### GENERAL OSTEOPATHIC COUNCIL Business Plan April 2015-March 2016

# Monitoring at end of April 2015

### **GOsC BUSINESS PLAN 2015-2016**

The General Osteopathic Council has agreed a corporate plan for 2013-2016 (<u>http://www.osteopathy.org.uk/about/our-work/strategic-business-plans</u>) which commits to achieving the 3 strategic objectives set out below, over the 3 year period.

### **Strategic Objectives**

- 1. To promote public and patient safety through proportionate, targeted and effective regulatory activity
- 2. To encourage and facilitate continuous improvement in the quality of osteopathic healthcare
- 3. To use our resources efficiently and effectively, while adapting and responding to change in the external environment.

This document sets out progress against the detailed activities contained in the Business Plan 2015-2016 in support of each of the strategic objectives.

#### KEY

FR – activities identified within the GOsC's Francis report action plan

**PSA** – activities relating to best practice identified from the 2012-13 and 2013-14 PSA Performance Reviews

## **1.** To promote patient and public safety through proportionate, targeted and effective regulatory activity

| Goal: To ensure that initial education and training is | of high-quality ar        | nd is fit for purpose | e în an evo | lving health | care and higher education        |
|--|---------------------------|-----------------------|-------------|--------------|----------------------------------|
| environment.   |                           |                       |             | -            |                                  |
| Activity   | Lead                      | Timing                | Status      | Change       | Comments                         |
| Quality assurance                                      |                           |                       |             |              |                                  |
| Complete tender process for quality assurance          | Professional              | April to              |             |              | Tender process completed and     |
| contract 2015 to 2018, monitor transition to new       | Standards                 | September             |             |              | contract finalisation underway.  |
| contract and confirm readiness for new contract to     |                           | 2015                  |             |              |                                  |
| commence quality assurance activities.                 |                           |                       |             |              |                                  |
| Agree any changes to the Annual Report template.       | Professional<br>Standards | June 2015             |             |              |                                  |
| Distribute Annual Report templates to OEIs             | Professional              | October 2015          |             |              |                                  |
| requesting information which will allow GOsC to        | Standards                 |                       |             |              |                                  |
| monitor that standards are maintained and identify     |                           |                       |             |              |                                  |
| any potential problems.                                |                           |                       |             |              |                                  |
| Collate and review Annual Report data; present to      | Professional              | March 2016            |             |              |                                  |
| ERSC with recommendations for each OEI in terms        | Standards                 |                       |             |              |                                  |
| of whether standards are being met and whether         |                           |                       |             |              |                                  |
| any potential issues have been identified, and         |                           |                       |             |              |                                  |
| disseminate good practice.                             |                           |                       |             |              |                                  |
| Continue to monitor quality of course provision, for   | Professional              | All year              |             |              | Finalised course closure process |
| example by undertaking quality assurance reviews       | Standards                 |                       |             |              | agreed by ERSC March 2015.       |
| and monitoring any course closure plans.               |                           |                       |             |              | Monitoring ongoing.              |
| Monitor and review Action Plans and fulfilment of      | Professional              | May and               |             |              |                                  |
| conditions linked to Recognised Qualifications to      | Standards                 | September             |             |              |                                  |
| ensure that the necessary action identified by GOsC    |                           | 2015,                 |             |              |                                  |
| is being undertaken to maintain the standards of       |                           | January 2016          |             |              |                                  |
| graduating students.                                   |                           |                       |             |              |                                  |

