



Council
20 July 2021
Chief Executive and Registrar's Report

Classification	Public
Purpose	For noting
Issue	A review of activities and performance since the last Council meeting not reported elsewhere on the agenda.
Recommendations	To note the content of the report.
Financial and resourcing implications	The financial report for the two months to May 2021 is attached at Annex B. On an annual basis the Audit Committee considers a set of performance measures. The performance measurement report is attached at Annex C.
Equality and diversity implications	The paper sets out what we have done since the previous Council meeting on matters related to equality, diversity and inclusion.
Communications implications	These are discussed in the report.
Annexes	A. Business Plan monitoring as at 30 June 2021 B. Financial report: two months to 31 May 2021 C. Performance measurement report 2020-21
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Key messages from this paper:

- The report sets out the activities undertaken by the team since the previous Council meeting not reported elsewhere on the agenda. Headlines include:
 - Our PSA performance review for 2020-21 continues. PSA has asked a further set of targeted questions in response to our submission to the initial set of targeted questions. We have responded and wait to hear from PSA.
 - The Chair of Council has written to the new Secretary of State for Health and Social Care welcoming him into the role.
 - We submitted our response to the Department of Health and Social Care (DHSC) consultation on regulatory reform titled, '[Regulating healthcare professionals, protecting the public](#)'.
 - KPMG have been appointed by the DHSC to undertake an independent review into the number of regulators.
 - We have met with the new Chair of the Council of Osteopathic Education Institutions (COEI), Ian Fraser, twice since the previous meeting of Council. We discussed the strategic direction of COEI and have agreed to meet with Ian on a monthly basis.
 - GOsC is now a signatory on the new edition of the Emerging Concerns protocol.

Introduction

1. This report gives an account of activities of note that have been undertaken by the Chief Executive and Registrar and colleagues since the previous Council meeting, which are not reported elsewhere on the agenda.

Professional Standards Authority for Health and Social Care (PSA)

Bilateral meeting:

2. In early July 2021, the Chief Executive and Registrar met with the Chief Executive of the PSA, Alan Clamp for a 1/1 meeting. These meetings happen quarterly and discussion at the July meeting centred on the DHSC consultation and the independent review of professional regulators; equality, diversity and inclusion; the performance review process and the PSA strategic and business planning development.

Performance review:

3. The 2020-21 Performance Review commenced in January 2021 and the PSA Scrutiny Panel met in March. The PSA Scrutiny Panel received an initial

recommendation to seek further information against five standards and a set of targeted questions were received in April 2021. We responded to those questions in May 2021.

4. In June 2021 we received a further set of targeted questions against two standards. We submitted a response to those questions within the two week deadline and we wait to hear from the PSA in terms of the outcome.

Department of Health and Social Care (DHSC) and the Department for Business, Energy and Industrial Strategy (BEIS)

DHSC:

Secretary of State for Health and Social Care

5. Sajid Javid was appointed as the new Secretary of State for Health and Social Care in June 2021. The Chair of Council has written to the Secretary of State welcoming him into the role and highlighting two main points:
 - a. We support the DHSC regulatory reform agenda and that there is a need for legislative change to happen at pace for all regulators, within a defined timescale, to avoid the unintended introduction of a two-tier regulatory system.
 - b. That we will engage constructively with the independent review commissioned by DHSC into the number of regulators, and that whatever the outcome, we believe the determining factor should be that the potential disruption from any proposed structural change is outweighed by significantly enhanced patient and public protection

Regulating healthcare professionals, protecting the public

6. GOsC submitted its response to the DHSC consultation, '[Regulating healthcare professionals, protecting the public](#)' on 14 June 2021. We published the [GOsC response](#) online and supporting the publication was a news article and associated social media.
7. From a strategic perspective, we welcome many of the proposals which we see as meeting the challenge of modernising the regulatory system and freeing regulators from prescriptive, outdated legislation. Within our response we have sought to be constructive and we have set out where we consider proposals could be clarified or strengthened. Examples included:

Governance and Operating Framework - Unitary boards: the GOsC view is that we would continue to operate effective governance with any board model, but we feel further consideration of the board composition, and specifically the involvement of registrants, is needed to ensure the future legitimacy and therefore the impact of Councils. In our detailed response we

have referenced research into the effectiveness of regulation which demonstrates that working with people and helping to raise understanding is a driver behind registrants meeting standards.

