



**Council
5 May 2016
Registration Report**

Classification Public

Purpose For noting

Issue This paper provides an update of registration activity covering the six month period from 1 October 2015 - 31 March 2016.

Recommendations To note the content of the report.

Financial and resourcing implications None

Equality and diversity implications None

Communications implications None

Annexes None

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Background

1. The ninth regular registration report to Council provides detailed information about the statistics and activities which have been undertaken within the Registration team and covers the six months from 1 October 2015 and 31 March 2016.
2. This report will be the last report in its current format as the Executive wish to refresh the way in which registration information is presented to Council, which will include making reference to the PSA Standards of Good Regulation which have recently come into effect as part of the new performance review process.

Registration activities

Performance against service targets

3. The service level agreement for registering a new applicant, from receipt of a completed application, is five working days for UK applicants and 90 days for overseas applicants.
4. Performance against the targets in the reporting period was:
 - a. UK graduates/restorations: median time one day
 - b. EU applicants: median time 30 days (three applications)
 - c. Non-EU applicants: median time 57 days (four applications).

Registration data

Number of registrants and gender split

5. At the end of March 2016, the Register contained 5,098 osteopaths of which 50.29% of registrants are female (2,564) and 49.97% are male (2,534).

Online registration

6. The end of March 2016 saw the first full-cycle for use of the new online registration tool. The online tool was designed to be more user-friendly for registrants while also providing back office efficiency as the online form synchronises with the management database via a download each morning.
7. Historically, only c. 30% of the register renewed their registration online. At the end of March 2016 c. 70% of renewals had been completed online. This is a significant step forward and we are continuing to do more to drive up the amount of registration renewals completed online.
8. Feedback from registrants remains very positive and we are confident that the number of online renewals will continue to increase especially as from 1 March 2016 we have introduced a mechanism where registrants can self-declare

compliance of holding professional indemnity insurance rather than requiring the registrant to provide hard-copy evidence. This will be underpinned by a system of audits which will be completed towards the latter part of 2016.

Internal Market Information (IMI) system alerts

9. Since 18 January 2016 GOsC has been complying with the revised EU Directive 2013/55/EU and sending and receiving alerts through the IMI system about any prohibition placed on a registrant arising through fitness to practise proceedings.
10. In the 11 weeks to 31 March 2016, GOsC has received over 400 IMI alerts relating to prohibitions placed on healthcare practitioners by competent authorities. Each alert is checked by the Registration team, although to date, no further action has been required. Assuming the current usage of the IMI system continues we anticipate receiving c. 1900 alerts over the course of a year.

New registrants' survey

11. A survey of all new registrants who joined the Register in 2015 was held in the reporting period. The results of the survey were extremely positive and help inform improvements to the registration process and how we communicate with new registrants. The findings of the survey were reported to the Education and Registration Standards Committee in March 2016 and have been made available online for registrants.

Student presentations

12. During the opening quarter of 2016, the Head of Communications and Policy and Head of Registration and Resources completed another round of presentations to final year students. Feedback from the students was again very positive.

Changes to criminal disclosure in Scotland

13. The Head of Registration and Resources attended an inter-regulatory meeting in February 2016 to discuss changes to criminal disclosures in Scotland.
14. By way of background to this issue, in 2013 the UK Supreme Court (UKSC) ruled that a blanket disclosure of an individual's criminal past was incompatible with the European Convention on Human Rights - Article 8. This meant the introduction of new categories known as 'protected cautions' and 'protected convictions'.
15. In practice this meant that for GOsC an applicant for registration would only need to disclose a caution or conviction which was not protected. Serious and violent offences would always be disclosed whereas other offences would become protected depending upon:
 - The time passed since the caution/conviction
 - The age of the individual at the time of the offence

16. In late 2015, the Scottish Government used powers to amend its criminal disclosure legislation to comply with the 2013 UKSC ruling. There was no consultation on these changes but instead they called for written observations after the Order was made. While the GMC and GPhC had sight of this, albeit very late in the day, no other regulator was made aware of the Order.
17. Difficulties have arisen as the Scottish Government have decided to take a slightly different approach to the system which is operated in England, Wales and Northern Ireland. This is around the types of offences which will become protected and the time periods for offences to become protected.
18. As a result of these changes the Registration team have amended the information made available to UK students applying for registration, and the Head of Registration and Resources and Head of Professional Standards are discussing the best way for this information to be shared with the osteopathic educational institutions.

