



Meeting of Council

Minutes of the 119th Meeting of Council held in public on Wednesday 17 May 2023, at Osteopathy House, 176 Tower Bridge Road, SE1 3LU and hosted via Go-to-Meeting video conference

Unconfirmed

Chair: Dr Bill Gunnyeon

Present: Dr Daniel Bailey
Sarah Botterill (Chair, People Committee)
Elizabeth Elander
Harriet Lambert (Council Associate)
Professor Patricia McClure
Dr Denis Shaughnessy (Chair, Audit Committee) (*online*)
Deborah Smith
Laura Turner (Council Associate)

Presenting: Steven Bettles, Head of Policy
David Bryan, Head of Regulation (Items 8)
Sheleen McCormack, Director of Fitness to Practise
Liz Niman, Head of Communications, Engagement and Insight, (*online*)
Matthew Redford, Chief Executive and Registrar
Maxine Supersaud, Head of Resources and Assurance (Items 6 and 12)

In Attendance: Marcia Scott, Council and Executive Support Officer (*online*)

Observers: Collette Byrne, Scrutiny Officer, Professional Standards Authority (PSA)
Jo Clift, Council Member, the Institute of Osteopathy (iO)(*online*)
Glynis Fox, President, the Institute of Osteopathy (iO)(*online*)
Kenneth McLean, Registrant Member, GOsC FtP Professional Conduct Committee (*online*)

Item 1: Welcome and apologies

1. The Chair welcomed all to the meeting. Special welcomes were extended to Observers:
 - Jo Clift, Member of Council, the Institute of Osteopathy
 - Laura Turner, newly appointed Council Associate

- Kenneth McLean, Registrant Member, FtP Professional Conduct Committee

2. Apologies were received from:

- Professor Deborah Bowman, Council and Chair of the Policy and Education Committee
- Fiona Browne, Director of Education, Development and Standards
- Ben Chambers, Registration Manager
- Maurice Cheng, Chief Executive, the Institute of Osteopathy
- Caroline Guy, Council
- Banye Kanon, Senior Quality Assurance Officer

3. **Dr Joan Martin: An appreciation**

The Chair acknowledged the passing of Dr Joan Martin, a member of Council from 1 April 2014 – 31 March 2022. Joan's wise counsel, sharp wit and generosity were especially noted along with her strength of character and willingness to challenge. Joan would be a much-missed friend and colleague.

Item 2: Questions from Observers

4. There were no questions from observers.

Item 3: Minutes of the meeting 2 February 2023

5. The minutes of the 118th public meeting, 2 February 2023 were agreed as a correct record.

Item 4: Matters arising

6. The Chief Executive introduced the report asking that Council note the actions highlighted had been completed.
7. It was confirmed that the Registration Report now included data relating to registrants practising status by age range as requested by Council.

Noted: Council noted the matters arising from the meeting of February 2023.

Item 5: Chair's Report

8. The Chair introduced the report which provided an update on activities which have taken place since the previous meeting, 2 February.
9. The key messages and following were highlighted:
- a. Since the previous meeting of Council, members agreed via email, a number of decisions relating to: Fitness to Practice panel member fees; an increase in the hotel allowance; the co-option of a Professional Conduct Committee Panel Chair; and the appointment of Professional Conduct Committee lay chairs.

- b. The recruitment campaigns for the Chair of Council and Professional Conduct Committee (PCC)/Health Committee (HC) member positions were launched on 3 April 2023. The deadline for the receipt of PCC/HC applications closed 3 May, and there had been positive response to the campaign with 189 applications received (178 Lay, 11 Registrants). An independent reviewer will develop a long list of the applications for the interview panel's consideration.
- c. A bilateral meeting with the Chair and the Chief Executive of the Institute of Osteopathy, 10 May. Discussions included consideration of the iO Strategic Plan, ensuring alignment of ideas and thinking between the GOsC and the iO, and the iO Convention which would celebrate 30-years of the Association's establishment.
- d. The Chair noted the special meeting of Council which took place 3 May, which gave members the opportunity to consider the AAPO DHSC Consultation. It was confirmed that the GOsC's consultation response had now been submitted. The Chair stressed the importance of the GOsC's voice being heard as any reform would provide a template for any future regulatory change.
- e. The Chair announced that the Annual Performance Review round for the period April 2022 – March 2023, would be commencing in due course. It was confirmed that the Chair would conduct the reviews of members of Council, Council Associates and the Chairs of the Fitness to Practise Committees.

