



Minutes of the Public Session of the 88th meeting of General Osteopathic Council held on Thursday 16 July 2015 at 176 Tower Bridge Road, London SE1 3LU

Unconfirmed

Chair: Alison White

Present: John Chaffey
Colin Coulson-Thomas
Jorge Esteves
Jonathan Hearsey
Nick Hounsfield
Kim Lavelly
Brian McKenna
Kenneth McLean
Joan Martin
Haidar Ramadan
Julie Stone
Jenny White

In attendance: Dawn Carnes, Director, NCOR (Item 15)
Kit Holmes, Professional Standards Manager
Sheleen McCormack, Head of Regulation
Margot Pinder, Web Manager (Item 18)
Matthew Redford, Head of Registration and Resources
Marcia Scott, Council and Executive Support Officer
Chris Shapcott, Chair, Audit Committee (Items 7, 8, 9 and 17)
Brigid Tucker, Head of Policy and Communications
Tim Walker, Chief Executive and Registrar

Observer: Penelope Sawell, Registrant

Welcome and opening comments

1. The Chair welcomed all participants to the meeting. A special welcome was extended to Chris Shapcott, attending his first meeting of Council as Chair of the Audit Committee, and also to Penelope Sawell, a registrant, attending the meeting as an observer.

Item 1: Apologies

2. Apologies were received from Mark Eames. Apologies were also received for Maurice Cheng, Chief Executive, Institute of Osteopathy and Fiona Browne,

Head of Professional Standards. The Chair, on behalf of Council, asked that best wishes be passed on to both Fiona and Maurice.

Item 2: Questions from observers

3. There were no questions from observers.

Item 3: Minutes and Matters Arising

Minutes

4. The minutes of the public session of the Council held on 14 May 2015, were approved as a correct record of the meeting.

Matters Arising

5. There were no matters arising.

Item 4: Chair's Report

6. The Chair gave an oral report to Council. The main points were:
 - a. Annual reviews: the programme of annual reviews had been completed for Council members, chairs of committees and independent members. An important area of discussion had been the reconstitution of Council and the implications for individual members. Assuming approval from the Department of Health and Privy Council, the legislation will require the appointment of five registrant members and four lay members with existing members being considered alongside external applicants, consistent with past practice of other healthcare regulators. The process for appointments had been considered at the meeting of the Remuneration and Appointments Committee, 2 July, and was now subject to approval by the Professional Standards Authority. The appointments process, including those for the fitness to practise committees, would mean a busy programme for this year and next.
 - b. Development Day – 12 September 2015: members were reminded that planning was underway for a development day for potential new registrant members on Saturday 12 September. Members who were interested in supporting the event were invited to inform the Chair in order to facilitate planning.
 - c. Chair's annual review: the Chair reported on her own development points agreed at her annual review meeting. This year, the review was further informed by an independently conducted 360 degree review process. The development points agreed were:

- Improve personal preparedness to influence, oversee and lead Council through its re-constitution and making new rules in the context of refreshed legislation;
- Continue to focus on chairing skills so that style is seen to be inclusive and neutral, and that the Registrant voice is heard, and diverse views properly taken into account;
- Continue to build capacity, capability and confidence of both individual members and whole-Council to improve Council effectiveness in strategy development, financial capability and Executive scrutiny;
- Work with the Chief Executive to set out and continue to communicate to Council and external stakeholders the strategic future envisaged for the organisation.

Mark Eames and Kenneth McLean were thanked for undertaking the work of the Chair's annual review.

- d. Meeting with the chairs of the OEIs: the Chair had hosted a meeting with the chairs of the osteopathic educational institutions. Although the principals of the institutions meet regularly, this was the first time that the chairs had met. The meeting considered the main challenges facing the profession, education in the context of that, and how the chairs view the relationship with the GOsC. It was an interesting session, though there was some surprise at how little knowledge there was about the work of the Osteopathic Development Group. It was agreed that further meetings would be planned in due course.
7. Commenting on the Chair's report members also expressed surprise that the OEI Chairs were not fully aware of the work of the Osteopathic Development Group. It was agreed that it was important to continue the meetings with the OEI Chairs and also very important that communications be improved.

Council noted the Chair's report.