Inter-regulatory working

19. Following the meeting referred to at paragraph 13, the General Medical Council and the General Optical Council arranged meetings with the Head of Registration and Resources to discuss the GOSc registration processes, specifically our use of Enhanced checks for Regulated Activity for applicants to the register. This is because the GMC and GOC do not currently require applicants to their registers to have an Enhanced check for Regulated Activity and they are interested in replicating our approach.
20. Following a request made by the HCPC, the Head of Registration and Resources spoke with the HCPC Registration Manager to explain our approach to applicants wanting to return to the register after a period out of practice.

Entrants to the Register

Total number of entrants to the Register	72
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of which

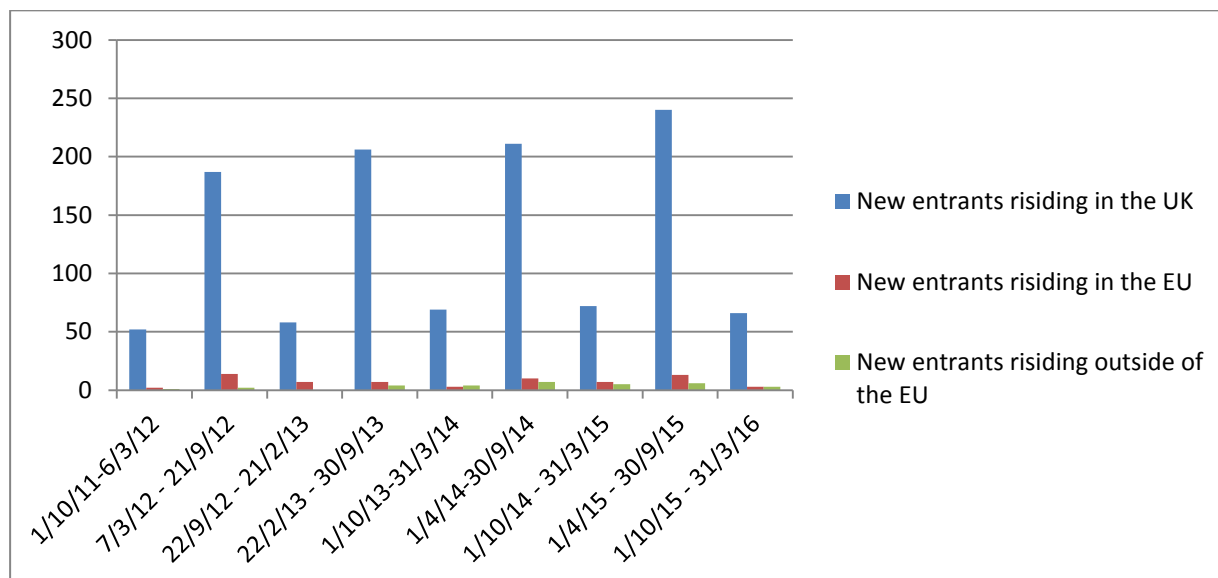
First time applications	60
Restorations to the Register	12

of which

Number of registrants residing in the UK	66
Number of registrants residing in the EU	3

Number of registrants residing outside of the EU	3
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21. The graph below represents the number of new entrants to the Register, and where they initially resided, since the Executive started reporting registration statistics to Council in October 2011.



22. The trend of registration applications spiking between April and September will not change in the future, and because of this, the registration team have well defined processes in place to accommodate this known bulge in activity.

