

Council 20 July 2023 **Committee Annual Reports** 

Classification **Public** 

**Purpose** For noting

Each Committee is required to report annually on its **Issue** 

work to Council.

**Recommendations** To note the Annual Reports of the:

a. Policy and Education Committee

b. People Committee c. Audit Committee

**Financial and resourcing** 

implications

These are set out in the papers.

**Equality and diversity** implications

Each committee considers matters relating to equality and diversity and these are set out in more

detail within the Committee Annual Reports.

**Communications** implications

None arising.

**Annexes** A. Policy and Education Committee Annual Report

> B. People Committee Annual Report C. Audit Committee Annual Report

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### **Annual Report of the Policy and Education Committee 2022-23**

### 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 in giving 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 appointed external members. 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.
- 5. These observer with speaking rights 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)
- 6. Whilst specifications for visits and 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.

### Quality assurance of 'recognised qualifications'

7. During the year, as part of offering advice to Council about the recognition of qualifications, qualification change notifications and ensuring standards, the Committee considered the following:

Activity	2022-2023
Consideration of Education Visitor RQ reports (including new RQs, renewal of RQs and monitoring visits)	Three OEIs
RQ change notifications and consideration of reports and evidence submitted in relation to general and specific conditions.	Four OEIs

Activity	2022-2023
Consideration of annual report analyses (including external examiner and internal annual monitoring reports, and information about student fitness to practise.)	Seven OEIs
Recommendation of withdrawal of RQ	One OEI

### Graduate Outcomes and Standards for Education and Training

- 8. The Committee considered the consultation analysis and updated Graduate Outcomes for Osteopathic Pre-Registration Education and Standards for Education and Training following the work which had been undertaken in the previous business year.
- 9. The Graduate Outcomes and Standards for Education and Training were recommended to Council for publication and subsequent implementation from 1 September 2022.

Quality Assurance – update to Interim Quality Assurance Handbook

- 10. Following the implementation of specific Standards for Education and Training (SET) in relation to osteopathic education, OEIs were required to demonstrate how they meet the SET.
- 11. To facilitate this in relation to the forthcoming RQ visits, the Interim Quality Assurance Handbook was updated to reflect the SET, alongside a revised mapping tool.
- 12. The Committee approved the requisite changes.

Quality Assurance - Annual Report template 2021-22

13. The Committee considered an updated version of the annual report template for 2021-22. The template enabled OEIs to update the previous year's response as appropriate, and included a new section aimed at encouraging a more reflective response in relation to good practice, challenges, and risk management.

Quality Assurance – development of a risk-based approach

14. The Committee received and discussed a report about developments to the risk-based quality assurance approach. The paper explored the impact of introducing specific Standards for Education and Training, and enhancing consistency between annual reporting and Recognised Qualification review visits, with a framework to inform risk-focused decision-making.

Continuing Professional Development (CPD)

15. During 2022-23, the CPD evaluation focussed on analyses of data from registration renewal, assurance and verification.

Fitness to Practise: Osteopathic Practice Standards and Adjunctive Therapies

- 16. The Committee received the results of the consultation in relation to the draft 'Guidance on the application of the Osteopathic Practice Standards in relation to adjunctive therapies, non-osteopathic treatments or other work undertaken by osteopaths' and considered changes made as a result. Additionally the Committee considered the Equality Impact Assessment.
- 17. The guidance was considered and recommended to Council for publication.

Fitness to Practise (FtP): Draft Interim Order Guidance and Draft Practice Note on Undertakings

- 18. The Committee was asked to consider the revised Guidance on Interim Orders and the Practice Note on Undertakings.
- 19. Revisions to the documents followed an external audit (undertaken in August and September 2021) of all Investigating Committee and Professional Conduct Committee applications for an interim order during the period between January 2020 March 2021.
- 20. While no concerns regarding patient safety were identified within the audit report, the recommendations included refreshing GOsC's guidance on imposing interim orders and the practice note on undertakings in relation to risk assessment and proportionality. It also recommended making the procedure for undertakings clearer.
- 21. The Committee recommended the revised documentation to Council.

