



Council
13 November 2015
Draft Corporate Strategy 2016-19

Classification	Public
Purpose	For discussion
Issue	Consideration of the draft Corporate Strategy 2016-19
Recommendation	To consider the draft Corporate Strategy 2016-19 at the Annex.
Financial and resourcing implications	The Corporate Strategy will be supplemented by annual business plans which will be mapped against the resources available.
Equality and diversity implications	The final strategy will be mapped against our equality and diversity plan to identify areas which require detailed consideration of equality and diversity.
Communications implications	We intend to undertake a brief consultation with key stakeholders on the draft Corporate Strategy before it is finalised by Council in February.
Annex	Draft Corporate Strategy 2016-19
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Background

1. The current Corporate Plan will come to an end in March 2016, thus a new three-year plan for 2016-19 is required.
2. Council held a strategy day on 15 April 2015 to consider the potential major themes for the Corporate Plan 2016-19. This had been preceded by a Senior Management Team away-day on 25 February 2015, which informed discussions. Council had an opportunity to discuss initial themes and activities for the corporate plan at its meeting on 16 July 2015.
3. In addition the Education and Registration Standards Committee and Osteopathic Practice Committee considered the initial themes and activities at their meetings on 13 October 2015. An informal discussion of the same paper took place at a regular meeting with osteopathic educational institutions on 16 September 2015.
4. On the basis of these previous discussions, this paper sets out for Council's consideration a draft Corporate Strategy 2016-19 which is found at the Annex to this paper.

Discussion

5. In the previous paper it was argued that the GOsC's high strategic objectives should be those laid down for us by Parliament, rather than be of our own creation.
6. Our current statutory duty is set out in the Osteopaths Act 1993, which is to 'develop and regulate the profession of osteopathy' in order to ensure public protection.
7. The Health and Social Care (Safety and Quality) Act 2015 will, when it is enacted through regulations (at a date as yet unknown), will extend the duty at paragraph 6 above with the following objectives:

'The over-arching objective of the General Council in exercising its functions is the protection of the public.

The pursuit by the General Council of its over-arching objective involves the pursuit of the following objectives:

- a. to protect, promote and maintain the health, safety and well-being of the public;
- b. to promote and maintain public confidence in the profession of osteopathy; and
- c. to promote and maintain proper professional standards and conduct for members of that profession.'

8. However, these objectives require a further iteration into strategic operational objectives before they can be broken down further into specific goals and activities, which in turn will be supported by the more detailed Business Plan and associated budget that we will publish each year.
9. In this draft Corporate Strategy we have retained the same strategic objectives as in 2013-16 and many of the goals are similar. This is unsurprising given that much of our activity is non-discretionary.
10. However, we have sought to articulate our goals and activities at a higher level than in previous Corporate Plans, reducing the number of goals from 14 to 11 and the activity lines from 57 to 48. Therefore, while some of the more 'business as usual' activities do not now appear this has enabled us to include a clearer statement of our desire to put patients at the heart of our work. We have also tried to emphasise our commitment to partnership working, identifying throughout the document organisations that we hope to work with to help meet our goals.
11. This higher level approach will also help make our annual Business Plans more congruent with the Corporate Strategy. In previous versions (those from 2010-13 and 2013-16) by the time we reached the third year some of the detailed activities that were proposed should take place each year have become outdated or superseded due to changing circumstances.

Performance measurement

12. Measurement of the performance of regulators is always challenging. Over the past three years we have sought to do so, in part, through a 'balanced scorecard' approach based around three areas:
 - a. Meeting our statutory functions
 - b. Delivery of benefit to stakeholders
 - c. Effective and efficient leadership and management
13. This approach has enabled us to provide a useful annual commentary on the work of the GOsC but it would be helpful in the next period to take a fresh approach.
14. Our thinking in this area has been informed by work on the measurement of public value by Professor Mark Moore which proposes a 'strategic triangle' which measures or assesses effectiveness at an organisational level.¹ Interestingly this

¹ Moore, M. (1995) *Creating Public Value: Strategic Management in Government*. Massachusetts, USA Harvard University Press.

same approach was explored in the PSA's recent publication *Rethinking regulation*.²