| Undertake activities to ensure the quality of the<br>education quality assurance process including:<br>annual training and appraisal of all Visitors<br>undertaking a quality assurance process and<br>ongoing communications.<br>Complete engagement process on quality assurance<br>discussion document, report findings from<br>engagement process and complete development of | Professional<br>Standards<br>Professional<br>Standards | All year<br>May 2015 to<br>March 2016 | • | Ongoing. Milestone plan noted<br>by ERSC March 2015. |
|---|--|---------------------------------------|---|--|
| new proposals and method (in conjunction with quality assurance partner).   |  |                                       |   |  |
| Undergraduate professionalism   | 1  | 1 1                                   |   | · · ·  |
| Continue collecting data for undergraduate<br>professionalism surveys in partnership with the<br>osteopathic educational institutions from students,<br>faculty and patients.   | Professional<br>Standards                              | All year                              | • |  |
| Continue supporting and facilitating sessions with<br>OEI students and faculty about findings and<br>implications in osteopathic context.   | Professional<br>Standards                              | All year                              |   |  |
| Report on evaluation of findings including relevance<br>and impact to GOsC activities, engage with<br>stakeholders to discuss findings and identify<br>innovative ways to respond from the sector to these<br>and agree sector response to findings and<br>implementation plan.   | Professional<br>Standards                              | July 2015 to<br>March 2016            | • |  |
| Continue review of student fitness to practise and<br>associated guidance taking into account findings of<br>key reports in relation to candour, raising concerns<br>and related issues and evaluation of student fitness<br>to practise guidance including guidance about<br>boundaries and sanctions and use of students as<br>models.  | Professional<br>Standards                              | July 2015                             | • |  |

| Continue review of guidance about health and disability taking account of key findings and work of other regulators including concerns around mental health <b>(PSA)</b> .  | Professional<br>Standards | July 2015                         |   |  |
|---|---------------------------|-----------------------------------|---|--|
| Consult on new Student Fitness to Practise Guidance<br>and associated Guidance about Professionalism<br>(including student and tutor boundaries and<br>students as models) and commence consultation<br>analysis.   | Professional<br>Standards | December<br>2015 to<br>March 2016 | • |  |
| Consult on revised Guidance about health and disability and commence consultation analysis.   | Professional<br>Standards | December<br>2015 to<br>March 2016 | • |  |
| Work in partnership with OEIs to support<br>identification of good practice in relation to teaching<br>and learning of professional behaviours and support<br>sharing of knowledge about student fitness to<br>practise <b>(FR)</b> .   | Professional<br>Standards | All year                          | • |  |
| Guidance for osteopathic pre-registration educ  | ation                     |                                   |   |  |
| Publish <i>Guidance for osteopathic pre-registration</i><br><i>education,</i> develop and undertake implementation<br>and awareness strategy.   | Professional<br>Standards | All year                          |   |  |
| Work with partners to enhance methods of<br>implementation of the <i>Osteopathic Practice</i><br><i>Standards</i> in pre-registration osteopathic education<br>including, for example, consideration of standards of<br>related to delivery of education and particularly<br>assessment as well as other models for ensuring<br>assessment. | Professional<br>Standards | March 2016                        |   |  |
| Identify and agree next steps for development of pre-registration osteopathic education.  | Professional<br>Standards | March 2016                        |   |  |

| Osteopathic Practice Standards                                |                |            |  |  |
|---|----------------|------------|--|--|
| Work with the OEIs to identify ways to support and            | Professional   | All year   |  |  |
| develop educational faculty to support the delivery           | Standards,     |            |  |  |
| of the Osteopathic Practice Standards.                        | Communications |            |  |  |
| Continue to develop patient involvement in the                | Professional   | All        |  |  |
| delivery of osteopathic education by working in               | Standards,     | year/March |  |  |
| partnership with the OEIs to support the delivery of          | Communications | 2016       |  |  |
| the Osteopathic Practice Standards and to share               |                |            |  |  |
| good practice in this area <b>(FR)</b> . Publish report about |                |            |  |  |
| how patients are involved in osteopathic pre-                 |                |            |  |  |
| registration education.                                       |                |            |  |  |
| Review approach to engaging with pre-clinical                 | Professional   | June to    |  |  |
| students in OEIs and implement programme of                   | Standards,     | December   |  |  |
| visits.   | Regulation,    | 2015       |  |  |
|   | Communications |            |  |  |