In private session Council agreed that Caroline Guy (Registrant), and Professor Patricia McClure (Lay) would conduct the Chair's review.

Noted: Council noted the following decisions made electronically since the February 2023 meeting:

a. Approved: Fitness to Practise panel member fees:

- An increase in the daily fee from 1 April 2023 to £320 from £306.
- An increase in the daily fee from 1 April 2024 to £330 from £320.
- A payment of £50 per day would be paid to Panel Chairs.
- For the Investigating Committee: To discontinue the £12.50 per case reading fee.
- For the Investigating Committee: To introduce a flat £75 reading fee for each meeting.

b. Approved: Hotel allowances:

- an increase in the hotel allowance to £220.

c. Approved: The Co-option of a Professional Conduct Committee Panel Chair

The appointment of Richard Davies as a co-opted Professional Conduct Committee Panel Chair for a six-month period from 1 May 2023 to 31 October 2023.

d. Approved: Appointment of Professional Conduct Committee and Health Committee lay chairs

The appointments of Pamela Ormerod, Sue Ware and Rama Krishnan as Professional Conduct Committee and Health Committee Panel Chairs.

Noted: Council noted the update on the current non-Executive recruitment campaigns.

Item 6: Chief Executive and Registrar's Report

10. The Chief Executive and Registrar introduced the report which reviewed activities and performance not reported elsewhere on the agenda.
11. The key headlines and following points were highlighted:
 - a. The GOsC submitted a successful proposal to present at the PSA symposium, 6 June 2023, on the topic 'How can we successfully collaborate towards safer care for all?'
 - b. The GOsC continues to promote Equality, Diversity and Inclusion throughout the work of the organisation including consideration of the impact of the Welsh Language Standards draft compliance notice. A response has been submitted to the Welsh Language Standards consultation and a request has been made for additional time for the GOsC to comply with the some of the standards.
 - c. The GOsC have received the top-line findings from the third wave of research into patient perceptions. This is the third survey which has been undertaken and the questions have been kept consistent as this is a tracking survey. The 2022 findings are broadly consistent with those from 2014 and 2018.
12. In discussion the following points were made and responded to:
 - a. PSA Performance Review - Standard 3. In response to being asked for more information on the PSA raising expectations on equality, diversity and inclusion, it was explained that the initial evidence matrix published by the PSA had been issued with limited notice and there were elements of the matrix which caused concern amongst regulators, specifically around scope and the measurement of impact over a very short time. Additionally, there were concerns around language used which could be open to interpretation with definitions, such as 'significant'. It was noted all regulators had fed back similar concerns to that of the GOsC and the PSA has taken the feedback onboard and amended the evidence matrix which GOsC particularly welcomed.
 - b. Welsh Language Standards (WLS): Council was informed that the GOsC has a plan in place for reviewing IT systems and compliance with the Welsh Language Standards.

- c. Patient Perceptions Survey: A concern was raised about the high percentage of respondents indicating a lack of confidence that a concern/complaint raised with the GOsC would be properly investigated. The Chief Executive advised a fuller discussion of the report would happen at the Policy and Education Committee in June 2023. It was noted that ensuring public/patient confidence in regulatory complaints processes was a challenge for health regulators as well as the GOsC. It was agreed that high-profile health cases could have an impact on how health care professionals and the associated regulators might be perceived, and this perception could also be extended to a wider societal lack of trust.
- d. Scottish ACP status: It was confirmed that there had been no progress with ACP status in Scotland and this was something being progressed by the Institute of Osteopathy.

Business Plan Monitoring

- 13. A business plan monitoring report for 2023-24 was not provided for this meeting as it has been less than two-months into the new business year. It was confirmed that there had been no changes to the Business Plan for 2022-23 as reported at the February meeting of Council.