15. Drawing on this work we have sought to identify measures across three main areas:
 - a. Ensuring that our statutory duties are met and that we have the confidence of the public and registrants for what we do
 - b. Providing demonstrable public value from the outcome of our work, both internal activity and that delivered in partnership with others
 - c. Operating effectively as an organisation, including making effective use of resources to achieve our objectives'.
16. These three areas will be evaluated in different ways. The first, in part, will be around continuing to meet the PSA's standards of good regulation and other statutory requirements. It will also use measures of public and registrant confidence through periodic survey work some of which has already taken place and provides a baseline.
17. The second area is around demonstrating public value where we think we should be bolder in setting ourselves stretching targets for effective outcomes from our work, for example through greater analysis of the types of complaints generated about osteopaths and our ability to reduce these through reinforcement of positive behaviours. This in turn would be supported by greater seeking greater feedback from a range of stakeholders on the quality of our performance.
18. The third area is around using more traditional measures of performance or KPIs including those published by the PSA as part of the annual Performance Review. This is supplemented by the use of internal audit work to identify and implement service improvements. This also, helpfully, brings the work of the Audit Committee into contributing to the assessment of our performance.

Assurance and risk management

19. We have expanded the section on assurance and risk management in this Corporate Strategy to make more explicit the strategic connection between strategy, risk, performance and assurance which we hope will assist both Council and the Audit Committee in their work.

Conclusion

20. The approach set out in the proposed Corporate Strategy is not radically different from the previous version, however it does have some subtle differences in approach that we hope will be welcomed by Council.

² <http://www.professionalstandards.org.uk/docs/default-source/psa-library/rethinking-regulation.pdf?sfvrsn=2>

21. At this point we are seeking feedback from Council and will also seek the views of the Audit Committee at its meeting on 25 November. We also intend to consult informally with the partner organisations identified in the Strategy. A final version will be brought to Council for its approval at its meeting on 4 February.

Recommendation: to consider the draft Corporate Strategy 2016-19 at the Annex.

Draft Corporate Strategy 2016–2019

Introduction

This document sets out the strategic priorities of the General Osteopathic Council (GOsC) over the next three years, and has three main purposes:

1. It describes what Council wishes the organisation to achieve
2. It provides a mandate for the organisation's work programme, led by the Chief Executive and staff team
3. It provides a framework for the monitoring of the organisation's performance by Council.

The Strategy describes our goals and key activities against three main objectives. It also describes how we will measure our performance, and how assurance is provided that the organisation is operating effectively.

Each year we will publish a detailed Business Plan setting out the work we will undertake in order to meet our goals. Council will receive at each meeting a report of progress against the annual Business Plan.

Our aim as a regulator

The statutory duty of the GOsC is to 'develop and regulate the profession of osteopathy' in order to ensure public protection.

Our aim as a regulator is: *to fulfil our statutory duty to protect public and patient safety through targeted and effective regulation, working actively and in partnership with others to ensure a high quality of patient experience and of osteopathic practice.'*

Our strategic objectives 2016-19

To meet this aim, in 2016-19 we will be working towards three high-level strategic objectives, which are:

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.

Partnership is at the heart of delivering our objectives; a regulator is not synonymous with the profession it regulates and we believe strongly that, where appropriate, we should work with others to achieve these objectives.

Goals and activities 2016-19

Strategic objective 1: to promote public and patient safety through proportionate, targeted and effective regulatory activity

Our goals	How we will achieve them
<p>1.1 To ensure that osteopaths keep their knowledge and skills up to date, and continually enhance and improve their practice</p>	<ul style="list-style-type: none"> • We will implement a new CPD scheme that supports and encourages practitioner reflection, and peer learning and review • We will ensure that there are high-quality resources available to support learning in key areas, such as communication and consent • We will audit implementation of our new CPD scheme using a proportionate and risk-based approach
<p>1.2 To ensure that osteopathic education is of high quality and continues to evolve to reflect changes in education and healthcare</p>	<ul style="list-style-type: none"> • We will work with the Quality Assurance Authority (QAA) for Higher Education to maintain the quality of osteopathic education and training • We will work with the QAA and osteopathic educational institutions to develop and implement a more risk-based and effective approach to quality assurance • We will work with osteopathic educational institutions to support high standards of professionalism among students • We will work with osteopathic educational institutions to identify and disseminate best practice in teaching, learning and assessment • We will continue to promote enhanced patient involvement in osteopathic education • We will work with the Council of Osteopathic Educational Institutions to support the development of osteopathic educators • We will continue to update and embed relevant GOsC guidance within education
<p>1.3 To ensure patient safety by taking effective, timely and proportionate action on complaints about</p>	<ul style="list-style-type: none"> • We will investigate allegations made against osteopaths that meet our threshold for consideration and manage the adjudication process for complaints where a case to answer has been found • We will seek to identify improvements in our fitness to