Transition into practice

- 22. A paper was presented to the Committee exploring how to support new graduates making the transition into practice, with the aim being to build communities of practice for new graduates.
- 23. The paper proposed a schedule of research activities to inform our understanding, and a timeline for recommendations and communications arising from the research. Further reports will follow to the Committee.

Whistleblowing Policy

- 24. The GOsC Whistleblowing Policy, which had been in place since 2014, was reviewed and presented to the Committee. Practical changes were made to the policy to improve accessibility. Specific amendments include:
  - setting out the criteria that must be met for a concern to amount to a qualifying disclosure;
  - Addition of a section describing the help available for whistleblowers;
  - Broader changes, for example, the addition of the requirement that GOsC, is required to publish an annual report on the whistleblowing disclosures.

25. As the amendments to the policy predominantly focussed on restructuring existing information, a consultation was not considered by the Committee to be required.

#### **Patients**

- 26. The Committee received an update on the Values project, developed in partnership by osteopaths and patients, the General Dental Council and the Collaborating Centre for Values Based Practice.
- 27. The Committee noted the project had developed six resources: four aimed specifically at patients and two at osteopaths. There is a plan for evaluation of those resources by a researcher.
- 28. An event was held at St Catherine's College, Oxford, to launch the resources.
- 29. In October 2022, the Committee also noted an update on our patient engagement activity and considered a proposal for a Patient Council Associate Programme. Work continues on these activities with the Committee due to receive regular updates.

National Council of Osteopathic Research Report: Types of concerns and complaints raised against osteopaths

30. In October 2022, the Committee considered the National Council of Osteopathic Research (NCOR) Report, Types of concerns and complaints raised about osteopaths and osteopathic services in 2013 to 2021, ahead of the report being presented to Council.

Data collection and insight and equality, diversity and inclusion (EDI)

31. The Committee received the results of our EDI Pilot, following the initial focus groups. The target response rate of 50 was slightly exceeded. The sample was broadly representative of the UK population and informed our understanding of osteopaths with protected characteristics.

### 32. The EDI pilot told us that:

- The majority of respondents did not feel that people with protected characteristics had equitable opportunities to advance their careers within osteopathy.
- Osteopaths tended to report a slightly higher proportion of unwelcome comments or conduct in training (43%) than in their last 12 months of practice (23.5%).
- Some osteopaths report anxiety about what GOsC will do with the data and question what happens if registrants disclose a disability. This point illustrates

that there are barriers which make the collection of EDI data difficult and some of those barriers are within the regulatory framework/legislation e.g. references to 'good health'.

# Registrant and Stakeholder Perception Survey

- 33. The Committee received a report on the proposed approach to registrant and stakeholder perceptions research. The aims are to provide evidence and insight about the Communications and Engagement Strategy and to inform about areas we may need to focus on to support its delivery
- 34. The Committee considered, and provided feedback on, the scope, specification and approach to commissioning the survey.
- 35. An update was provided to the Committee in March 2023 and a recommendation was made to Council to approve the Invitation to Tender.

### Boundaries Project

- 36. The Committee received a report which outlined the boundaries communication project plan which set out the activities undertaken and planned to support professional practice.
- 37. The project plan aims to raise awareness, helping osteopaths and education providers understand the issues and to demonstrate the importance of professional judgement, including support to navigate the challenges of judgement and decision-making.

### Membership

38. During the period April 2022 to March 2023 the Policy and Education Committee membership comprised:

Name	Member details	Meetings attended
		attended
Daniel Bailey	Council registrant	4 / 4
	member	
Sarah Botterill	Council lay member	3 / 4
Professor Deborah Bowman	Council lay member	3 / 4
(Chair)		
Dr Marvelle Brown	External lay member	2 / 4
Bob Davies	External registrant member	4 / 4
Elizabeth Elander	Council registrant member	4 / 4
Professor Patricia McClure	Council lay member (from	2 / 4
	1 July 2022)	
Professor Raymond Playford	External lay member	4 / 4

Name	Member details	Meetings attended
Nick Woodhead	External registrant member	4 / 4