Financial Report

- 14. The Head of Assurance and Resources and provided an update on the year-end position at 31 March 2023, and the position for the financial year to date commencing 1 April 2023, highlighting the following:
 - a. The GOsC's current financial position remains positive and continues to adapt to changing trends in the markets.
 - b. Although there have been challenges for the investment portfolio due to external market factors, it remained in a good position within the current economic climate. The reserves position also remains healthy.
 - c. The financial audit has commenced with the new auditors, Hays MacIntyre and, to date, is going well.
- 15. Council had no additional questions and noted the financial report.

Noted: Council noted the Chief Executive and Registrar's Report.

Item 7: Registration Report

- 16. The Chief Executive introduced the item which provided an update on registration activity covering the six-month period from 1 October 2022 to 31 March 2023.
- 17. The key messages and following points were highlighted:

- As requested a breakdown of registrants of registrants practising status by age range was now included in the report.
- At the end of March 2023 there were 5,437 osteopaths on the Register.
- The number of non-practising registrants stood at 141 at the end of March 2023 which was down on a peak of 330 during the height of the pandemic. The figure is currently below the pre-pandemic average.
- Ten return-to-practise assessments were completed during the reporting period. Twenty registration assessments, connected to internationally qualified applicants were completed.

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

- a. The statistics indicated a high proportion of registrants within the 51-60 age bracket, it was asked what contingencies were being considered for the possible impact on income from fees as registrants moved towards retirement. The Chief Executive acknowledged there could be a significant impact on future income if a high proportion of those registrants were to leave the Register. This would lead to challenges and difficult decisions to be made and the Head of Resources and Assurance will be considering those as part of the budget strategy activity reported to Council later in the year.
- b. It was suggested and agreed that it would be helpful to include data on trends in student recruitment as the information would be useful when considering the future of the Register.
- c. It was confirmed that the increase in international assessments did not currently impact on the Registration Team's capacity. It was confirmed that there are fluctuations in applicant numbers, but no trends have been identified. This would be kept under observation.

Noted: Council noted the registration statistics for the six-months to 31 March 2023.

Item 8: Fitness to Practise Report

19. The Director of Fitness to Practise introduced the report which provided the quarterly update on the work of the Regulation department and the GOsC's Fitness to Practise committees.

20. The key messages and following points were highlighted:

- a. FtP Case Trends: Until recently, 40% of the team's caseload was under police investigation / within the criminal courts. This figure has now decreased to 31%. However, it is the delay in these cases, as well as difficulties with engaging complainants in serious matters including transgression of sexual

boundaries cases, that has impacted on our ability to meet certain timescales which will impact on the key performance indicators (KPIs).

- b. Section 32: A Crown Court appeal hearing against a Section 32 conviction took place at Worcester Crown Court on 17 March 2023. This was the first appeal of its kind for the GOsC taking place at the Crown Court. The appeal was dismissed, and cost were awarded to the GOsC.

A preliminary hearing for a Section 32 prosecution against a former registrant which has been set for 7 June 2023, at Highbury Magistrates Court. Further details about the case will be given at the July Council.

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

- a. In relation to the Section 32 Crown Court appeal, it was confirmed that, to date, no cost awarded to the GOsC had been received. Whether or not the appellants should be pursued for costs was a matter yet to be decided.
- b. In response to a request for clarification about the terminology used and setting of the Key Performance Indicators it was explained the GOsC sets its own KPIs with high-level targets. These inform the report and dataset reflecting the information requested by the PSA.
- c. It was noted that the PSA recognises the challenges placed on regulators handling complaints; the delays due to backlogs caused by the pandemic and delays due to third-party investigations. There has been consideration as to how the GOsC's KPIs would be impacted if cases delayed due to circumstances beyond the control of the GOsC were to be removed from the reporting process to show only 'active' case progression (delayed cases would continue to be followed-up).
- d. The challenges to concerns/complaints posed by third-party delays have been a topic for discussion by the Health Regulator Chairs and is due for further discussion at a future meeting to consider what appropriate actions the regulators and the PSA can take to resolve this issue. It was noted that the Executive would discuss case progression and those areas which the GOsC can control.
- e. It was explained there were a number of reasons a case might remain held by the police including investigations of historical sexual cases, serious sexual boundaries cases, and criminal offences. It should also be noted that there are general pressures on the police service in addition to the impact of industrial action taken by barristers all of which impact on the KPIs. No possible trends to date have been observed but this would be monitored.