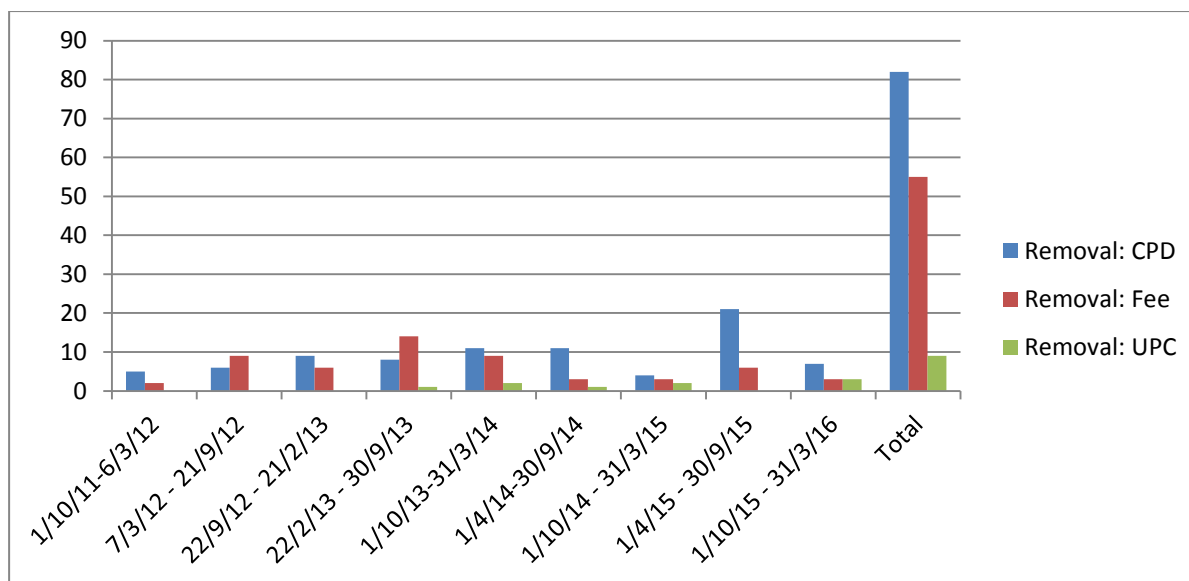
Removals from the Register

Total number of removals (excluding resignations, retirements and death)	13
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of which, those removed for

Non-compliance with CPD	7
Non-payment of fee	3
Unacceptable professional conduct	3

23. Since the reporting of statistics to Council began, 146 registrants have been removed from the Register, with the majority removed for non-compliance with the CPD scheme rather than removed for non-payment of the registration fee.



24. The data below sub-analyses the removal from the Register data into different categories including age and gender.

Removals from the Register (age)

25. Of those registrants removed from the Register, 83% (122 registrants) are below the age of 50, of which 65% (79 registrants) are below the age of 40. The age range per reason for removal is set out in the table below.

26. It is also interesting to note that 100% of those removed from the Register under Fitness to Practise proceedings are all above the age of 40, although it is recognised that with our numbers being so few, it is not possible to determine trend data.

Age range	Number of registrants	Removed for fee non-payment	Removed for CPD non-compliance	Removed under FtP proceedings
20-29	26	14	12	0
30-39	53	21	32	0
40-49	43	17	21	5
50-59	17	4	10	3
60-69	5	1	3	1
70-79	2	0	2	0
Total	146	57	80	9

Removals from the Register (gender)

27. The total number of registrants removed from the Register since reporting of statistics to Council began in October 2011, indicates a 54:46 split between female to male registrants removed from the Register.
28. Regardless of gender, removal for non-compliance with the CPD requirements outweighs removal for non-payment of the registration fee.