# 39. Observers with speaking rights attended public meetings:

Name	Meetings attended
The Council for Osteopathic Education Institutions	4
The Institute of Osteopathy	1
The National Council for Osteopathic Research	3
The Osteopathic Alliance	3

# 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.
- 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.

# Annex B to 16

### **People Committee Annual Report 2022-23**

- 1. The People Committee met on five occasions during 2022-23. The three main meetings being in June 2022, October 2022 and March 2023 and there were two additional meetings in February 2023 and March 2023 to review the Chair of Council competencies for the forthcoming recruitment process.
- 2. The terms of reference of the PC are attached at Annex A, and the prior year's Annual Report is at Annex B for comparison purposes.

# **Appointments**

- 3. During the year, the Committee considered the re-appointment processes for four Council members; four members of the Investigating Committee and one registrant member of the Professional Conduct Committee.
- 4. The Committee received a paper planning the appointments and reappointments processes for 2023 2024. Two additional meeting were scheduled in February 2023 and March 2023 to consider competencies for the Chair of Council recruitment process.
- 5. The Council member re-appointment process is overseen by the People Committee, scrutinised by the Professional Standards Authority, with the reappointments approved by the Privy Council. The Investigation Committee and Professional Conduct Committee re-appointment processes are overseen by People Committee who scrutinise the recommendation decision of Chair of Council and final stage is the approval of the re-appointment decision by Council.

### Council members skills audit

6. The Committee considered a proposal from the Executive for an external consultant to carry out a skills audit for Council members to inform the forthcoming recruitment campaigns.

### Strategic Plan development: culture and values

7. In the year, the Committee contributed ideas for enhancing the plan for the online session for Council members to inform thinking around culture and values and how to describe this within the GOsC strategy towards 2030.

### Staff survey: results and analysis

8. The Committee reviewed the themes and questions as well as the results from the staff survey 2022.

### Reward and recognition

- 9. The Committee considered the results of the external independent job evaluation and pay benchmarking exercise.
- 10. The Committee reviewed and agreed the staff pay model and the approach to managing salaries which fell below or above their allocated salary pay bands.

# Staff pay review

11. The Committee considered a paper which looked at an appropriate level for staff pay increases in 2023 and agreed this for 1 April 2023.

### Human Resources update

12. During the year, the Committee considered the benefits versus risks of the options for managing a sensitive Human Resources case.

### Council Associate programme review

13.In March 2023, the Committee reviewed the Council Associate programme review findings one year after implementation.

#### Non-Executive fees and allowances

14. In October 2022 and in March 2023, the Committee considered the fees and allowances payable to non-executive members and made recommendations to increase allowances for fitness to practise panel member daily allowances and reading fees.

#### Staff turnover

15. During the year the staff turnover percentage was 19%. This compares to 11% during the year 2021-22.

#### Redundancies

16. During the year there were no redundancies.

# Sickness absence

17. The Committee received papers reviewing the sickness absence days taken by staff at the GOsC in the reporting period and compared this to the previous year.

### Disciplinary, Grievance and Whistleblowing

18. None discussed at the People Committee.

# **Annex B to 16**

# Committee membership

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

Name	Member details	Dates of membership	Meetings attended
Sarah Botterill	Council lay member	All year	3/3
Caroline Guy	Council registrant member	All year	3/3
Simeon London	Council registrant member	All year	1/3
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 People Committee and does not reference any extraordinary meetings which took place in the reporting period.

# Cost of People Committee-related work

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

Committee-related	Costs paid 2022-23 £	Costs paid 2021-22 £
Committee members: fees and expenses	228	918
Governance appointments	25,512	21,321
Total	25,740	22,239
<b>Employment costs for all GOsC staff</b>		
Wages and salaries	1,391,346	1,197,239
Social security costs	141,655	131,820
Other pension costs	126,116	116,264
Recruitment	31,727	22,922
Learning and development	40,026	20,705
Other employment costs	29,435	22,014
Total	1,760,305	1,510,964

### **People Committee**

#### **Terms of Reference**

The People 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 People 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.
- **I.** Receive an annual report from the Chief Executive on HR strategy.

