



Council
18 July 2024
Committee Annual Reports

Classification	Public
Purpose	For noting
Issue	Each Committee is required to report annually on its 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
Author	Matthew Redford

Annual Report of the Policy and Education Committee 2023-24

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 its role to assure the quality of osteopathic recognised qualifications and to offer advice to Council about the recognition of qualifications, the Committee considered the following:

Activity	2023-2024
Consideration of RQ specifications / appointment of Visitors	Six OEIs
Consideration of Education Visitor RQ reports (including new RQs, renewal of RQs and monitoring visits)	Two OEIs
RQ change notifications and consideration of reports and evidence submitted in relation to general and specific conditions or annual report follow ups	Seven OEIs

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Activity	2023-2024
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	No OEIs

Quality Assurance: Annual Report and themes

8. The Committee considered the overall annual report analysis themes arising in the sector and noted further work to be undertaken on responses to recommendations and reflection in an annual report.

Continuing improvement of the Quality Assurance process

9. The Committee reviewed a lessons learned report arising from one RQ visit and considered and provided feedback on the issues identified arising the analysis and potential next steps.

Quality Assurance Services from 2025

10. The Committee considered requirements for quality assurance services from 2025 as the existing contract must end in June 2025 as part of usual procurement arrangements.

Workforce issues: recruitment and retention and our regulatory responses

11. The Committee considered the role of GOsC and the strategic response to the workforce issues outlined in the paper ahead of consideration by Council.

Student fitness to practise guidance

12. The Committee agreed to recommend to Council the publication of the Guidance about professional behaviours and student fitness to practise in osteopathic education, for consultation in accordance with the strategy outlined and noted the Equality Impact Assessment.

Guidance on the Management of Health and Disability for students and osteopathic educational institutions

13. The Committee considered and noted the engagement undertaken to update the draft guidance documents and noted the intention to enhance accessibility of the documents ahead of consultation.

Recognition of professional qualifications

14. The Committee considered the informative paper about the international recognition of professional qualifications post Brexit. The Committee agreed the approach to further exploration of the issues arising from changes to the international environment in relation to recognition of professional qualifications and the GOsC's regulatory response. This was to be considered by Council.

Quality Assurance – Annual Report template 2022-23

15. The Committee agreed the annual report template for 2021-2022, including the updated educator data collection proposals and the enhancements to the reflective examples.
16. The Committee agreed the plans outlined in relation to the enhancement of quality assurance through further quality assurance workshops and the development of proposals for a more thematic approach for 2023-24.

Transition into practice

17. The Committee considered the Transition into Practice Research Report which explored enablers and barriers to the transition into practice. The research had been undertaken with new graduates and larger osteopathic practices. The Committee recommended that further work be undertaken to test the findings with wider sector stakeholders ahead of further recommendations being developed.

Duty of Candour: Research report on workshop with patients conducted for the GCC and the GOsC

18. The Committee considered the report findings and implications and the proposed GOsC response to the Duty of Candour Report. The Committee agreed to recommend the publication of the report.

Patients

Strategic Patient Engagement

19. The Committee reflected on options for different models of strategic patient engagement with a diverse range of perspectives. The Committee recommended that Council consider the proposed models taking into account the discussion and elements raised by the members of the Committee.

Patient and public involvement in Osteopathic Education – thematic review

20. The Committee considered research undertaken to enhance meaningful patient engagement in osteopathic education through collaboration with OEIs to identify good practice in the sector, identifying barriers and enablers to involving patients in osteopathic education and share the learning with institutions. The Committee agreed to recommend to Council that the report be published and consider next steps.