Appointments

8. The Chair introduced the item which concerned the reappointment of the Chair of the Investigating Committee (IC) and the extension of appointments for the external members of the Osteopathic Practice Committee (OPC).
9. Members were reminded that the initial OPC appointments had been for short terms (two years for Jane Fox, one year for Manoj Mehta) due to the uncertainty around the constitutional arrangements in light of the anticipated Law Commission reforms.

10. Members were informed that the appointees had all indicated their willingness to be reappointed.

Council approved:

- a. the reappointment of James Kellock as Chair of the Investigating Committee from 1 October 2015 to 31 March 2019.**
- b. the extension of the appointments of Jane Fox and Manoj Mehta to the Osteopathic Practice Committee until 31 March 2017.**

Item 5: Chief Executive's Report

11. The Chief Executive introduced his report which gave an account of activities undertaken since the last Council meeting and not reported elsewhere on the agenda.
12. The Chief Executive highlighted the following:
- a. Constitution Order: the draft amendment to the Constitution Order was with ministers waiting approval and would be followed by a public consultation.
 - b. Business Plan: due to Fiona Browne's ongoing absence, there are some areas of slippage in projects related to the Professional Standards team. The Chief Executive informed members that temporary cover was being arranged to bridge the gap within the team and it was expected that the Business Plan timetable would be back on track towards the end of 2015.
 - c. Data analysis: members were informed there had been reconsideration given to conducting a further registrant survey and instead a programme of data analysis would be commissioned to look at registration, CPD and fitness to practice data to support a more risk-based approach to regulation.
13. In discussion the following points were made and responded to:
- a. Business Plan: members were concerned that Fiona Browne's continuing absence might have a detrimental effect on the capacity of the other members in the Professional Standards team. The Chief Executive agreed that there were risks with a small organisation like the GOsC but it was important to prioritise the organisation's statutory duties and, that under the circumstances, some long-term projects could take longer to complete.
 - b. Members asked if there was a case for advising the committees about where delays might be expected with projects. The Chair reminded members that it was not the role of committees to monitor the organisation's work plans. The Chief Executive would continue to manage the situation and report on progress to Council.

- c. Duty of candour: members asked if, following discussions on the joint statement on the duty of candour, the insurers had indicated how they would communicate the outcome to registrants. Members were informed that the insurers had taken suggestions on board relating to the duty of candour but there was no requirement for them to take specific action. A meeting with the insurers was being planned for September and this issue is on the agenda to discuss how best to communicate with policy holders. The Chief Executive added that the professional indemnity insurers had given assurances that there was no conflict between their requirements and the duty of candour.
- d. Members also asked whether the Institute of Osteopathy (iO) would be working to promote duty of candour to the profession. The Chief Executive informed members that the iO was currently working on a Patients' Charter and in discussions with the GOsC it had been suggested that the Charter reflect the duty of candour. Members were also advised that the PSA with NHS England were arranging a seminar to take place in September related to the Secretary of Health's request to Sir Bruce Keogh to review professional codes and encouraging candour.
- e. Values seminar: members asked if there was any further information on the outcomes of the values seminar held in May. The Chief Executive responded that there was a need to reflect on the learning from the meeting especially in relation to the review of the *Osteopathic Practice Standards*. A paper on this would be presented to Council at a future meeting.
- f. Leadership programme: members asked about the demographic of the participants who were taking part in the Osteopathic Leadership Programme, the first of which would be held 18 July. The Chief Executive responded that participants were from across the UK although the majority were located in the south of England. He also pointed out that the majority of those taking part were women.

Financial report

- 14. The Financial Report was presented by the Head of Registration and Resources highlighting the following:
 - a. Report presentation: following discussions at Council's seminar in May, changes had been made to include more explanatory narrative to the figures presented. On behalf of Council the Chair thanked the Head of Registration and Resources for responding to the feedback on financial reporting commenting that it was much more self-explanatory.
 - b. PSA Levy: the Levy would not take effect until August and therefore will be a pro-rata levy in this financial year. An adjustment for this would be reflected in the Financial Report for the next meeting in November.

