Annex B to 17**

### *Staff cost of living pay award*

9. In June 2020, the RaAC received a paper considering whether to award staff a cost of living pay increase for the year 2020-21. The RaAC had deferred the decision on this at the March 2020 RaAC due to uncertainty arising from the global coronavirus pandemic. The RaAC agreed to award staff a cost of living pay increase of 2% taking effect from 1 October 2020 in place of the usual date of 1 April 2020.

### *Reward and recognition review*

10. In June 2020, the RaAC received a paper setting out phase one of reviewing the reward and recognition strategy. This paper proposed a scheme to enable recognition of high performance. This included non-financial and financial mechanism reward options. The RaAC agreed to this approach incorporating the feedback given by Committee members.
11. In October 2020, the RaAC considered the feedback arising from a staff consultation on recognising high performance using financial and non-financial methods of recognition. RaAC also considered the GOsC's approach to reviewing the overall pay and benefits package offered to staff. The RaAC agreed to incorporate the feedback from RaAC to strengthen the reward and recognition strategy and to bring a paper to March 2021 RaAC, providing benchmarking data on Job Evaluation and benefits provided across the healthcare regulatory sector.
12. In March 2021, the RaAC received a paper looking at the second half of the reward and recognition strategy in relation to pay and non-pay benefits including pay models and consideration of job evaluation. The RaAC agreed to enhancements to the staff benefits package and to refresh the pay model using the Croner Reward Job Evaluation scheme with some agreed adaptations.

### *Staff survey*

13. In October 2020, the RaAC received a paper considering the approach to conducting a staff survey and the Executive agreed to incorporate the feedback from members into the design of the staff survey.
14. In March 2021, the RaAC reviewed the unfiltered results and the response of the Executive team and the RaAC noted the results.

### *Council Associates*

15. In March 2021, the RaAC received a paper exploring the concept of 'Council Associates', providing osteopaths with the opportunity to shadow Council to enhance their understanding of how governance works in practice. The RaAC agreed for an updated paper to be presented to the June 2021 RaAC meeting addressing the discussion points.

## **Annex B to 17**

### *Non- Executive fees and allowances*

16. In October 2020, the RaAC considered a paper reviewing non-executive fees and allowances for 2021-22 and specifically, the fee paid to Investigating Committee members for screening a case. The RaAC asked the Executive to present benchmarking data across health care regulators to RaAC by email, outside committee by the end of November 2020.
17. RaAC agreed to recommend to Council for approval: no change to Chair of Council, Council members and Chair of Committee's annual allowances or Council member expenses. It also agreed to recommend an increase in the Screeners Fee based on a tiered system with effect from 1 January 2021. This was approved by Council.

### *Equality, Diversity and Inclusion*

18. In March 2021, the RaAC received a paper outlining the key findings of an independent audit on Equality, Diversity and inclusion (EDI) and the initial actions the Executive proposed to take this work forward. The RaAC considered the draft Equality, Diversity and Inclusion Framework 2021-24 and provided feedback to the Executive.
19. As part of the RaAC's work on non-executive recruitment it has considered EDI implications and specifically how to attract a wider diversity of applications. In the year RaAC suggested changes to the advertising strategy and it monitored the diversity of applications received. The applications for the Fitness to Practise vacancies were the most diverse that GOsC has received.

### *Staff turnover*

20. During the year the staff turnover percentage was 8%. This compares to 12% during the year 2019-20.

### *Redundancies*

21. During the year there were two redundancies – one in Registration and Resources and one in Communications. This compares to no redundancies during the year 2019-20.

### *Sickness absence*

22. In the reporting period, the average number of sickness absence days taken by staff at the GOsC was 0.7 days. This compares to 1.8 days during the previous year 2019-20.