Independent Evaluation of GOsC Resources to support shared decision making

21. The Committee received a presentation from Professor Dawn Carnes on the key findings from the independent evaluation of the GOsC resources to support shared decision making. Key findings included:

- That Registrant awareness of the GOsC resources could be improved
- The GOsC resources were used adequately and appropriately
- Adopting and integrating the resources into everyday practice requires additional motivation
- The resources promoted more patient-centredness
- The osteopaths generally lacked awareness about shared decision-making; they lacked confidence in discussing treatments beyond osteopathic treatment
- Patients found the resources very informative and useful and felt that their 'voice' was heard
- The patients felt respected and understood

22. The Committee provided feedback on the findings ahead of the final report being presented to Council including the importance of support to implement the Osteopathic Practice Standards.

Patient engagement progress update

23. The Committee considered an evaluation and update report about our patient engagement work.

Public and patient perceptions report

24. The Committee considered the draft Public and Patient Perceptions Report (2023) undertaken by Yougov. The report was a tracking survey and was first conducted in 2014 and then again in 2018. The Committee provided feedback on the report ahead of it being considered by Council for publication. The Committee agreed to recommend to Council that this findings report be published.

Registrant and Stakeholder Perceptions Survey update

25. The Committee monitored the progress of the appointment of the organisation to undertake the Registrant and Stakeholder Perceptions Survey

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

26. The Committee considered and provided feedback the paper exploring collection, collation, analysis, and understanding of equality, diversity, and inclusion data in relation to our fitness to practise proceedings for both registrants and complainants.

Boundaries Project

27. The Committee reflected on a paper that outlined thoughts on how the GOsC might have a greater impact on establishing and maintaining safe professional boundaries over time in the profession as ongoing initiatives were not driving down persistent concerns about boundaries. The explored the use of the

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Behaviour Change Wheel method. A gap was also identified in the current implementation strategy related to the impact of breaches of boundaries on osteopaths and patients and is informing the development of a story to begin reflection on how the story might be shared in a variety of ways to support osteopaths. The Committee considered and provided feedback on the contents of the paper to inform future thinking about understanding the challenges and developing sector-based approaches to support the establishment and maintenance of safe professional boundaries.

GOSC Values

28. The Committee considered and reflected on the GOSC Values of being:

- Collaborative
- Influential
- Respectful and
- Evidence informed

29. The Committee agreed with the Chief Executive's observations that the Committee's discussions were an example of the values being part of the considerations and thinking of members and participants and it was hoped that in moving forward the values would continue to be built on.

Consultation on GOSC Strategy: Towards 2030

30. The Committee noted the GOSC consultation on its Strategy: Towards 2030.

Committee Development Day

31. The Committee undertook a development day. The objectives of the day were:

- Reflecting on our purpose as a Committee – how do the terms of reference align in terms of our purpose.
- How can we know if we are fulfilling our purpose and doing well? What are the criteria for going well?
- How do we approach our work? We have a whole range of experience. We have a collective memory of PEC, of GOSC, the osteopathic sector and others. It is a time of change and evolution. How do we draw on all of this to move forward?

32. The day included a very positive and productive session with Shane Carmichael from Kaleidoscope to support the Committee on preparing for the future.

Conclusion of Terms

33. The Committee thanked Professor Deborah Bowman, Sarah Botterill and Elizabeth Elander for their service to the Policy and Education Committee.

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Membership

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

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

35. Observers with speaking rights attended public meetings:

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

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.

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- 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.

People Committee Annual Report 2023-24

1. The People Committee met on three occasions during 2023-24, being June 2023, October 2023 and March 2024.
2. The terms of reference of the PC are attached at Annex A.

Appointments

3. During the year, the Committee oversaw appointment and reappointment processes for 16 different positions across the GOsC Governance Structure, including the Chair of Council and Council members (lay and registrant).
4. The Council member appointment process is overseen by the People Committee, scrutinised by the Professional Standards Authority, with the appointments approved by the Privy Council. The Investigation Committee and Professional Conduct Committee appointment processes are overseen by People Committee with decisions made by Council.
5. The recruitment campaigns ran in 2023-24 generated over 400 applications (lay and registrant) and were, the most diverse set of applicants across all of the protected characteristics. We have made significant progress in this area and it is a reflection on our standing as a modern healthcare regulator that we are attracting high-calibre and diverse applicants.
6. The work of the Human Resources and Communications team were instrumental in those campaigns running smoothly. In addition, the data analysis undertaken by colleagues within the Professional Standards team to analyse the equality monitoring data across all campaigns was recognised by the People Committee.