| 1.2 Confidence in the Register   |                |                  |        |        |          |  |
|--|----------------|------------------|--------|--------|----------|--|
| Goal: To increase understanding of the Register and to make it more meaningful to patients and others.   |                |                  |        |        |          |  |
| Activity   | Lead           | Timing           | Status | Change | Comments |  |
| Awareness of the Register  |                |                  |        |        |          |  |
| Encourage and equip osteopaths to promote public<br>awareness of their registered status and the GOsC<br>Register in their publicity material and online patient<br>information.   | Communications | All year         |        |        |          |  |
| Assess level of registrant take-up of registration<br>promotional tools (logos, patient information poster)<br>and address deficiencies – test out in Registrants'<br>survey 2015. | Communications | December<br>2015 |        |        |          |  |

| Seek opportunities to work in partnership with the wider healthcare community to increase knowledge and understanding of osteopathic regulation (e.g. NHS Choices, AQP commissioners, CQC, Healthcare Improvement Scotland etc.), and seek to improve information sharing with regulators and others <b>(FR)</b> . | Communications              | All year                           |   | Discussion continuing on<br>information sharing with system<br>regulators. Discussions<br>commenced with NHS Choices<br>and NHS England on osteopathic<br>services. |
|--|-----------------------------|------------------------------------|---|---|
| Implement recommendations based on analysis of<br>results of national survey on patient/public<br>perceptions of regulation and attitudes/expectations<br>relating to osteopathic care.<br><b>Breach of title</b>  | Communications              | July 2015<br>onwards               | • |   |
| Investigate individuals identified or reported to<br>GOsC as incorrectly describing themselves as<br>osteopaths, write 'cease and desist' letters to them,<br>and prosecute those who ignore such letters.   | Regulation                  | All year                           |   |   |
| Monitor activity of individuals removed from the<br>Register during 2014-15, identified in accordance<br>with procedures agreed with Registration<br>department (writing 'cease and desist' letters and<br>prosecuting them as necessary, as described<br>above).  | Registration,<br>Regulation | All year                           |   | Ongoing   |
| Review approach to surveying voluntary leavers<br>from the Register, implement and analyse results.  | Registration                | April 2015<br>and then all<br>year |   | Leaving the Register form now<br>in operation and completed by<br>all registrants who leave<br>voluntarily.   |

| Registration assessment  |   |             |   |  |
|--|---|-------------|---|--|
| Undertake activities to ensure the quality of<br>registration assessments assessing whether<br>registration applicants meet our standards to ensure<br>patient safety. This will include GOsC registration<br>assessors' and return to practice reviewers' appraisal<br>and training, moderation meeting facilitation and<br>regular communications. | Professional<br>Standards,<br>Registration                | All year    |   | Registration assessor and<br>reviewer training (day 1) took<br>place on 18 April 2015. |
| Publish initial scoping for a review of registration<br>assessments to ensure compliance with revised EU<br>Directive 2005/36 on the recognition of professional<br>qualifications.  | Professional<br>Standards,<br>Registration                | May 2015    | • | Initial scoping report noted by ERSC March 2015.                                       |
| Complete review and implementation of revised registration assessments   | Professional<br>Standards,<br>Regulation,<br>Registration | By Jan 2016 | • |  |
| Design evaluation of revised registration assessments.   | Professional<br>Standards                                 | March 2016  |   |  |
| Commence planning for major review of registration assessments as part of the review of the <i>Osteopathic Practice Standards</i> .  | Professional<br>Standards                                 | March 2016  |   |  |
| Continue to undertake registration assessments for international applicants and return to practice interviews.   | Professional<br>Standards                                 | All year    |   | Ongoing  |
| Recognition  |   |             |   |  |
| Continue international work towards the development of mutual recognition and information sharing with other regulators and competent authorities.   | Registration<br>Communications                            | All year    | • | CEN standard has now been approved by CEN members.                                     |