Education and Training - Continuing Professional Development and Revalidation: the GOsC view is that Continuing Professional Development and revalidation are ways of ensuring that the register is not simply a historical record of qualifications but that registrants are required to demonstrate, in a proportionate way, that they continue to be up to date and fit to practise. This is an important tool for ensuring patient safety.

Registration - publication of data and annotations to Registers: the GOsC is supportive of the proposals which enable regulators to publish data about registrants and to annotate registers with appropriate information, enabling patients to effectively identify practitioners, as this very firmly supports public protection.

Fitness to Practise - Registrar review powers: the GOsC view is that we agree with this proposal but we qualify our response with the observation that we consider the appointment of an independent reviewer as being advantageous and worth further consideration. An independent reviewer is something operated in other sectors (such as accountancy regulation) and a similar model could be applied to healthcare regulation.

8. We have also set out where we disagree with some proposals and our rationale for that view. Some examples include:

Education and training - power to set and administer exams or other assessments should not apply to approved courses or programmes of training: the GOsC view is that it is important to look to the future, where there may be more diverse models of quality assurance for countries in a context where we are pursuing a more global approach to trade agreements and so we suggest such a fetter is not put into legislation.

Registration - suspension from the Register: the GOsC view is that the proposal to suspend individuals for administrative reasons, risks blurring the relationship between the regulator and registrants, with regulators potentially adopting registration processes more akin to membership bodies.

Fitness to Practise - Grounds for action: the GOsC view is there should be a separate 'ground for action' in relation to adverse physical and/or mental health. This should not be subsumed within either lack of competence or misconduct as it is a separate concept, albeit that there may be overlap in certain cases. We also consider there should be a separate 'ground for action' for conviction.

Independent review into the number of regulators

9. Within the proposed Health and Care Bill are expected proposals to extend the powers of the Secretary of State for Health and Social Care so that they may, using secondary legislation, take a profession out of regulation, close a regulator, have the power to extend the ability for a regulator to delegate functions, and clarify which other groups could be brought into regulation.
10. The DHSC have commissioned KPMG to undertake an independent review of how these powers might be used which includes a review of the regulatory landscape and the number of regulators.
11. We understand that KPMG will commence activity in July/August with a desktop review before undertaking meetings, interviews and data collection from the regulators from August/October, before presenting their final report to DHSC by the end of this year.
12. We look forward to engaging with KPGM on this activity.

Council of Osteopathic Educational Institutions (COEI)

13. In June 2021, the Chief Executive and Registrar, Director of Education, Development and Standards and Policy Manager, met with the new Chair of COEI, Ian Fraser. Ian is the Principal of the European School of Osteopathy.
14. The productive meeting considered the strategic direction of COEI, the relationship between COEI and the GOsC and future ways of working. We have since met with Ian again in July and as part of our commitment to collaborative working, we have agreed to continue to meet monthly.

Emerging Concerns protocol

15. We have previously reported to Council that the GOsC would be a signatory on the next iteration of the Emerging Concerns protocol. We see this as another demonstration of osteopaths being recognised as part of the wider healthcare system.
16. The Emerging Concerns protocol was published on 18 June 2021 and we have published a news article announcing that we have signed up to the protocol alongside fellow professional healthcare regulators and system regulators.

Panel Discussion about Sexual Harassment in the Workplace

17. In June, the GOsC Policy Manager Head of Communications, Engagement and Insight attended a panel discussion about sexual harassment in the workplace to help provide insights into boundaries issues to assist with our work to help reduce the number of concerns raised in this area.

18. Boundaries issues are complex, challenging and often highly emotive, and sometimes they are historical. Key issues we identified were around the significance of power inequalities and 'victims' being vulnerable. Common themes raised in employment were around senior people not understanding, chronic victim blaming, and a common belief that any incidents are just isolated - just a misunderstanding that could be resolved if the perpetrator had the chance to explain their behaviour.
19. We are reflecting on this workshop, what it means in our context and how it helps to inform our communications on this topic in the coming months ahead.

Equality, Diversity and Inclusion (EDI)

20. Since the previous Council meeting, we have held focus groups with stakeholders on the draft EDI Framework 2021-24. Insight from those sessions has been incorporated into the EDI paper considered later on the agenda.
21. We have continued to promote and support, through social media and internal channels, our commitment to EDI such as changing our logo to include a Pride theme in June 2021, tweeting messages at the end of EID and also to acknowledge National Windrush Day.