22. The Head of Regulation introduced the Fitness to Practise dataset. The following comments were made and responded to:

- a. It was explained that the variance in 'from receipt to referral' times for an ISO related to a number of cases concerning health matters where there had been difficulty collating material for health reports to assess risk. A further case also involved a delayed risk assessment report due to a delay in the police confirming their position. It was added that the PSA do review the dataset as part of the Annual Review process.
- b. Council was informed that although registrants are better informed about boundaries and matters of impropriety there has been no reduction in these cases which in actual fact had risen. There were a number of reasons for this increase including a rise in historical cases, complainants coming forward as a result initiatives like the #Metoo movement, and reading about cases in the media and online. As a result of the work completed in the Boundaries Project the Executive are working to develop a strategy addressing these issues and continuing to raise awareness.
- c. It was noted that the Concerns and Complaints report data compiled and published by NCOR show that sexual boundaries cases are reducing but there were still areas which remain a concern and are being addressed.
- d. It was noted that for Council to be assured about performance against KPIs that it should be presented with case progression data excluding those cases which are beyond our control i.e. cases under police investigation. This would allow Council to see what the underlying performance looked like.

Noted: Council noted the Fitness to Practise report.

Item 9: Fitness to Practise Publication Policy: Consultation outcome

23. The Director of Fitness to Practise introduced the report which invited Council to consider and agree the amended draft Fitness to Practise Publication Policy following a public consultation being undertaken from 31 January – 25 April 2022.
24. The key messages and following points were highlighted:
 - a. The GOsC has a Fitness to Practise (FtP) Publication Policy which has been in place since 2013. The policy focuses on the length of time that notices of decisions should appear on the public website.
 - b. The policy provides that Investigating Committee (IC) written decisions to impose an Interim Suspension Order (ISO) should be publicised in full and a note of the suspension should be made against the registrant's entry on the online register.
 - c. The policy states that Professional Conduct Committee (PCC) ISO written decisions should be published in full, and a note of the interim suspension should be made against the registrant's entry on the register.

- d. A registrant is able to request removal from the Register of osteopaths at any time. This is a process called voluntary removal.
 - e. The FtP publication policy is silent as to whether the written determination pertaining to individuals who request and are granted voluntary removal after their substantive hearing has concluded are also removed from the website.
 - f. The GOsC will publish a summary only of the outcome for PCC and IC ISO decisions.
 - g. GOsC will continue to publish an FtP written decision and sanction imposed (for the length specified within the FtP publication policy) for those individuals who have been granted voluntary removal by the Registrar after the hearing has concluded.
 - h. Section 22(13) of the Osteopaths Act 1993 requires GOsC to publish a report setting out the individual names of the osteopaths who have been investigated where those allegations have been found to be well founded. At present, the current annual Fitness to Practise Report is published on [the GOsC website](#) together with all the previous reports going back to 2010/2011. It has been decided to publish the current Fitness to Practise annual report on the website but to archive the previous five annual reports on a separate page of the website and archive internally reports dating further back and make them available on request.
 - i. The FtP Publication Policy requires the PCC's determination not to be linked to a registrant's register entry or noted on the register where an osteopath has been admonished. Currently this information is published on the GOsC website and within the annual FtP report. Following feedback on the consultation received from the PSA, it has been decided to link an admonishment imposed on an osteopath following a hearing with their entry on the online Register.
 - j. The consultation ran for a period of 3 months from 31 January – 25 April 2023.
25. Council had no further questions or comments and agreed the recommendation as set out.