| Goal: To work in partnership with the osteopathic pro   | ofession to ensure t   | that new osteop         | aths have | access to ap | propriate support in their  |
|---|--|-------------------------|-----------|--------------|---|
| transition into practice. Activity  | Lead   | Timing                  | Status    | Change       | Comments  |
| Publish scoping report outlining options for<br>supporting international registrants as they make<br>the transition into practice and commence<br>engagement with stakeholders to inform proposals<br>for supporting international registrants as they make<br>the transition into practice. <b>(PSA)</b> . | Professional<br>Standards,<br>Registration                                   | By July 2015            | •         |              | Initial scoping report considered<br>by ERSC March 2015.<br>Workshop with registration<br>assessors took place on 18 April<br>2015 to inform proposals. |
| Develop, pilot and evaluate proposals to support<br>international registrants as they make the transition<br>into practice including engagement with<br>stakeholders to provide feedback on proposals and<br>support evaluation. Commence programme of<br>implementation.                                   | Professional<br>Standards,<br>Registration                                   | March 2016              | •         |              |   |
| Continue to work in partnership with key<br>stakeholders in osteopathy, including, the Institute<br>of Osteopathy (IO), Council of Osteopathic<br>Educational Institutions (COEI), Osteopathic Alliance<br>and regional groups to support development of<br>mentorship work.                                | Professional<br>Standards,<br>Chief Executive                                | All year                | •         |              |   |
| Conduct annual programme of GOsC presentations<br>to final-year osteopathy students at OEIs to embed<br>understanding of the role of the GOsC and<br>requirements for initial and continued registration.   | Professional<br>Standards,<br>Registration,<br>Regulation,<br>Communications | January to<br>July 2015 |           |              | Presentations have taken place<br>at 10 institutions to 305 final-<br>year students.  |

| 1.4 Continuing fitness to practise (revalidation)   | ) – see also 2.1 b  | elow                       |              |              |  |
|---|---|----------------------------|--------------|--------------|--|
| Goal: To ensure that through an appropriate process   |   |                            | te their cor | ntinuing abi | ity to meet the Osteopathic  |
| Practice Standards (FR).  | _   |                            |              | -            |  |
| Activity  | Lead  | Timing                     | Status       | Change       | Comments   |
| Continuing professional development (providin   | g assurance of co   | ontinuing fitne            | ess to prac  | ctise) prop  | posals   |
| Conduct consultation and engagement on proposals<br>and analyse consultation responses.   | Professional<br>Standards,<br>Communications                  | By October<br>2015         | •            |              | Fifteen engagement events have<br>taken place since the launch of<br>the consultation.<br>78 consultation responses<br>received to date. 4,485 website<br>views, 1,497 document<br>downloads and 551 video<br>downloads. |
| Develop implementation strategy for new CPD scheme (including specification work for new IT system to support)  | Professional<br>Standards,<br>Registration,<br>Communications | June 2015 to<br>March 2016 | •            |              |  |
| Current continuing professional development a   | udits   |                            |              |              | •  |
| Audit 20% of CPD Annual Summary Forms each<br>month to support registrants to meet existing<br>standards and to identify areas of good practice and<br>areas for development. | Professional<br>Standards                                     | All year                   |              |              |  |
| Audit 2% of CPD Record Folders each year to<br>support registrants to meet existing standards and<br>to identify areas of good practice and areas for<br>development.         | Professional<br>Standards                                     | All year                   | •            |              |  |

| Activity   | Lead       | Timing             | Status | Change   | Comments   |
|--|------------|--------------------|--------|----------|--|
| Develop new format for the Fitness to Practise<br>Annual Report and publish.   | Regulation | July 2015          |        | <u> </u> |  |
| Continue to monitor Quality Assurance Framework ncluding quality audits/peer review of decision making <b>(PSA)</b> .                        | Regulation | All year           |        |          |  |
| Implement new data collection on complainants and registrants ( <b>FR</b> ).   | Regulation | By March<br>2016   |        |          |  |
| Implement new fuller Bank of Conditions for PCC.   | Regulation | By March<br>2016   |        |          |  |
| Implement Bank of Conditions for HC.   | Regulation | Timing TBC         |        |          | Due to be considered by Counci 14 May 2015.  |
| Review the Indicative Sanctions Guidance taking account of new guidance to registrants on the duty of candour <b>(FR)</b> .                  | Regulation | Timing TBC         | •      |          |  |
| Implement new Practice Note on Admission of<br>Character Evidence.   | Regulation | By October<br>2015 |        |          | Due to be considered by Counci 14 May 2015.  |
| Implement new Practice Note on Acting in the Public Interest.  | Regulation | By October<br>2015 |        |          | Due to be considered by Counci 14 May 2015.  |
| Implement new policy/guidance on Osteopaths with HIV.  | Regulation | By October<br>2015 |        |          | Initial discussion at OPC in<br>March 2015   |
| mplement new guidance for screeners and/or IC in relation to 'threshold criteria'.   | Regulation | By June 2015       |        |          | Screeners and IC members to<br>be trained on use of Threshold<br>Criteria on 18 May 2015 |
| Seek to enhance the pool of osteopathic expert<br>witnesses acting in fitness to practise cases and<br>organise dedicated training for them. | Regulation | December<br>2015   |        |          |  |