- c. Registrant fees: members referred to paragraphs 3 and 4 of the report requesting clarification of the fees breakdown. It was explained that a registration fee had to be apportioned so that only the part relating to the relevant financial reporting period be shown in the accounts. The payment method, whether by direct debit or payment in full, was not the issue. It was also explained that the start date for a registrant's fee was based on the legislation and their date of initial registration, therefore changing to a single date was not viable. It was added that it was important that accounting rules were adhered to and that cash and income accounting are guided by separate accounting practice.
- d. Fitness to practise: members referred to paragraphs 23 and 24 of the report in reference to the expected costs relating to Investigating, Health, and Professional Conduct Committee hearings, asking if there was a view on the current cases and a forecast on expenditure for the whole year. The Head of Registration and Resources responded by saying that the forecast is kept under review and the year-end position will be updated as the financial year progresses.

Council noted the Chief Executive's Report.

Item 6: Quarterly Fitness to Practise Report

- 15. The Head of Regulation introduced the item which gave the quarterly update on the work of the Regulation Department and the GOsC's fitness to practise committees. She highlighted the following:
 - a. Health conditions guidance: following the last meeting of Council the guidance has been published for consultation and some responses have already been received. The consultation is due to close 6 October.
 - b. Appeals: there is one statutory appeal due to be heard 28 July which will be a one-day hearing. A report on the appeal will be presented to Council at its next meeting.
 - c. Electronic case papers: the three-month pilot scheme for the fitness to practise committees had commenced with the Investigating Committee receiving papers using the GOsC private document library. Although there have been some teething problems the overall feedback from the IC members on the new system had been positive, and that it has greatly alleviated some of the security issues.
- 16. In discussion the following points were made and responded to:
 - a. Electronic case papers: it was explained that the PCC and HC do not see their papers in advance which was the reason to pilot the scheme with the IC first as their papers are read prior to meeting. It was agreed that if the system was rolled out to the PCC and HC there might be a change in how

they approached cases and also a benefit with improving efficiency as time would not be taken up reading papers on the first day of a hearing. The Chief Executive added that providing documents electronically may alleviate some of the problems with late submissions.

Members were given assurances that issues concerning information governance and security while using the document library for case papers had been addressed. Council was informed that a circular had been sent to all fitness to practise committee members explaining the system and how it was expected to work and also a list of 'do's and don'ts' when using the library to access and read documents.

- b. Judicial Review: members were advised that the application made in February 2015, for judicial review against an interlocutory decision made by the PCC had been settled at a cost to the GOsC of £12,000.
- c. Section 32 Cases: members were informed that the high number of Section 32 cases reported in the dashboard related to old cases all of which needed to be reviewed to ensure some were properly closed. Additional resources were planned to assist the Regulation team with this issue and a report on progress would be made at the next meeting in November.

Council noted the Quarterly Fitness to Practise Report

Item 7: Annual Report and Accounts

- 17. The Head of Registration and Resources presented the Annual Report and Accounts for the Financial Year 2014-2015. The following were highlighted:
 - a. The external financial audit conducted by Grant Thornton LLP had been completed in May 2015 and the findings brought to the Audit Committee at their meeting on 2 July.
 - b. The audit had been the first under the restructured Registration and Resources team. The restructuring allowed for a clearer and more enhanced segregation of duties which the audit findings report advised should continue to be developed.
 - c. The audit report is a clean report with no serious deficiencies within the financial control framework.
 - d. It was noted that improvements could be made around a policy for 'bad debts' where money is owed but unlikely to be received.
 - e. It was noted that a request had been made by the auditors for a statement of remuneration to be signed by all members of Council which would be completed at this meeting.
- 18. In his comments the Audit Committee Chair highlighted:

- a. The Audit Committee's review of the audit plan and subsequent review at the 2 July meeting where a number of questions had been put to the auditors relating to details of the audit and presentation of the accounts.
 - b. The issue of the valuation of the GOsC building and land asset was discussed in depth as it is not clear that the value in the accounts was an accurate reflection of the current market value.
19. Members were assured that the follow up with auditors had been completed and all parties were happy with the report.
20. The Chair added that she had attended the 2 July meeting of the Audit Committee and that scrutiny had been appropriately robust and thorough.
21. In discussion the following points were made and responded to:
- a. A member queried whether the nature of the relationship with the Quality Assurance Agency for Higher Education (QAA) was a partnership as they were contracted to provide services to the GOsC. The Chief Executive advised that it was seen as a partnership because in effect the QAA was delivering some of the statutory duties of the GOsC.
 - b. Members queried whether the GOsC was in compliance with UK GAAP (General Accepted Accounting Principles) in respect of the depreciation of land and buildings. It was confirmed that in accordance with its legislation the GOsC is not required to meet UK GAAP, although its principles were applied as best practice.