<sup>&</sup>lt;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 16

- 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. Consider the Equality, Diversity and Inclusion Framework as it relates to GOsC staff and non-executives.
- q. Consider issues of health and wellbeing as they relate to Executive and Non-Executives.
- r. Make an annual report to Council on the work of the Committee.

## **Meeting Frequency**

Four times yearly or more frequently if required. Some business may be appropriately conducted out of committee. Any such activity will be reported formally to the next meeting of the committee with a record made in the minutes.

### **Membership**

Two lay members and two osteopath members of Council and one external lay member with appropriate expertise.

There are no co-opted members.

### Quorum

Three members - two lay members (Council or external) and one osteopath member.

# **Audit Committee Annual Report 2022-23**

1. The Audit Committee met on four occasions in the year in June 2022, October 2022, January 2023 and March 2023.

# Financial Audit, auditor evaluation, Annual Report

- 2. During the year under report the Audit Committee considered the Audit Findings Document and draft Annual Report and Accounts for financial year 2021-22. The document set out the key issues affecting the financial results of the GOsC including the preparation of the financial statements. The Committee agreed the audit had been completed satisfactorily, and with no significant concerns identified, the document should go forward to Council with the Annual Report and Accounts.
- 3. The Committee considered an auditor evaluation framework for evaluating the performance of the external financial auditors. Audit Committee met with the external auditors in private and questioned the Executive and the external auditors before noting the evaluation document.
- 4. In accordance with best practice, Audit Committee recommended to Council that an external audit tender process be conducted. This recommendation was agreed by Council and an external tender was conducted. Haysmacintyre were appointed by Council in February 2023.
- 5. The Committee received Haysmacintyre's external financial audit plan for 2022-23 at the March 2023 meeting. The document was approved.

### Statement of internal financial controls

6. Audit Committee received the statement of internal financial controls for review in March 2023. The Audit Committee commented on the internal controls and requested a further review in June 2023 when Haysmacintyre presented their Audit Findings Report.

### Review of principal accounting policies

7. Audit Committee received the principal accounting policies for annual review in March 2023. The Committee asked for these to be reviewed again at the June 2023 meeting.

### Risk Register

- 8. At each meeting the Audit Committee reviewed the Risk Register which included a report presented by the Chief Executive and Registrar highlighting any movements in the risk level and discussion of action to manage risks.
- 9. During the year Audit Committee worked with the Executive to develop its approach to risk tolerance and risk appetite. A number of different formats were considered with the Committee settling on an approach at the October 2022

meeting, which was then enriched in March 2023 with information across all business areas. This approach will be recommended to Council when it next considers the risk register.

#### Performance Measurement

10. The Committee received the annual performance measurement matrix and recommended it to Council for noting.

# Audit Committee performance evaluation and Terms of Reference

11. The Committee completed a self-assessment of its performance which led to a discussion on the terms of reference of the Committee. These were subsequently reviewed with clarity provided around audit activity and a new term of reference on equality, diversity and inclusion added.

### PSA Performance Review and consultation

12. The Audit Committee discussed the PSA Performance Report for the period covering 2021-22. The Committee noted that the GOsC had met all standards for the twelfth year in succession.

#### Assurance audits

13. This year Audit Committee reviewed the recommendations and actions identified during assurance audits conducted in prior years to ensure that these had been implemented. The Committee received assurance that recommendations and actions identified had been implemented as agreed by the Executive.

### Cloud Engage IT project

14. The Committee received an update on the cross-departmental Cloud Engage IT project at its meetings this year. The Committee held a special meeting in January 2023 to consider the draft IT specification and in March 2023 it received a learned lessons report from an independent consultant following an Audit Committee request.

### Monitoring report

- 15. The Committee received a report at each meeting from the Executive on any serious events including fraud notification, data breaches and corporate complaints.
- 16. In the year under report the Executive reported to the Committee seven corporate complaints (four in the prior year), three data breaches (all of 'low' severity) (three in the prior year), no serious events (including fraud) (none in the previous year) and two learning points received from the Professional Standards Authority (none in the previous year).