| Provide training as required to fitness to practise<br>panellists, including provision of an annual training<br>day for IC Members and an annual training day for<br>PCC/HC members.  | Regulation                    | By December<br>2015 | • | IC Training Day to be held on 18<br>May 2015. Agenda includes<br>outcomes of IC Audit,<br>Presentation from PSA; Data<br>Protection; and a workshop on<br>Duty of Candour. |
|---|-------------------------------|---------------------|---|--|
| Manage the caseload to deal with cases in an efficient, effective, fair and timely way seeking to achieve a target of 12 months for the majority of complaints to reach a hearing <b>(FR)</b> .   | Regulation                    | All year            |   |  |
| Communicate case learning points and any fitness to<br>practise bulletins issued by PSA, to fitness to<br>practise panellists (and arrange further training<br>where necessary).  | Regulation                    | As required         | • | New Guidance for PCC on<br>Drafting Determinations (which<br>incorporates PSA learning<br>points) to be considered at<br>Council in May 2015                               |
| Implement any changes to procedures<br>recommended by PSA's initial stages audit, the<br>Performance Review or other source.  | Regulation                    | As required         |   |  |
| Engagement with osteopathic organisations (iO and<br>Professional Indemnity Insurers) to review 2014<br>complaints/claims data; identify trends; agree<br>action, and review/revise data collection and<br>dissemination strategy for 2015. | Regulation,<br>Communications | July 2015           | • | Data collection for 2014 is being collated/reviewed by NCOR and participating organisations.   |
| Review best practice across regulators for the support of vulnerable registrants in the fitness to practise process and identify proposals for consideration by OPC <b>(PSA)</b> .  | Regulation                    | October 2015        |   |  |

### 2. To encourage and facilitate continuous improvement in the quality of osteopathic healthcare

| Activity  | Lead                      | Timing                     | Status | Change | Comments                                      |
|---|---------------------------|----------------------------|--------|--------|---|
| Current continuing professional development e   | valuation                 |                            |        |        |   |
| Share identified areas of good practice and areas of development with registrants using a variety of mechanisms including e-learning, engagement with key osteopathic stakeholders and articles in media including <i>The Osteopath</i> . | Professional<br>Standards | All year                   | •      |        | Ongoing.                                      |
| Design osteopathic continuing professional<br>development evaluation to feed into report of 'State<br>of Osteopathic continuing professional<br>development'.   | Professional<br>Standards | June 2015                  | •      |        | Initial scoping considered by OPC March 2015. |
| Conduct continuing professional development<br>evaluation (see above) and prepare report about the<br>'State of Osteopathic continuing professional<br>development'.  | Professional<br>Standards | July 2015 to<br>March 2016 |        |        |   |

#### 2.2 Osteopathic Practice Standards

**Goal**: To embed the role of the *Osteopathic Practice Standards* as the core principles and values for good osteopathic practice and high standards of professionalism.

| Activity                                      | Lead           | Timing   | Status | Change | Comments                       |
|---|----------------|----------|--------|--------|--------------------------------|
| Develop appropriate case studies and learning | Regulation,    | All year |        |        | Initial case studies developed |
| materials to support the professional duty of | Professional   |          |        |        | and due to be considered at IC |
| candour (FR).                                 | Standards,     |          |        |        | Training Day on 18 May and     |
|   | Communications |          |        |        | osteopath workshop on 3 June.  |