Gender	Number of registrants	Removed for fee non-payment	Removed for CPD non-compliance	Removed under FtP proceedings
Male	67 (46%)	21	37	9
Female	79 (54%)	36	43	0
Total	146	57	80	9

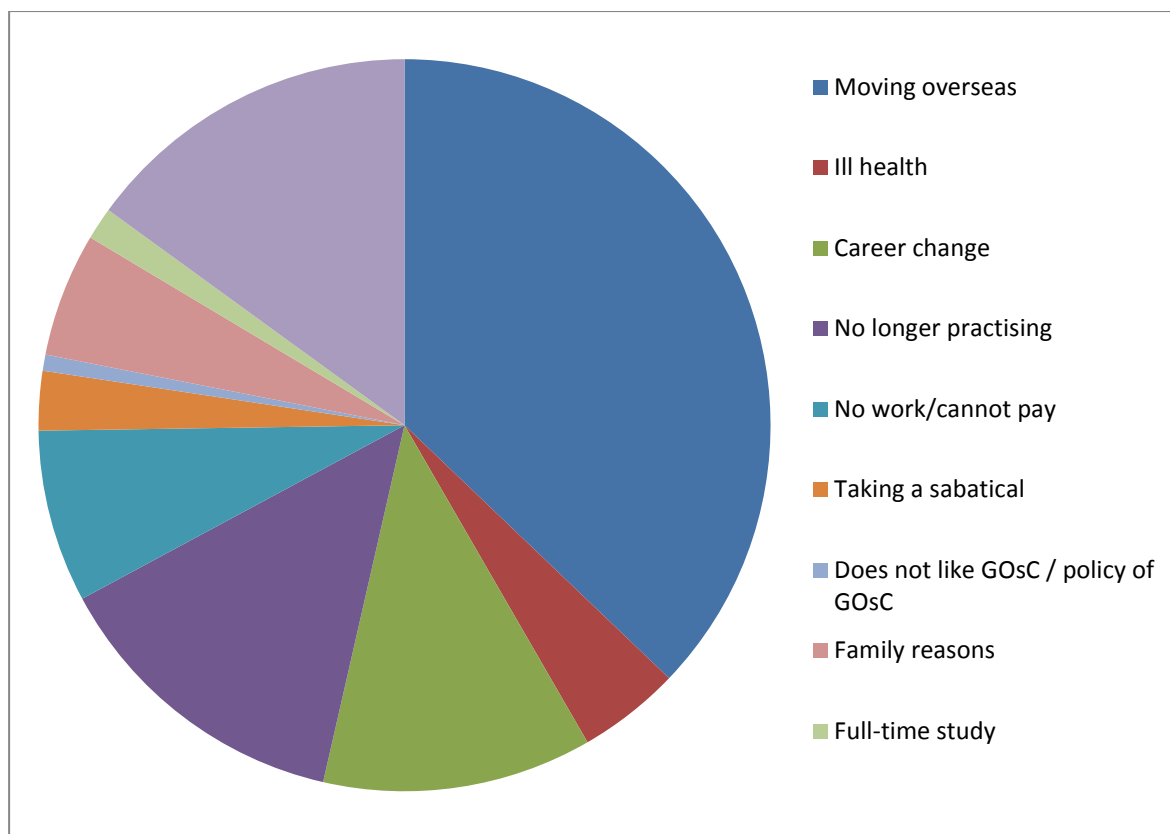
Reasons for resignations

Total number of resignations	43
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of which, the reasons cited were

Moving overseas	13
Ill health	2
Career change	13
No longer practising	8
No work/cannot afford fee/meet renewal requirements	1
Taking a sabbatical	0
Family reasons	2
Full-time study	1
Does not like GOsC / agree with policy	0
No reason provided	3

29. The graph below represents the reasons provided by registrants for their resignation from the Register since statistics were reported to Council.