Agreed: Council agreed the Draft Fitness to Practise Publication Policy

Item 10: Draft Interim Suspension Order and Practice Note consultation

26. The Director of Fitness to Practise introduced the report which invited Council to consider the revised Guidance on Interim Orders and the Practice Note on Undertakings.
27. The key messages and following points were highlighted:

- a. The Osteopaths Act 1993 states that and ISO can only be imposed to protect the public.
 - b. Both the Investigating Committee and Professional Conduct Committee can impose an interim suspension order over a registrant's registration while a fitness to practise investigation is undertaken. Both the Investigating Committee and Professional Conduct Committee can accept undertakings from a registrant. An undertaking is a voluntary written promise.
 - c. An external audit was commissioned, undertaken in August and September 2021, of all Investigating Committee and Professional Conduct Committee applications for an interim order between January 2020 - March 2021.
 - d. No concerns regarding patient safety were identified within the audit report.
 - e. The detailed recommendations from the audit 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 around undertakings clearer.
 - f. The opportunity had also been taken to enhance the interim order guidance to make it clearer that the Investigating Committee and Professional Conduct Committee are under a duty to have regard to the overarching objective within the Osteopaths Act when considering interim order applications.
 - g. The amendments will assist the IC and PCC to focus on assessing risk.
 - h. It is planned to undertake a three-month public consultation.
28. In discussion the following points were made and responded to:
- a. Members welcomed the context and proportionality that the enhancements had brought to the ISO Guidance and the Practice Note on Undertakings. The documents were considered to be well written and clear and that registrants would engage as the clarity of the guidance would alleviate some of the apprehension and misinterpretation concerning ftp processes.
 - b. Members were advised that it was planned to engage with as many stakeholder groups, including lawyers, as possible to participate in the consultation. It was added that in recent years the work undertaken by the Executive to make the ftp processes more transparent and accessible to registrants and stakeholders by way of webinars, e-bulletins and through consultation has been successful. This work would continue in order to improve processes.
 - c. It was confirmed that since 2015 there had been one legal challenge to an Interim Suspension Order which was dismissed.

Agreed: Council agreed the consultation on the draft Interim Suspension Order and Practice Note.

Item 11: GOsC Values

29. The Chief Executive introduced the report which asked Council to consider and agree the GOsC Values which will underpin the new Strategic Plan, towards 2030.
30. The key messages and following points were highlighted:
- a. The current GOsC Strategy ends on 31 March 2024. Council has been considering its future strategic direction over the past 18 months.
 - b. The GOsC Council has never before articulated what it considers to be its 'Values' within a strategic document published by the GOsC. This was identified as a gap during the Assessment of GOsC Performance activity.
 - c. Following that report, Council has been considering what its Values might be so they underpin the next GOsC Strategic Plan, towards 2030, and over the past year Council has been narrowing down its possible Values and considering how these might be defined.
 - d. After the February 2023 Council meeting, a set of four Values were shared electronically with members. Additionally, feedback was sought from GOsC staff. A paper summarising the feedback from Council members and staff members was considered by Council during April 2023 outside of its normal meeting cycle with Council feedback summarised in the paper at this meeting.
 - e. If approved the values will begin to be embedded within the organisation with immediate effect.
31. In discussion the following points were made and responded to:
- a. Members commented that they liked how the values had evolved with a sense of being a positive influence as a regulator in sharing experiences, processes and working in collaboration.
 - b. To begin embedding the 'Values' the Executive would begin conversations and work with staff to consider what the 'values' mean in the context of the daily operational functions across the different departments. Consideration would also be given to incorporating the values into the new strategic plan.
 - c. It was agreed that the values should flow through all areas of the GOsC's work including being incorporated as part of the Annual Performance Review process for the governance structure and staff.

- d. It was agreed that the Values should be explicit in how they impact the GOsC's actions moving forward. It was also suggested that a mapping exercise might help to demonstrate what the GOsC, as an organisation, would do more of and do differently to ensure the embedding of the Values. This was something that could be undertaken in the future once the new Strategic Plan had been agreed.

32. The Chair thanked Council for its helpful input in helping to establish the 'Values' and also thanked the Chief Executive and Registrar for all the work undertaken.

Agreed: Council agreed the GOsC Values.