| Scope review of the Osteopathic Practice Standards<br>including: key reports and their implications<br>(including the Francis report and the duty of<br>candour, and best practice on whistleblowing);<br>feedback on the Osteopathic Practice Standards;<br>joint work with other regulators; the effectiveness of<br>regulation research; values based practice activity;<br>and new methods of engagement <b>(PSA)</b> . Establish<br>an outline project plan and governance mechanisms. | Professional<br>Standards,<br>Communications  | March 2016                           |   |  |
|---|---|--------------------------------------|---|--|
| Working in partnership with stakeholders, develop<br>and implement plan for raising awareness of<br>professional and personal boundary issues, including<br>the potential for producing dedicated learning<br>materials.  | Professional<br>Standards,<br>Regulation,<br>Communications                                       | All year                             |   |  |
| Complete review of implications of effectiveness of<br>regulation research across all policy development<br>and functions and publish report evaluating options<br>for next steps.  | Professional<br>Standards,<br>Regulation,<br>Registration,<br>Communications<br>, Chief Executive | September to<br>October 2015<br>2015 | • |  |
| Conduct registrant opinion survey to compare<br>professional attitudes and awareness of standards<br>with findings of 2012 Osteopath Opinion Survey,<br>and implement recommendations based on survey<br>findings.  | Communications  | October 2015<br>to March<br>2016     | • |  |

| 2.3 Quality and patient care<br>Goal: To work in partnership with others to develop high quality, patient-centred osteopathic care.  |  |          |        |        |  |  |  |
|--|--|----------|--------|--------|--|--|--|
| Activity   | Lead   | Timing   | Status | Change | Comments   |  |  |
| Work in partnership with osteopaths and osteopathic<br>organisations to encourage the promotion of patient<br>awareness of osteopathic practice standards.   | Communications   | All year |        |        |  |  |  |
| <ul> <li>Continue to support, through the Osteopathic<br/>Development Group and directly, the agreed<br/>development projects for the osteopathic<br/>professions, namely:</li> <li>Evidence/data collection/adverse events (FR)</li> <li>Service standards (FR)</li> <li>Advanced practice</li> <li>Regional support and capacity building (see also<br/>1.4 above)</li> <li>Mentoring (see also 1.3 above)</li> <li>Leadership (FR)</li> <li>International collaboration.</li> </ul> | Communications<br>Professional<br>Standards<br>Chief Executive | All year |        |        | <ul> <li>Advanced Clinical Practice<br/>and Mentoring projects in<br/>research phase.</li> <li>Leadership programme in<br/>development and due to<br/>commence July 2015.</li> <li>Service standards and<br/>international projects – next<br/>steps due to be discussed at<br/>May ODG Board.</li> <li>Evidence (PROMs) project in<br/>pilot phase.</li> <li>New regional support<br/>material in development.</li> </ul> |  |  |
| Contribute to the work of the NCOR Management  | Chief Executive  | All year |        |        | New NCOR contract with QMUL  |  |  |
| Board and Research Council.  | Communications   |          |        |        | agreed.  |  |  |

| <b>Goal:</b> To work in partnership with others to support practice that promotes professional standards and values across the osteopathic profession, while reducing practitioner isolation.   |  |  |        |        |  |  |  |  |
|---|--|--|--------|--------|--|--|--|--|
| Activity  | Lead   | Timing   | Status | Change | Comments   |  |  |  |
| Work in partnership with patients, iO, COEI,<br>Osteopathic Alliance to explore the need for a<br>common statement of osteopathic values to support<br>the review of the next edition of the <i>Osteopathic</i><br><i>Practice Standards.</i> | Professional<br>Standards                    | May 2015<br>(seminar)<br>and all year<br>(follow-up) |        |        | Follow up seminar taking place<br>on 20 May.   |  |  |  |
| Consider how any learning from professionalism<br>project (see 1.1 above) can be incorporated into<br>wider osteopathic practice, e.g. in the revision<br>process for the OPS and communications activities.                                  | Professional<br>Standards,<br>Communications | All year   |        |        |  |  |  |  |
| Work with the Osteopathic Development Group to<br>develop and implement a programme for leadership<br>development with the osteopathic profession.  | Chief Executive                              | All year   | •      |        | Leadership programme in<br>development and due to<br>commence July 2015. Contract<br>signed with Open University and<br>recruitment has commenced. |  |  |  |
| Continue to participate actively in the Osteopathic<br>International Alliance to promote high standards of<br>osteopathy world-wide, including the organisation of<br>an annual regulation forum.   | Chief Executive,<br>Communications           | All year   |        |        | Ongoing  |  |  |  |