Devolved nations

22. The time between the May Council meeting and the July Council meeting is short and, as such, we do not have updates to provide to Council in relation to our work with the devolved nations beyond what we have previously reported.

Staffing

23. Since the previous meeting of Council there have been two staff changes. Farhan Kabir, Regulation Officer, has left the GOsC and we have appointed Maxine Supersaud permanently to the position of Head of Resources and Assurance.

External meetings – bringing insight into our business

24. Since the previous meeting we have participated in several external events with stakeholders and partner organisations which ensure that we are able to bring insight to our work. These meetings include:
 - Seminar: Ethics in extraordinary times: practitioner experiences during the covid-19 pandemic - Chair/Chief Executive in attendance
 - Chief Executives of the Regulatory Bodies forum
 - Sub-group of the Chief Executives (CO-POD)
 - Directors of Fitness to Practice forum
 - Directors of Resources of the Health Care Regulators forum
 - Meeting with Cameron Paulberg, Osteopathic Council of Ireland

- Meeting with Nick Jones, Chief Executive and Registrar, General Chiropractic Council
- Meeting with Karen Middleton, Chief Executive, Chartered Society of Physiotherapists
- DHSC: regulatory reform meetings
- Osteopathic Alliance board meeting
- Institute of Osteopathy Policy Committee
- Osteopathic Development Group meeting
- Inter-regulatory forum: Care Quality Commission, Emerging Concerns
- Inter-regulatory forum: Alliance of UK Regulators in Europe
- Inter-regulatory forum: Equality, Diversity and Inclusion
- Inter-regulatory forum: research
- Inter-regulatory: horizon scanning workshop
- PSA Policy Forum
- Audit closure meeting

Progress against the 2021-22 Business Plan

25. The Business Plan monitoring report as at 30 June 2021 is set out at Annex A. All activities are currently on track which is to be expected so early into the new business plan year.

Financial report

26. The financial report for the two months to 31 May 2021 is set out at Annex B.

Performance measurement

27. Annually, the Audit Committee receives a performance measurement report. This is also presented annually to Council and is attached at Annex C.

Recommendations: to note the content of the report.

Annex C to 6

Performance measurement 2020-21

Area of performance	Performance measures	Comments
Meeting our statutory duties and maintaining confidence	1. The public and registrants continue to have confidence in our work	<ul style="list-style-type: none"> • 2020-21 saw GOsC fulfil its regulatory functions through a global pandemic. • During this period we needed to develop, at pace, a range of resources both to support the profession and to maintain delivery of our core functions, such as the Interim Infection Control Guidance and the Remote Hearings Protocol. • In developing guidance to support our fitness to practise process, we actively took measures to reintegrate the patient voice into these resources, as we had identified very early in the pandemic, that government guidance was being issued so quickly the patient was significantly reduced and/or removed. • The impact of the pandemic saw a significant increase in communications to the GOsC¹ much of which contained a level of frustration and anger over the pandemic, for example, around the decision not to reduce fees. This was consistent with the experiences from other healthcare regulators. • Council members, who are also Charity Trustees, needed to ensure the future financial sustainability of the organisation. This was in conflict with the expectations of some in the profession who were seeking a reduction in registration fees.

¹ As an example, one GOsC email address received a 265% increase in email traffic over a six-week period (March 2020 - April 2020) compared to the same period the year before.

Annex C to 6

Area of performance	Performance measures	Comments
		<ul style="list-style-type: none"> • To support registrants within the confines of its statutory framework, Council agree to a direct debit deferral scheme for those registrants renewing their registration in the months of May, June, July and August. This saw the first two months of the registration year be payment free, which eased some financial pressure. • The increase in communications highlighted that there was a misunderstanding around the difference between the role of the regulator and the role of the professional association. We took steps to address this through an article within the osteopath magazine.² • We know that the experience of registrants during the pandemic has varied, and this is demonstrated in communications we have received where registrants have felt both supported and unsupported by the regulatory approach we taken on the same subject. • We realised we needed to introduce a new Communications and Engagement Strategy to enhance our communications approach. The new strategy was developed in 2020 and approved by Council in February 2021. • Our decision to develop a new Communications and Engagement Strategy was supported by the findings of research conducted by

² <https://www.osteopathy.org.uk/news-and-resources/document-library/about-the-gosc/the-osteopath-july-august-2020/>