Reward and recognition

7. The Committee considered the results of the external independent job evaluation and pay benchmarking exercise. 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.
8. The Committee considered a paper which looked at an appropriate level for staff pay increases in 2024 and agreed this for 1 April 2024.

Non-Executive fees and allowances

9. In June 2023 and March 2024, the Committee considered the fees and allowances payable to non-executive members and made recommendations to increase allowances for independent committee members.

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Human Resources update

10. At each meeting the People Committee received an update from the HR Manager on relevant HR matters and statistics, including staff turnover, recruitment, sickness absence and feedback from exit interviews.

Staff turnover

11. During the year the staff turnover percentage was 7%. This compares to 19% during the year 2022-23.

Sickness absence

12. 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. During the year, the average sickness absence at GOsC was 4 absence days per employee compared to 8 sickness absence days per employee the previous year. In 2023-24 the market average was 7.8 sickness absence days per employee.

Committee membership

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

Name	Member details	Dates of membership	Meetings attended
Sarah Botterill (Chair)	Council lay member	All year	2/3
Caroline Guy	Council registrant member	All year	3/3
Elizabeth Elander	Council registrant member	All year	3/3
Kate Husselbee	External lay member	All year	3/3
Dr Denis Shaughnessy	Council lay member	All year	3/3

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Cost of People Committee-related work

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

Committee-related	Costs paid 2023-24 £	Costs paid 2022-23 £
Committee members: fees and expenses	682	228
Governance appointments	42,233	25,512
Total	42,915	25,740
Employment costs for all GOsC staff		
Wages and salaries	1,505,534	1,391,346
Social security costs	142,576	141,655
Other pension costs	148,273	126,116
Recruitment	8,065	31,727
Learning and development	61,687	40,026
Other employment costs	16,903	29,435
Total	1,883,038	1,760,305

People Committee

Terms of Reference

The People Committee oversees appointment, performance and remuneration policy in relation to Council, non-executives¹ 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.
- l. Receive an annual report from the Chief Executive on HR strategy.

¹ 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.

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- 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 2023-24

1. The Audit Committee met on three occasions in the year: June 2023, October 2023 and March 2024.

Financial Audit, auditor evaluation, Annual Report

2. During the year the Audit Committee considered the Audit Findings Document and draft Annual Report and Accounts for financial year 2022-23. 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, which was the first undertaken by Haysmacintyre, had been completed satisfactorily, and with no significant concerns identified.
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. The Committee received Haysmacintyre's external financial audit plan for 2023-24 at the March 2024 meeting. The document was approved.

Statement of internal financial controls

5. Audit Committee received the statement of internal financial controls for review in June 2023 and March 2024. The Audit Committee noted the control framework which is in operation.

Review of principal accounting policies

6. Audit Committee received the principal accounting policies for annual review in March 2024 which were noted.

Risk Register

7. 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. During the year Audit Committee further developed its thinking and the approach to risk appetite. A risk appetite framework, alongside a three lines of defence model, was developed in the year and subsequently approved by Council. Council thanked Audit Committee for its work in this area.

Performance Measurement

8. The Committee received the annual performance measurement matrix and recommended it to Council for noting. It was recognised that organisational performance continued to be at a high-standard.

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Audit Committee performance evaluation and Terms of Reference

9. The Committee completed a self-assessment of its performance in June 2023 and reflected on the first year the Committee had been chaired by a member of Council. The Audit Committee felt that this approach provided a better link between the Committee and Council without diminishing the independence required by Audit Committee.

PSA Performance Review and consultation

10. The Audit Committee discussed the PSA Performance Report for the period covering 2022-23. The Committee noted that the GOsC had met all standards for the thirteenth year in succession. The Committee also noted that the PSA Performance Review period for 2023-24 would be an in-depth review which would require additional staff resource from the Executive team.