## 3. To use our resources efficiently and effectively, while adapting and responding to change in the external environment

| Activity   | Lead   | Timing                              | Status | Change | Comments |
|--|--|-------------------------------------|--------|--------|----------|
| Continue to embed Information Governance<br>Framework within operational processes.  | All Departments                                | All year                            | •      |        | Ongoing  |
| Implement year three of the internal audit<br>programme and report findings to Audit Committee,<br>including audit activity around:<br>1. Return to practice process audit   | Chief Executive,<br>Finance                    | April 2015 to<br>March 2016         |        |        |          |
| 2. Performance against customer service standards.   |  |                                     |        |        |          |
| Assess impact of changes made to IT infrastructure,<br>including online registration tools in previous<br>business plan year and identify any further<br>improvements in use of IT (including mobile<br>applications) to be incorporated into 2016-19<br>Corporate Plan <b>(PSA)</b> . | Registration,<br>Regulation,<br>Communications | July 2015                           | •      |        |          |
| Continue to identify opportunities for enhancing customer service standards and implement.   | Communications                                 | All year                            |        |        |          |
| Undertake survey of graduates joining the Register<br>in 2015 to assess quality of registration process with<br>a view to making customer service improvements.  | Registration,<br>Communications                | November<br>2015 to<br>January 2016 |        |        |          |

| 3.2 Engagement  |                    |                   |               |              |                                   |
|---|--------------------|-------------------|---------------|--------------|-----------------------------------|
| <b>Goal:</b> To engage effectively with patients, the public, delivery of our strategic objectives.   | educators, osteopa | aths, other heal  | Ith care prof | fessionals a | nd other key stakeholders for the |
| Activity  | Lead               | Timing            | Status        | Change       | Comments                          |
| Continue implementation of 2013-16<br>Communications and Engagement Strategy in<br>support of the delivery of the Corporate Plan<br>including identifying targeted approaches to specific<br>stakeholder groups.                | Communications     | All year          | •             |              | Ongoing                           |
| Develop and publish a consultation protocol which<br>sets out clear requirements and expectations for<br>GOsC consultations (to be informed by discussion on<br>common approaches with other regulators).                       | Communications     | By August<br>2015 | •             |              |                                   |
| Support consultation and engagement on policy and<br>operational developments identified in the business<br>plan and those required ad hoc, including through<br>the use of the GOsC Patient Partnership Group<br><b>(FR)</b> . | Communications     | All year          | •             |              |                                   |
| Continue to recruit to the GOsC Patient Partnership<br>Group, keeping members informed and engaged.   | Communications     | All year          | •             |              |                                   |
| Ensure key areas of policy development are<br>assessed at the outset to ascertain their PPI<br>requirements and develop a PPI plan where<br>appropriate <b>(FR)</b> .   | Communications     | All year          |               |              |                                   |
| Identify opportunities for partnership working with<br>advocacy organisations, voluntary, community and<br>PPI bodies to build links with the wider public.   | Communications     | All year          |               |              |                                   |

| Provide GOsC representation at appropriate<br>healthcare conferences/exhibitions across the UK to<br>promote awareness of osteopathic regulation,<br>registration and practice standards, and foster<br>partnerships.  | Communications   | All year | • | Northern Ireland Assembly<br>Reception, Belfast, scheduled<br>for 2 June.<br>Planning for 2015 Scottish<br>Government Conference<br>underway. |
|--|--|----------|---|---|
| Implement communications programme to support<br>profession-wide engagement in the development of<br>the profession.   | Communications   | All year | • | Work underway with iO on a joint communications strategy to increase awareness of development work.   |
| <ul> <li>Support regular engagement activities and events including:</li> <li>Two meetings of the Regional Communications Network</li> <li>Four meetings with the OEIs</li> <li>The work of the Osteopathic Development Group in the development of the profession</li> <li>A programme of visits to regional osteopathic groups.</li> </ul> | Professional<br>Standards,<br>Chief Executive,<br>Communications | All year |   |   |