Annex C to 6

Area of performance	Performance measures	Comments
		<p>Professor Gerry McGivern, on UK osteopaths views and experiences of their professional regulation. One headline from the research was that there was greater confidence in the regulation of osteopaths (56% in 2020; 44% in 2014) but less confidence that the GOsC communicates well (35% in 2020; 43% in 2014). Further information on the research can be found in the osteopath magazine article from Spring 2021³.</p> <ul style="list-style-type: none"> • In 2020 we again undertook a CPD Evaluation Survey, which we have previously reported to Audit Committee as an indication in the level of confidence in the GOsC through our implementation of the new scheme. • Through the 2020 survey, we have seen 70% of osteopaths report they have used the four themes of the Osteopathic Practice Standards (OPS) to identify their learning needs which is a key outcome we are looking to achieve. This is a 19% increase on 2019 figures, suggesting more osteopaths are steadily using the OPS when planning and recording their CPD. • Further, 84% of the sample reported linking their CPD activities during the last 12 months to the four themes of the OPS, which is a 41% increase on 2019 figures.

³ <https://www.osteopathy.org.uk/news-and-resources/document-library/the-osteopath/the-osteopath-spring-21-vol-23-issue-6/>

Annex C to 6

Area of performance	Performance measures	Comments
	2. We continue to meet the PSA's standards of good regulation	<ul style="list-style-type: none"> • The outcome of the PSA performance review into our performance for 2020-21 is outstanding. • Following the PSA initial assessment of our performance, we were asked to respond to specific targeted questions across five standards. We submitted evidence towards the end of May 2021. The PSA have since asked a further set of Targeted Review questions.
	3. Privy Council and Department of Health intervention remain unnecessary	<ul style="list-style-type: none"> • Privy Council and Department of Health default powers have not been exercised.
	4. Appeals against statutory decisions are not upheld	<ul style="list-style-type: none"> • In the reporting year the High-Court handed down a reserved judgment in an appeal case Sayer v GOsC. The appeal was dismissed in its entirety and the Appellant ordered to pay costs of c.£14k. • In the reporting year the High-Court quashed the decision of the Professional Conduct Committee in the case of Wray v GOsC. The GOsC has been granted permission to appeal the case to the Court of Appeal and this is scheduled to be heard in October 2021.
Providing demonstrable public value	1. Stakeholders – including patients, registrants and partners – are satisfied with our performance	<ul style="list-style-type: none"> • Stakeholders were invited to participate in our public consultations in 2020-21, of which there were three: <ul style="list-style-type: none"> ○ Guidance on insurance requirements for osteopaths ○ Reduced registration fee ○ Screeners Guidance

Annex C to 6

Area of performance	Performance measures	Comments
		<ul style="list-style-type: none"> • In the reporting year we identified the need to introduce a new Communications and Engagement Strategy 2021-24 to enhance the way in which we listen, engage and communicate with our stakeholders. Insight gathered from our communications will inform whether our stakeholders are satisfied with our performance. <ul style="list-style-type: none"> ○ In the year we introduced large scale online CPD webinars and, for the first time, a series of fitness to practice webinars designed to myth-bust. ○ The CPD webinars were attended by over 200 osteopaths and our fitness to practise webinars saw an attendee increase of 84%. Each webinar received very positive feedback. ○ Smaller scale CPD webinars were also rolled out with overall attendance equal to c.15% of the osteopaths practising in the UK.
	<p>2. We maintain/improve standards measured through:</p> <ol style="list-style-type: none"> i. Outcomes of fitness to practice complaints ii. Volume/types of complaints iii. Engagement in new CPD activities and processes iv. Implementation/ outcomes of development projects v. Reduction in conditions imposed 	<ul style="list-style-type: none"> • The Investigating Committee considered an equivalent number of cases (39 compared to 40 the previous year) with 18 cases referred to the Professional Conduct Committee or Health Committee (a reduction on 26 cases the previous year). • The Professional Conduct Committee concluded 26 cases, in 16 of those a sanction was imposed (24 cases concluded and 13 sanctions in the previous year).