## Annex B to 17

### *Disciplinary, Grievance and Whistleblowing*

23. There has been no disciplinaries, grievances or whistleblowing reported during this period.

### *Committee membership*

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

<b>Name</b>	<b>Member details</b>	<b>Dates of membership</b>	<b>Meetings attended</b>
Dr Bill Gunnyeon (Chair)	Council lay member	All year	3/3
Caroline Guy	Council registrant member	All year	3/3
Simeon London	Council registrant member	All year	3/3
Kate Husselbee	External lay member	All year	3/3
Dr Denis Shaughnessy	Council lay member	All year	3/3

NB: The above table represents attendance at the three scheduled meetings of the Remuneration and Appointments Committee and does not reference any extraordinary meetings which took place in the reporting period.

### *Cost of Remuneration and Appointments Committee-related work*

25. The costs of running the RaAC and its related activities, excluding staff time, is £4k in 2020-21 compared to £17k in 2019-20. This reflects the cost of the Council recruitment processes undertaken in the year.

26. The table below reflects the cost of the committee and employment costs.

<b>Committee-related</b>	<b>Costs paid 2020-21 £</b>	<b>Costs paid 2019-20 £</b>
Committee members: fees and expenses	612	1,498
Governance appointments	3,065	15,094
<b>Total</b>	<b>3,677</b>	<b>16,592</b>
<b>Employment costs for all GOsC staff</b>		
Wages and salaries	1,172,559	1,206,369
Social security costs	122,970	125,603
Other pension costs	111,993	106,969
Recruitment	20,156	17,109
Learning and development	22,103	19,956
Other employment costs	12,681	16,958
<b>Total</b>	<b>1,462,462</b>	<b>1,492,964</b>

## Annex B to 17

### Terms of Reference

The Remuneration and Appointments Committee oversees appointment, performance and remuneration policy in relation to Council, non-executives<sup>1</sup> and staff of the GOsC and makes recommendations to Council. To do this it will:

- a. Advise Council on the arrangements for the appointment, induction and performance review of the Chair and members of Council in accordance with the PSA's standards.
- b. Appoint the panel, including independent members, for appointing the Chair and members of Council.
- c. Provide assurance of high standards in the appointment and performance review of all other Council appointees including non-Council members of committees and other Council appointees.
- d. Advise Council on its structure, composition and competences.
- e. Make arrangements for the performance review process for Council as a whole.
- f. Make arrangements for the appointment of the Chief Executive and make a recommendation to Council.
- g. Following appointment, make arrangements for the formal review of the probation period of the Chief Executive and Registrar to be informed by feedback from Council, staff and stakeholders.
- h. Advise Council that the formal review of the probation period of the Chief Executive and Registrar has been completed and clarify whether the probation period has been successfully passed or whether the probation period has been extended.
- i. If required, oversee a performance management process for the Chief Executive and Registrar, which will ensure feedback is provided to them by the Chair of Council supported by two members of the Remuneration and Appointments Committee.
- j. If appropriate, make recommendations to Council concerning the removal of the Chief Executive and Registrar.
- k. Consider and approve the remuneration of the Chief Executive on an annual basis.
- l. Receive an annual report from the Chief Executive on HR strategy.

---

<sup>1</sup> Non-executives are defined as members of Council, statutory and non-statutory committees and any other individuals, other than the Chief Executive and the executive team, appointed from time to time to undertake tasks on behalf of Council.

## **Annex B to 17**

- m. Consider and approve recommendations of the Chief Executive in relation to pay, performance and reward of all other staff.
- n. Consider any issues in relation to the remuneration of non-executives (including the requirements of the Charity Commission), review the remuneration of non-executives annually and make recommendations to Council.
- o. Consider any issues in relation to the performance review of non-executive members and make recommendations to Council.
- p. Make an annual report to Council on the work of the Committee.

### **Meeting Frequency**

Three times yearly or more frequently if required. Some business may be appropriately conducted out of committee.

### **Membership**

The Chair of Council, one lay member and two osteopath members of Council and one external lay member with appropriate expertise.  
There are no co-opted members.

### **Quorum**

Three members – the Chair of Council, and at least one lay member and one osteopath member.