| 3.3 Governan | ce |
|--------------|----|
|--------------|----|

**Goal:** To ensure that our governance is appropriate and effective.

| Activity   | Lead            | Timing   | Status | Change | Comments  |
|--|-----------------|----------|--------|--------|---|
| Develop, consult and agree a new Corporate Plan<br>for the period 2016-19 including undertaking a<br>review of resource prioritisation with the<br>organisation. | Chief Executive | All year | •      |        | Initial discussions commenced<br>at April 2015 Council strategy<br>day. |
| Provide regular reports to Council on progress<br>against the business plan, and financial, asset and<br>risk management.  | Chief Executive | All year |        |        | Ongoing   |

| Complete any new appointments to the governance<br>structure using the appointments procedure<br>approved by PSA.   | Chief Executive               | All year                        | • |  |
|---|-------------------------------|---------------------------------|---|--|
| In conjunction with the Department of Health<br>develop consultation and legislation for the<br>reconstitution of Council from April 2016.                                | Chief Executive<br>Regulation | May 2015                        | • | Initial documentation submitted to Department of Health.                     |
| Organise training day for potential registrant applicants for Council and other non-executive roles.  | Chief Executive,<br>HR        | October 2015                    | • | Event planned for September 2015.  |
| Review the equality and diversity policy and present<br>to Council, implement new policy.   | Chief Executive               | May 2015<br>and all year        | • | Draft revised plan due to be<br>considered by Council 14 May<br>2015.        |
| Prepare report on performance against PSA<br>Standards of Good Regulation.  | Chief Executive               | October2015<br>to March<br>2016 | • |  |
| Take necessary steps to address any issues arising from the annual PSA Performance Review.  | Chief Executive               | June to<br>December<br>2015     | • |  |
| Prepare an Annual Report on activities undertaken in year and submit to Parliament.   | Chief Executive               | June to<br>September<br>2015    |   |  |
| Undertake preparations so that the financial statements, and the control framework, are ready for the transition to FRS102 which will take effect from FY2016 and beyond. | Resources                     | August 2015<br>to March<br>2016 | • | Discussions planned for Audit<br>Committee and Council in<br>summer of 2015. |

| 3.4 Value for money<br>Goal: To continue to improve value for money in everything that we do.  |                               |                              |        |        |          |  |  |
|--|-------------------------------|------------------------------|--------|--------|----------|--|--|
| Activity   | Lead                          | Timing                       | Status | Change | Comments |  |  |
| Continue to review scope for operational cost<br>savings and identify proposals for further cost<br>efficiencies and savings, and where possible<br>implement in time for FY2016-17. | Chief Executive,<br>Resources | April to<br>December<br>2015 | •      |        |          |  |  |

| Undertake a review of procured services (items to<br>be confirmed) to ensure cost effectiveness and<br>efficiency, including how we might increase the use<br>of local suppliers. | Resources                     | All year |  |                            |
|---|-------------------------------|----------|--|----------------------------|
| Continue to explore options for charitable status application and efficient use of assets.  | Chief Executive,<br>Resources | All year |  | Legal advice commissioned. |

**3.5 Legislative reform Goal**: To undertake a fundamental review of our rules as part of the transition to a new Act.

| Activity   | Lead                           | Timing  | Status | Change | Comments  |
|--|--------------------------------|---|--------|--------|-----------|
| Continue to engage with the Department of Health<br>and Parliament on proposed changes to legislation. | Chief Executive,<br>Regulation | From May<br>2015<br>dependent on<br>Queen's<br>Speech |        |        |           |
| Commence scoping study for transition to new rules (subject to legislation in Queen's Speech 2015).    | Chief Executive,<br>Regulation | ТВС   |        |        |           |
| Implement new Professional Indemnity Insurance<br>Rules and compliance mechanisms.                     | Registration,<br>Regulation    | May 2015<br>onwards                                   |        |        | Completed |