<p>osteopaths</p>	<p>practise processes and where necessary seek changes to our rules to implement these</p> <ul style="list-style-type: none"> • We will continue to improve our service to complainants and witnesses to ensure high levels of confidence in our processes • We will work with the Institute of Osteopathy and others to ensure that registrants can obtain appropriate support when they are subject to complaints against them • We will seek to use the findings from complaints to identify ways to improve standards and reduce the risk of complaints being made
<p>1.4 To ensure that only those eligible to do so practise as osteopaths in the UK and to increase understanding, awareness and use of the register</p>	<ul style="list-style-type: none"> • We will develop and implement new assessment processes for EU and other international applicants, and those returning to practice • We will work with other international competent authorities to develop mutual recognition of qualifications, and simplify registration processes • We will implement improvements to the registration process for new UK applicants • We will seek to develop greater awareness of the register and our regulatory role with other regulated professions, regulators, patients and the public • We will continue to foster links and share best practice within the international osteopathic community
<p>1.5 To put patients, patient-centred regulation and patient-centred healthcare at the heart of our work</p>	<ul style="list-style-type: none"> • We will continue to improve our service to complainants and witnesses to ensure high levels of confidence in our processes • We will ensure that patients have access to high-quality information about osteopathic practice and our role as a regulator • We will continue to seek input to all our policy development and projects from patients and the public, including through our Patient Partnership Group, and forge and maintain links with patient groups across the UK • We will continue to promote enhanced patient involvement in osteopathic education • We will encourage the use of patient feedback by osteopaths within our new CPD scheme • We will work with the National Council for Osteopathic Research and the Institute of Osteopathy to promote the use of Patient Reported Outcome Measures

	(PROMs) to support high quality osteopathic care
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Strategic objective 2: to encourage and facilitate continuous improvement in the quality of osteopathic healthcare

Our goals	How we will achieve them
2.1 To promote high standards of practice and professionalism in the osteopathic profession	<ul style="list-style-type: none"> • We will revise and update the <i>Osteopathic Practice Standards</i> and improve our guidance to support osteopaths in practice • We will work with the Institute of Osteopathy and others to develop a shared understanding of professional values and promote greater ownership of standards within the profession • We will develop supplementary guidance and new learning materials to support greater understanding and effective use of the <i>Osteopathic Practice Standards</i>
2.2 To ensure that the osteopathic profession continues to develop its capacity to improve patient experience and high quality care	<ul style="list-style-type: none"> • We will invest in development projects led by the profession where these meet our criteria for improving quality or safety of osteopathic practice • We will continue to support existing development initiatives including those around: <ul style="list-style-type: none"> - Mentoring and the transition into practice - Accreditation of advanced clinical practice - Leadership development - Implementation of service standards • With the Institute of Osteopathy we will support capacity building within local osteopathic groups to contribute to the development of the profession and the new CPD scheme • We will work with NHS England and the Institute of Osteopathy in exploring the introduction of prescribing rights for osteopaths who wish to have them
2.3 To use evidence from data collection, risk analysis and research to inform the development of osteopathic regulation and	<ul style="list-style-type: none"> • We will continue to track complaints and claims made against osteopaths to identify areas for improvement within practice • We will improve the analysis of data held by the GOsC to seek greater understanding of osteopaths who are at risk of underperforming practice • We will continue to support the National Council for Osteopathic Research as a means to increase research

practice	<p>awareness and research activity within the osteopathic profession</p> <ul style="list-style-type: none"> • We will use the findings from all of these activities, other research and opinion surveys to provide feedback to the osteopathic profession for the improvement of education and practice
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Strategic objective 3: to use our resources efficiently and effectively, while adapting and responding to change in the external environment.