Council noted the Audit Findings Report and approved the Letter of Representation to be signed by the Chair of Council

Council approved the Annual Report and Accounts for signing by the Chair of Council

Item 8: Financial Reporting Standard 102

22. The Head of Registration and Resources introduced the item concerning the Financial Reporting Council replacing existing UK GAAP with Financial Reporting Standard 102 (FRS 102) and the implications for the GOsC of the introduction of the new standard.
23. It was noted the Osteopathy Act 1993 states, in reference to accounting arrangements, that:

S40-(1) the General Osteopathic Council shall keep proper accounts of all sums received or paid by it and proper records in relation to those accounts.

It was considered that the impact of FRS 102 on the GOsC would be limited. Members were advised that any work that was required to ensure compliance

with the new standard could be conducted internally. The timeline for work related to FRS 102 would mean an immediate start in order to fit with the audit timetable.

24. In the matter relating to the building and land assets, members were advised that, as explained in the previous item, the building and land asset were currently listed as one item. The introduction of FRS 102 would give an opportunity to split the asset valuation. This would be appropriately investigated as a separate issue and presented to Council at the next meeting.
25. There was some concern about the implications of tax liability if the building/land asset were revalued, but members were assured that there would be no tax liability for the GOsC.
26. Members were assured that the GOsC had, or could obtain, the appropriate expertise to ensure a thorough investigation relating to the valuation of Osteopathy House and land and also to deal with the implications of FRS 102.

Council noted the potential impact that FRS 102 would have on the GOsC financial statements.

Item 9: Auditor Reappointment

27. The Head of Registration and Resources introduced the item concerning the recommendation of the Audit Committee to reappoint Grant Thornton LLP as external financial auditors for a period of three years.
28. The Audit Committee Chair added that in considering their reappointment at the meeting in July there had been robust scrutiny of Grant Thornton on the draft accounts and issues of timing and presentation. A reappointment of one year had been considered but it had been agreed to reappoint the auditors for a further three years.
29. Members were advised that there had been no consideration given to appointing new auditors due to the process of appointment which had been agreed previously by Council. It was also pointed out that after this current term the auditors would have been working with the GOsC for ten years and, in keeping with good practice, it had been agreed a tender process would be undertaken to appoint new auditors at that time.

Council agreed to reappoint Grant Thornton LLP as external financial auditors for a period of three years.

Item 10: Interim Suspension Order Guidance

30. The Head of Regulation introduced the item which proposed updated and modified guidance which would enable the fitness to practise committees to

make consistent, reasoned and legally sound decisions when determining whether to impose an Interim Suspension Order (ISO).

31. The guidance had undergone review by the Osteopathic Practice Committee and additional comments had also been received from the Fitness to Practise Users Forum and Chairs. Specific comments received from lawyers on the Forum relating to the length of an ISO when brought before the PCC and HC, were set out at paragraph 31 of the draft guidance. The suggested change would align the guidance with the Osteopaths Act 1993 and the GOsC Rules.
32. In discussion the following points were made and responded to:
 - a. In response to a question asking if there had been any interim suspensions that had ended prior to a hearing, members were informed by the Head of Regulation that to her knowledge this had never occurred.
 - b. It was confirmed that the consultation will take place at the same time as the draft guidance on Drafting Determinations as they complement each other. The consultation will last for three months and it is hoped to report back to Council at the November meeting.
 - c. Members raised concerns relating to publication of decisions, how the redaction of information would be managed and the impact of media scrutiny. The Head of Regulation advised that redactions are made in line with the GOsC Fitness to Practise Publication Policy so it maybe necessary to review the policy in light of the new draft guidance. It was added that publishing decisions which included redactions seemed to lead to a willingness of more witnesses coming forward in one case. In relation to media scrutiny of registrants, members were assured that the Regulation Team works with the Policy and Communications team, the press and the Police to ensure responsible reporting of cases.