# Forward work plan

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

### Membership

18. During the period 2021-2022 the Audit Committee membership comprised:

Name	Member details	Dates of membership	Meetings attended
Denis Shaughnessy	Council lay member	All year	4/4
Graham Masters	External lay member	All year	4/4
Rob Jones	External lay member	All year	4/4
Deborah Smith	Council registrant member	All year	4/4

#### Cost of the Audit Committee

19. It is estimated that the cost of the Audit Committee and its related activities, excluding staff time, is approximately £21,500. This is calculated as follows:

Activity	Cost £
Committee members: fees and expenses	3,000
External financial audit fee (excl. VAT)	18,500
Total	21,500

### Opinion of the Audit Committee

- 20. It is the opinion of the Audit Committee that its work during the past year is in line with the purpose and the Terms of Reference of the Committee. The Committee also believes Council can take assurance that the organisation has proper and appropriate systems in place to enable it to discharge its statutory responsibilities. The work reviewed by the Committee demonstrates the Executive has a mature approach to financial and non-financial control frameworks and a willingness to implement improvements where identified.
- 21. Council can take assurance that the controls upon which the organisation relies to manage risk are suitably designed, consistently applied and proportionate.
- 22. During the course of the year, the Committee has undertaken a wide range of activity as described in the report above. It is the view of the Committee that its approach has been supportive to the Executive while retaining the necessary rigour and challenge.

#### **Audit Committee terms of reference**

The role of the Audit Committee is to provide advice that the necessary internal and external systems and processes are in place for identifying, managing and mitigating the risks relating to the discharge of the GOsC's statutory duties, and make recommendations for any actions to Council and the Executive as appropriate. To do this it will:

- a. Review and make recommendations to Council about the content and structure of the risk register at the start of each business planning cycle and keep it under review.
- b. Review and make recommendations to Council about the effectiveness and proportionality of the risk management process.
- c. Request and receive reports on the management of risk areas identified in the register and make recommendations to Council about improvements needed.
- d. Review the internal financial controls and advise Council on these controls.
- e. Make a recommendation to Council on the appointment of external financial auditors to conduct the annual financial audit.
- f. Receive a report on preparations for the annual external financial audit.
- g. Receive the audit report, Audits Findings Report (AFR), draft Annual Report and Accounts, and Governance Statement and make recommendations to Council on the approval of these, and monitor the implementation of agreed recommendations in the AFR.
- h. Approve proposals for the commissioning of internal audits of key functions within the organisation and to recommend any areas where special investigation might be necessary.
- i. Receive audit reports and the Executive's response and make recommendations to Council on the implementation of recommendations arising from such audits and investigations, and monitor the implementation of agreed recommendations.
- j. Receive reports on any incidents reportable under the serious events framework, data breaches and corporate complaints or whistleblowing, and the Executive's response to them, and make any recommendations to the Executive and Council.
- k. Receive reports on the Executive's approach to organisational performance management and corporate governance and make any recommendations.
- I. Ensure that reports received across all aspects of the Committee's work consider the importance of equality, diversity and inclusion.

- m. Make an annual report to Council on the work of the Committee and an overall opinion on the management of risk within the GOsC.
- n. To review periodically its own effectiveness as a Committee.

# **Meeting Frequency**

Four times yearly or more frequently if required. Some business may be appropriately conducted out of committee. Any such activity will be reported formally to the next meeting of the committee with a record made in the minutes.

# **Membership**

#### Four members:

- Two Council members (one of whom is the Chair), of whom one must be an osteopath and the other a lay member.
- Two external members.
- There is one co-opted member of Council effective from 1 April 2023.

### Council Associates

Council Associates may attend meetings of the Audit Committee and may participate in business at the discretion of the Committee Chair. Council Associates are not permitted to vote on any recommendations or decisions to be made by members of the Audit Committee.

### Quorum

Three members – the Chair of the Committee (who is a Council Member) (or appointed deputy if unavailable), one Council member (which may be the co-opted member) and at least one external member.