Registration refusals

Number of registration appeals carried forward from previous report	0
Number of new registration appeals lodged	0

Non-practising registrants

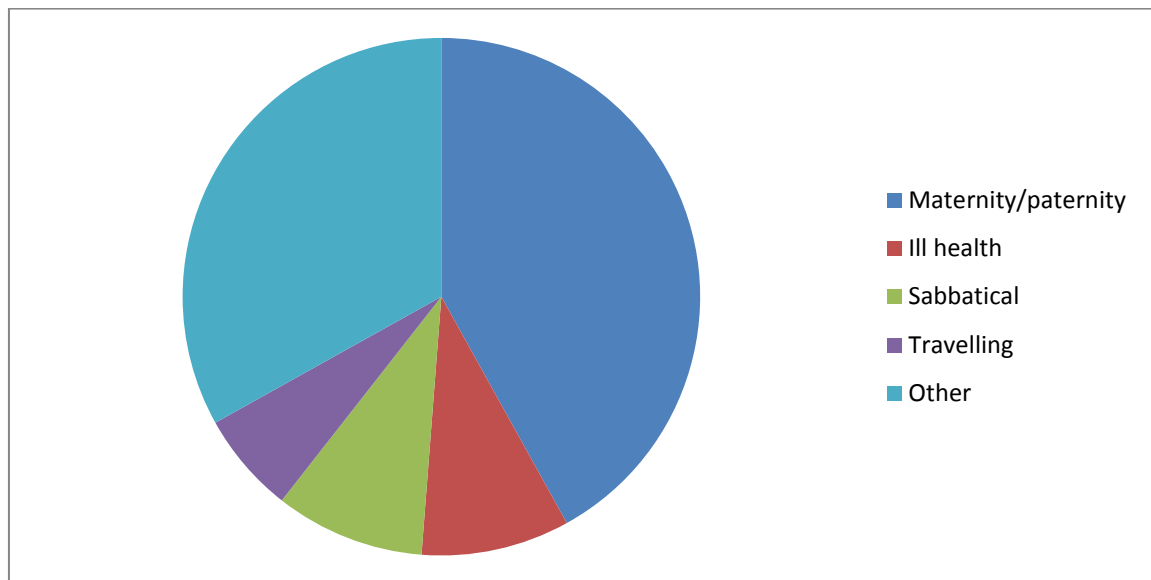
Total number of registrants who are listed as non-practising	151
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of which

Maternity/paternity	63
Ill health	19
Sabbatical	10
Travelling	7
Other*	52

*Other includes: studying; not being able to find work; relocation of home/work premises; circumstances around the loss of a spouse/parent/child; acting as a carer; research; and pursuing other careers.

30. Based on the statistics reported to Council since October 2011, at any one time GOsC has on average 154 registrants who are out of clinical contact with patients. The main reason for registrants to be listed as 'non-practising' is because of maternity leave.



31. In the reporting period, activity which previously sat within the Professional Standards team has been transferred into the Registration and Resources team.

CPD Audits

32. The Business Plans 2014-15 and 2015-16 include commitments for Continuing Professional Development (CPD) auditing activity of:

- 20% of CPD Annual Summary Forms [submitted] each month to support registrants to meet existing standards and to identify areas of good practice and development.
- 2% of CPD Record Folders [submitted] each year to support registrants to meet existing standards and to identify areas of good practice and areas of development.

33. We have previously reported to Council that there was a backlog of audits on the 2015-16 business plan year. The backlog has been cleared and we start the 2016-17 business plan year afresh.

Return to practice activity

34. We offer a return to practice process to all applicants who have been away from UK practice for two years or more to support their transition back to practice.

This process involves a self-assessment activity, which may then be followed by a meeting with two trained Return to Practice Reviewers.

Total number of applicants who went through the Return to Practice self-assessment process	11
Of which, the number who also undertook a Return to Practice review	7

International Registration Assessment activity

35. A total of 19 registration assessments were completed in the reporting period. During the reporting period, three applicants were found to be eligible to register with the GOsC.

Number of Non-UK Review of Qualifications	13
Number of Further Evidence of Practice Questionnaires	3
Number of Assessments of Clinical Performance	3

Recommendation: To note the content of this report.