Item 12: GOsC Reserves Review

- 33. The Chief Executive introduced the item which asked Council to consider the criteria for how GOsC may wish to use any excess reserves.
- 34. The key messages and following points were highlighted:
 - a. It is good practice to hold reserves for unforeseen events and to invest excess funds in order to protect the cash asset from inflation erosion. Council reviews its reserves and investments together, at the July Council meeting.
 - b. Council has previously agreed a target reserves range of between £350k - £700k which is based on its assessment of risk and the possible financial impact. For the year ended 31 March 2022, the GOsC was holding funds above the target reserves range. This is forecast to be the same for the year ended 31 March 2023.
 - c. The investment portfolio has dipped this year reflecting the wider economic conditions but the GOsC portfolio remains in a healthy position.
 - d. As Trustees of the Charity, Council members will need to be satisfied that the level of reserves held is appropriate. Where there are either excess funds held or insufficient funds held, there should be a plan to allow for corrective action to be taken.
 - e. The GOsC is holding funds in excess of our target range. In order to determine how GOsC may wish to use any excess funds, a set of criteria has been developed for consideration by Council.
 - f. GOsC currently has a designated CPD reserves fund which totals £77k. It is suggested this designated fund is reclassified as an IT enhancement fund, which will support any future decision Council may take with regards to the upgrade of the IT CRM system. This will increase the existing IT designated fund.
 - g. The Institute of Osteopathy is running an international convention later in 2023 which is a two-day international celebration of the recognition of

osteopathy. It is proposed that the GOsC contributes to this event from reserves.

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

Criteria for use of excess reserves

- a. Council was advised the current reserves approach/range is set by Council. If it was considered that a greater level of reserves was required to support changes to the range it would be for Council to agree. Currently the reserves cover risk associated with:
 - Judicial review
 - The volatility within fitness to practise
 - Data breaches and subsequent fines
 - Unexpected educational matter or matters requiring quality assurance activity.
- b. Due to the unknown timescale, the impact of regulatory reform is not thought to be a significant concern at this time. Changes to the GOsC's legislation are not envisaged for a number of years and no clear timetable has been set therefore it is not believed there is a need for adjustments to the reserves to cover risk arising from legislative reform although it is something which Council should be kept in mind.
- c. It was suggested that any cost implications due to changes/reforms in legislation would be to address and support the wide-ranging consultations that would be required to be undertaken.
- d. It was confirmed that Council had agreed to transfer funds from reserves into the investment portfolio during times when markets are stable. It was suggested that a discussion should take place later in the year to review the level of reserves, whether there should be a change in the level set and the criteria for change.
- e. It was confirmed that the target range for the reserves is reviewed annually at the July meeting of Council along with the Annual Report and Accounts.

Reclassification of existing designated fund

- f. It was explained that the CPD designated fund had been set up to facilitate the new CPD scheme to develop resources to support the project. The fund was originally set at £100k and now stands at £77k.

- g. It was noted that although the CPD scheme now is an operational activity it was asked whether funding from reserves could be used to support other specific activity such as the delivery of the GOsC's strategic ambitions and/or where there was a clear business case.
- h. It was suggested that the CPD designated funds be moved to General Reserves until such time an assessment of risk relating to the IT project can be undertaken with the amount to be transferred agreed post assessment. Alternatively, if Council agrees the recommendation to transfer the funds then a review of how much the contingency for the IT project should be takes place as soon as possible. The Chief Executive confirmed that a detailed discussion paper on the IT Review will be brought to Council in July 2023.
- i. It was suggested that, from an audit perspective, it would be prudent to consolidate and move the CPD fund to the IT fund.

Institute of Osteopathy Convention

- j. It was explained that the rationale for the contribution was to reinforce the GOsC position as key stakeholder in the osteopathic community. The contribution would provide additional security for the event which is planned to be cost neutral.
- k. The GOsC and the iO had discussed the convention. It was agreed that, subject to Council approval, the GOsC would support the event with a contribution for which the GOsC would receive recognition as a supporter. It was noted that there would also be a CPD element for registrants attending the event.
- l. The assumption is that if there was a profit from the event either the iO would return the funds provided by the GOsC or there would additional features included as part of the convention that would benefit the GOsC.
- m. It was confirmed that other areas within the draft strategic plan that have been identified and considered for financial support by the GOsC. It will be for Council to agree the criteria for which financial support and awards can made and will be a subject for further discussion by Council.
- n. Members stressed the importance in demonstrating and being clear through communications how financial support from the GOsC for projects and initiatives, like the convention, are of benefit to all registrants and community.