Council agreed to consult on new draft guidance on imposing interim suspension orders as shown at the annex.

Item 11: Council Member allowances 2016-2020

33. It was noted that the Chair, who is also Chair of the Remuneration and Appointments Committee, would not participate in the decision-making process for this item.
34. The Chief Executive introduced the item which set out a new scheme of Council members' allowances from 1 April 2016 to 31 March 2020 as recommended by the Remuneration and Appointments Committee. He also highlighted the need to articulate the nature of the contract with members and expectations to add value, as shown at paragraph 20 of the report.

35. Members supported the increase in allowances as, with the expected reduction in membership of Council from 14 to 10, the allowance reflected the increased workload for a smaller membership. It was also agreed that the rate compared favourably against that of other regulators.

Council agreed the allowances set out in paragraph 16 for the period 1 April 2016 to 31 March 2020.

Item 12: Corporate Plan 2016-2019 – Initial Scoping

36. The Chief Executive introduced outline content for the 2016-2019 Corporate Plan for Council's consideration. He added that the draft plan built on discussions from the Strategy Day held in April. Members were also asked for their thoughts on how and what should be the measures of effectiveness for the GOsC.
37. In discussion the following comments were made and responded to:
- a. Members endorsed the approach being taken by the Executive and agreed there should be consultation to allow input from stakeholders.
 - b. It was considered that using measurements of effectiveness as set by the PSA did not necessarily lead to a high standard of practice by the profession. Although the PSA approach to measurement was not always helpful it was still necessary to meet the PSA's requirements.
 - c. It was suggested that there was a need to consider how collaboration and co-working impact on objectives and measurement. It was thought the draft plan contained areas that were appropriate for developing the GOsC approach to measurement.
 - d. It was suggested that there should be more guidance for CPD providers but members were advised that the recent consultation showed registrants were against accredited CPD. The new CPD scheme would address aspects of the guidance issue.
 - e. It was asked if it might be possible to mesh the overarching themes to better describe the activities/function.
 - f. It was asked how the GOsC could help the profession and stakeholders build and develop capacity. It was suggested that perhaps the GOsC Corporate Plan could be linked to that of our stakeholders though it was not clear that all stakeholders did produce their own corporate plans. Members were also reminded that it was not for the regulator to lead stakeholders but it could assist them where goals were aligned.
 - g. It was suggested that professional values should be tied into the plan linking professionalism and the key themes, and also making clear that good

regulation is the responsibility of all stakeholders in the osteopathic profession.

38. Council was invited to forward any further thoughts and ideas on the content of the draft Corporate Plan to the Chief Executive who also said there would be an opportunity for further discussion at the October policy committees.

Council noted the draft approach, themes and activities for the Corporate Plan 2016-19.

Item 13: Professional Standards Authority Performance Review 2014-2015

39. The Chair commended the Executive and staff on the outcome of the Performance Review with the GOsC meeting all the standards for good regulation for the fifth successive year.
40. The Chief Executive introduced the findings of the Performance Review, summarising the best practice identified in the report and how the GOsC might approach any new issues identified.
41. The Chief Executive commented that overall the report was good but a number of points had been highlighted by the PSA for scrutiny which would be addressed. He added that what was disappointing was that the identification of best practice had diminished as a role for the PSA, making it difficult to pick up new areas to incorporate into the GOsC's own plans.
42. In discussion the following comments were made and responded to:
- a. Formal and informal complaints: members queried the categorisation of formal and informal complaints. It was explained that legislation says that all complaints should be investigated. The GOsC acts on complaints once there is concrete evidence for an investigation. It was suggested that the issue was terminology and it was agreed that a more appropriate way to define formal/informal complaints should be considered.
 - b. Registration: the Chief Executive clarified how admonishments were published which had been agreed by Council. This was an area of disagreement with the PSA (along with publishing the names of osteopaths removed from the Register on the Register); however the PSA accepted that the GOsC had followed an appropriate process in reaching its decisions in this area.

Council noted the findings of the PSA Performance Review 2014-15.