CRM IT project

11. The March 2024 Audit Committee received an update on the CRM IT Project which had been progressing during 2023-24. A market options analysis had been completed by the external IT consultant with a GOsC Procurement Panel meeting in October 2023 and identifying a preferred supplier. This decision was ratified electronically by Audit Committee before being agreed by Council.
12. A short update to Audit Committee in March 2024 highlighted that contractual arrangements were in place with the preferred supplier, with work to commence in the next business year, 2024-25.

IT security

13. The Audit Committee received reports at each meeting on the GOsC IT infrastructure and approach to security, receiving assurance as to the steps being taken to achieve Cyber Essentials Plus Certification. The Committee encouraged the Executive to spend funds on penetration testing and this work was commissioned in March 2024, with the results to be presented to Audit Committee in the business year 2024-25.

Registration report

14. The Registration Manager presented to Audit Committee in March 2024 a revised Registration Report which provided a greater focus on trends. This was commended by the Committee with the report presented to Council in the next business year, 2024-25.

Banking mandate

15. Audit Committee noted an update which is required to the banking mandate reflecting the change in Council membership effective from 1 April 2024.

Assessment of GOsC Performance

16. October 2023 saw the Committee receive an update on the Assessment of GOsC Performance activity which it had commissioned in 2021-22.
17. The update provided to the Committee demonstrated that over 75% of the recommendations had been implemented. The report had informed the development of a new strategy; the introduction of organisational values and the launch of a registrants and stakeholder perceptions survey. Future actions include the embedding horizon scanning across all committees and consideration of people strategy issues, such as succession planning.

Monitoring report

18. The Committee received a report at each meeting from the Executive on any serious events including fraud notification, data breaches and corporate complaints.
19. In the year under report the Executive reported to the Committee six corporate complaints (seven in the prior year), one data breach ('low' severity) (three in the prior year), no serious events (none in the previous year), one attempted fraud (none in the previous year) and no learning points received from the Professional Standards Authority (two in the previous year).
20. An assessment of the corporate complaints received since 2019 was presented to Audit Committee in March 2024. The majority of corporate complaints related to our fitness to practise (FTP) function which is a recognition that at the end of every FTP case there will be at least one unhappy party.
21. While the overall complaint levels are low, the Committee noted that across the five year period, complaints had been steadily increasing. On average, GOsC receives four complaints a year and 20 in the reporting period. However, GOsC had received 13 of those complaints (65% in just the last two years).
22. Each corporate complaint is assessed as to whether there are any underlying equality and diversity implications. Since 2019, there were two complaints which had underlying EDI themes.
23. The Committee noted that this was consistent with other regulators who have seen complaint levels increase. Discussion at the Nockolds complaints forum suggests that this is reflective of societal pressures since covid and individuals are more likely to raise complaints.

Forward work plan

24. 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

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Committee was able to comment upon the proposed future agendas and to influence its own workplans.

Membership

25. During the period 2023-24 the Audit Committee membership comprised:

Name	Member details	Dates of membership	Meetings attended
Denis Shaughnessy (Chair)	Council lay member	All year	3/3
Graham Masters	External lay member	All year	3/3
Rob Jones	External lay member	All year	3/3
Deborah Smith	Council registrant member	All year	3/3

Cost of the Audit Committee

26. It is estimated that the cost of the Audit Committee and its related activities, excluding staff time, is approximately £26k. This is calculated as follows:

Activity	Cost £
Committee members: fees and expenses	1,836
External financial audit fee (excl. VAT)	23,760
Total	25,596

Opinion of the Audit Committee

27. 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.
28. Council can take assurance that the controls upon which the organisation relies to manage risk are suitably designed, consistently applied and proportionate. 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.
- l. Ensure that reports received across all aspects of the Committee's work consider the importance of equality, diversity and inclusion.

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- 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.