36. In summary the Chair highlighted:

- a. There is overall general support, in principle, for the GOsC to provide financial support for the iO Convention 2023.
- b. Although not envisaged if there is a profit following the iO convention it should be made clear and agreed what will happen to the surplus funds.
- c. It should be made clear through communications with registrants how funds are to be used to support initiatives.

Noted: Council considered the criteria for how GOsC may wish to use any excess reserves.

Agreed: Council agreed to reclassify the CPD reserve fund as an IT enhancement fund subject to considerations and outcomes of the IT Review.

Agreed: Council agreed to contribute £25k-£40k from reserves to the Institute of Osteopathy Convention 2023 – an international celebration of the recognition of osteopathy.

Item 13: NESCOLT Recognised Qualification Review Specification

37. The Head of Policy introduced the item which asked Council to consider the Recognised Qualification (RQ) review at the North East Surrey College of Technology (NESCOLT), in relation to:

- Master of Osteopathic Medicine (MOst)
- Bachelor of Osteopathic Medicine (BOst)

38. The corrections were highlighted and clarified; the part-time programme was for the Bachelor Osteopathic Medicine (BOst) and not the Master of Osteopathic Medicine (MOst).

39. The key messages and following points were highlighted:

- a. The RQ visit took place in October 2022.
- b. The visitor report contains a recommendation for the approval of the renewal of the recognition of Nescot's qualifications with two specific conditions. These are:
 - The College must refine their data capture and reporting methods to ensure coherent monitoring and forecasting of patient numbers as well as ensuring the attainment of the required hours in clinic.

- While clinical audit is undertaken on a monthly basis, there does not appear to be a clear strategy to ensure the quality of the breadth of patient interactions that students encounter. The College must improve their recording of patient audit data, and management of student exposure to a full range of musculoskeletal and non-musculoskeletal presentations, to ensure that students see a sufficient depth and breadth of patients.
- c. The Policy and Education Committee, at its meeting in March 2023, agreed to recommend that Council renew of the recognition of the Masters in Osteopathic Medicine (M.Ost) and the Bachelor of Osteopathic Medicine (BOst) awarded by Nescot from 1 November 2023 to 31 October 2028 subject to the Conditions outlined, subject to the approval of the Privy Council.
40. Council had no further comments or questions and approved the recommendation as set out.

Agreed: Council agreed to renew the recognition of the Masters in Osteopathic Medicine (M.Ost) and the Bachelor of Osteopathic Medicine (BOst) awarded by Nescot from 1 November 2023 to 31 October 2028 subject to the Conditions outlined, and subject to the approval of the Privy Council.

Item14: Audit Committee: Terms of Reference

41. The Chief Executive introduced the item which asked Council to agree minor amendments to the Audit Committee Terms of Reference.
42. The key messages and following points were highlighted:
- a. It is good practice for a committee to review its terms of reference on a regular basis.
 - b. Following a review of the Committee's own performance a suggestion was made to consider the terms of reference. Audit Committee did this at the March 2023 meeting.
 - c. Some minor amendments were identified which provide greater clarity over external and internal audit functions and, in relation to internal audits commissioned, to ensure the actions identified were implemented.
 - d. Additionally, a term of reference covering the importance of equality, diversity and inclusion was requested.
 - e. The terms of reference have also been updated to reflect the co-option of a member of Council to the Committee effective from 1 April 2023.

f. The Chair and members of the Audit Committee had no additional comments or questions.

43. Council had no further comments or questions and approved the recommendation as set out.

Agreed: Council agreed minor the amendments to the Audit Committee Terms of Reference.

Item 15: Minutes of Policy and Education Committee: March 2023

44. Members who sit on the PEC were invited by the Chair to give their feedback on the meeting of 8 March 2023. Members had no additional comments.

Noted: Council noted the minutes of the Policy and Education Committee, 8 March 2023.

Item 17: Any other business

45. There was no other business.

Item 18: Questions from observers

46. The iO President thanked Council for its agreement to support the iO Convention with a financial contribution.

Date of the next meeting: 10.00, Thursday 20 July 2023