Our goals	How we will achieve them
<p>3.1 To operate efficient, economic and effective operational systems and processes</p>	<ul style="list-style-type: none"> • We will review our information technology requirements and prepare a new medium-term IT strategy • We will seek to ensure that our transactions are paper free wherever possible • We will continue to identify value for money savings in all our operations • We will continue to embed high standards of information governance within the GOsC
<p>3.2 To enhance the quality of service that we provide to patients and the public, registrants and our other stakeholders</p>	<ul style="list-style-type: none"> • We will continue to strive to provide high quality and responsive service to all our customers • We will ensure that all our communications are diverse, targeted, informative and effective, working with others to increase our impact whenever we can • We will use a range of survey and feedback mechanisms to enhance all our activities
<p>3.3 To operate with high standards of corporate governance and respond effectively to changes in the external environment</p>	<ul style="list-style-type: none"> • We will build the capacity of the new Council to ensure that it provides appropriate scrutiny and assurance of the GOsC's activities • We will create a new policy advisory forum to ensure that a wide range of stakeholders can contribute to our policy development • We will ensure that our appointments continue to meet Professional Standards Authority best practice standards • We will continue to meet our duties under the Equality Act and embed good practice in equality and diversity in all our work • We will continue to work with the Department of Health (England) and the devolved governments, in

	particular preparing for legislative change
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Performance measurement, assurance and risk management

We will use a number of means to measure our effectiveness as a regulator. These will be balanced across three main areas:

- Ensuring that our statutory duties are met and that we have the confidence of the public and registrants for what we do
- Providing demonstrable public value from the outcome of our work, both internal activity and that delivered in partnership with others
- Operating effectively as an organisation, including making effective use of resources to achieve our objectives'

The way in which we will measure our success across these areas is set out in the table below.

Area of performance	Measures of success
Meeting our statutory duties and maintaining confidence	<ul style="list-style-type: none"> • Continuing to meet the PSA’s standards of good regulation • Privy Council and Department of Health intervention remain unnecessary • Appeals or reviews of statutory decisions are not upheld • The public and registrants continue to have confidence in our work
Providing demonstrable public value	<ul style="list-style-type: none"> • Maintenance/improvement of standards measured through: <ul style="list-style-type: none"> - Outcomes of fitness to practise complaints - Volume/types of complaints - Engagement in new CPD activities and processes - Implementation/outcomes of development projects - Reduction in conditions imposed on Recognised Qualifications - Successful s32 activity (including prosecutions) • Stakeholders – including patients, registrants and partners – are satisfied with our performance
Using our resources to	<ul style="list-style-type: none"> • Meeting a range of KPIs including: <ul style="list-style-type: none"> - Registration applications processing

operate effectively	<ul style="list-style-type: none"> - Fitness to practise complaint handling - Auditing of CPD returns - Performance against customer service standards • Implementing improvements identified from audit and other feedback
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Assurance and risk management

Council holds the Chief Executive to account for the delivery of the Corporate Strategy, annual Business Plan, budget, risk mitigation and organisational performance. It also ensures that the appropriate audit, control and assurance systems are in place.

Council has agreed its level of tolerance of risk across the breadth of the GOsC's functions and it considers regularly the organisation's key risks and the mitigating actions. Council is supported in this function by the Audit Committee.

The Audit Committee also agrees an annual programme of internal audit and the scope of the annual financial audit. It reviews the findings from these activities and the Executive's response and makes recommendations to Council, including providing an opinion annually on the systems and processes that it has in place.

External accountability includes an annual Performance Review and other audit activity carried out by the Professional Standards Authority for Health and Social Care, and an Annual report which is laid before Parliament.

Principles that underpin the work of the GOsC

The GOsC is committed to conducting all its activities as a regulator and an employer based on a number of key principles:

Proportionality

We will ensure that the regulatory burden is no greater than it needs to be to deliver our statutory duty, focusing our resources on areas of risk to public protection and where there is scope to achieve the most in terms of improving standards of osteopathic practice.

Fairness

We will be consistent in the development and application of our policies and procedures in order to ensure fairness, with the aims of promoting equality, valuing diversity and removing any unfair any discrimination.

Accountability

We will publicise our actions and decisions, wherever possible, ensuring that the information is clearly explained and easily accessible. We will explain how we have taken our stakeholders views into consideration in developing policy and in improving our performance. Council will seek to exemplify high standards of governance.

Anticipation

We will monitor trends in healthcare, regulation, osteopathic practice and education, in order to respond effectively to change and to support the osteopathic profession to respond accordingly.

Inclusivity

We will respond to the needs of patients, the public, registrants and other stakeholders, taking their views into account in deciding the most effective way to carry out our regulatory functions and working in partnership with others, where appropriate, to achieve our goals.

Efficiency

We will foster a culture of innovation and continuous improvement, taking steps to benchmark our performance periodically and setting targets to achieve best practice.

We will use our resources efficiently, seeking to achieve further efficiencies without compromising the quality of our work.