Annex C to 6

Area of performance	Performance measures	Comments
	<p>on Recognised Qualifications</p> <p>vi. Successful s32 activity (including prosecutions)</p>	<ul style="list-style-type: none"> • There was an increase in removals from the Register (5 in 2020-21 compared to 1 in 2019-20) and a decrease in 'allegation not proven' outcomes compared to the previous year (8 in 2020-21 compared to 11 in 2019-20). • Engagement with the new CPD scheme continued to be positive with registrants moving through their CPD cycle. • One institution saw the removal of their 'recognised qualification' expiry date enabling more flexibility in terms of visits. • 38 cease and desist letters were issued. In the reporting period, 39 cases were resolved. One successful section 32 prosecution was heard with costs being awarded to GOsC and two further prosecution proceedings have commenced.
Using our resources to operate effectively	<p>1. We meet a range of KPIs including:</p> <ul style="list-style-type: none"> i. Processing of registration applications ii. Handling of fitness to practise complaints iii. Performance against customer service standards 	<ul style="list-style-type: none"> • Registration application processing was all within KPI. • Median time taken for investigating a complaint was 26 weeks (in line with target of 26 weeks). • Median time taken for concluding a hearing was 66 weeks (above our target of 52 weeks but this was impacted by the pandemic). • Corporate complaints are reported to the Audit Committee and in the year there were two.

Annex C to 6

Area of performance	Performance measures	Comments
		<ul style="list-style-type: none"> • There were no whistleblowing cases, incidents of fraud and no significant data breaches.
	<p>2. We implement improvements identified from audit and other feedback</p>	<ul style="list-style-type: none"> • Audits undertaken in governance and equality, diversity and inclusion with results reported back to Audit Committee and Council. • The equality, diversity and inclusion audit informed the development of a new Equality, Diversity and Inclusion Framework 2021-24, which sets out a range of activities for the Executive to implement so we can enhance our work in this important area of business. • Five-year assurance audit plan agreed for 2019-24. Focus of audits in third year of plan being fitness to practise and a review of GOsC performance in the context of regulatory reform. • Audit Committee considered GOsC reflections on PSA performance review report for 2019-20. • The FTP decision review group did not meet in 2020-21 due to the impact of the pandemic, but this activity will recommence in 2021-22. • No significant issues were identified by the auditors within the annual financial audit.

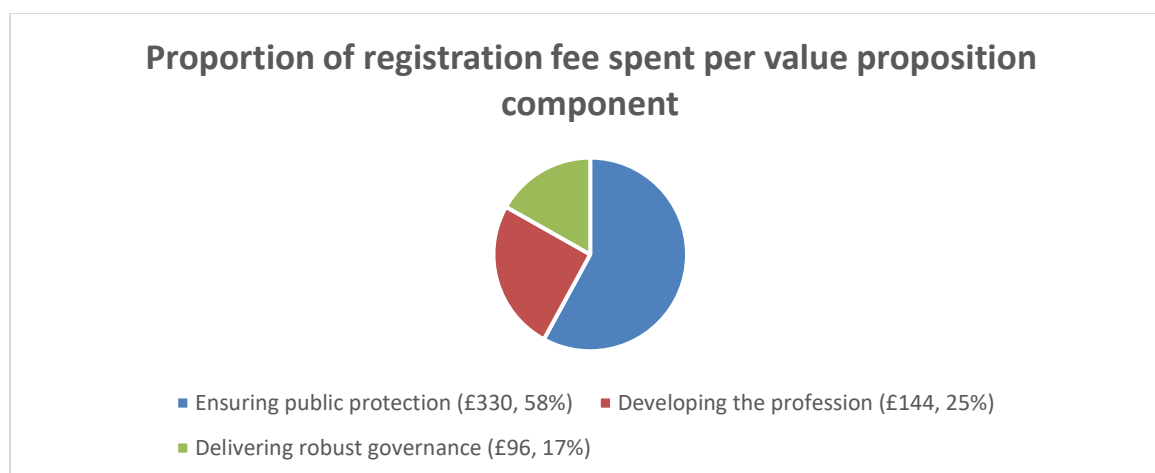
Annex C to 6

Table showing Value Proposition, expenditure in year, % of total budget and proportion of £570 registration fee

Value Proposition components	Expenditure in year ⁴ £	Percentage of total spending %	Proportion of £570 registration fee used £
Ensuring public protection	1.64m (2021)	58% (2021)	330 (2021)
	1.65m (2020)	57% (2020)	323 (2020)
Developing the profession	0.71m (2021)	25% (2021)	144 (2021)
	0.77m (2020)	26% (2020)	151 (2020)
Delivering robust governance	0.48m (2021)	17% (2021)	96 (2021)
	0.49m (2020)	17% (2020)	96 (2020)

What does the registration fee fund?

The headline registration fee of £570 is broken down to show the amount of spend across the GOsC value proposition in 2020-21.



⁴ Excluding investment losses and/or charges