Item 14: PSA Consultations on revised Performance Review process and Levy

43. The Chief Executive introduced the draft responses to the consultations on the PSA's revised Performance Review process and Levy arrangements. He added that it was important for regulators to have external scrutiny by the PSA.
44. The Chief Executive commented that the new approach to the Performance Review should be less time-consuming and clearer. It was disappointing that there had not been a more fundamental revision but the proposal is a more streamlined approach. He highlighted Q7 which asked:

Q7: Should the response to the question be signed off by the Chief Executive, the Chair of Council, the Chair of the Audit and Risk Committee, or a combination of these individuals?

It was the view of the Executive that Council should engage with the final report to ensure the performance of the Executive and not at an earlier stage.

45. Members noted the rise in the cost of the PSA and wondered if in the eyes of the public, the organisation provided value for money.
46. Members agreed with the robustness and tone of the responses. In relation to Q7 it was asked that if a sensitive or difficult issue did arise prior to the final report would this be brought to Council. Members were advised the question would be discussed by the Chief Executive and the Chair.
47. Members also commented that in reading the consultation it appeared that the focus was on regulatory processes rather than on outcomes. It was also asked whether the Law Commissions' recommendations might herald a more flexible approach. The Chief Executive felt that the two issues were not really connected although it is agreed that what is important for all regulators is consistency of outcome rather than a single uniform approach. There was a debate to be had about the role of regulation and current research is pushing boundaries about the most appropriate model, but the audit approach does not, as yet, fit these ideas.
48. It was noted that there did not appear to be any reference to the Francis Report and there did not seem to be a sense that the Performance Review referenced the need for public involvement. The Chief Executive agreed this point should be added to the response.

Item 15: National Council for Osteopathic Research (NCOR) – Update

49. The Head of Policy and Communications gave an update on the work of NCOR for the year May 2014 to May 2015. She said that the GOsC enjoys a positive working relationship with NCOR and thanked the Director and her team for their

ongoing collaborative work. The Director of NCOR was invited to comment on the report in which she highlighted the following:

- a. The launch of the PREOS (Patient Reported Experiences of Osteopathic Services) project, a data capture facility which enables patients to report on their experiences of osteopathic services.
- b. The launch of the PILARS (Patient Incident Learning and Reporting System) platform, an online system where osteopaths can anonymously report and learn from harmful or potential harmful incidents occurring in practice.
- c. NCOR's recently achieved charitable status and the success to date in fundraising activities include crowd-funding raising £9,300 from the UK and international donors; 70% of funds raised had come from overseas. Additional funds have also been received from the Osteopathic Educational Foundation. The funds will help with the recruitment of a systematic reviewer.
- d. NCOR will be feeding into work being conducted by the World Health Organisation on complementary medicine.

50. In discussion the following points were raised and responded to:

- a. Members agreed that the work conducted by NCOR to date was very good and encouraging for the profession.
- b. Members asked how patients would be made aware of PREOS. It was explained that currently reliance is placed on the practitioners to make patients aware and to complete feedback. It was appreciated there are difficulties but the PREOS system would improve as there were a number of methods to promote the initiative being used; *the osteopath* magazine, leaflets in clinics, and via students and the educational institutions.
- c. What was the rationale for the systematic review of paediatric osteopathic care? It was explained that manual therapies as a whole, as they applied to this area, would be reviewed.
- d. Members were informed that six educational institutions would be assisting in the piloting of PILARS and PROMS (Patient Reported Outcome Measures) and this would assist in supporting CPD.
- e. Although work was going well, members asked what barriers were perceived for the future. The Director suggested the possible closing of schools and loss of income, and making NCOR self-financing in the future raising funds through crowd-funding and other means. As the profession and NCOR were small this presented a challenge but was not insurmountable. The Chief Executive, who is also Chair of the NCOR Board of Trustees, added that funding from osteopaths and patients would take time to establish.

- f. It was suggested that NCOR could take the opportunity to develop products and services to generate an income. It was agreed there were opportunities to be explored around CPD and conferences but there was a lot of competition, and it would also require an investment of time and money.
- g. Members raised a concern about feedback fatigue in relation to PROMs and PREOS and how this might be addressed. It was suggested that linking both reporting systems to CPD would encourage members of the profession to obtain feedback from patients.
- h. Research priorities: it was explained that research priorities would be led by NCOR who would work with the schools and students to take projects forward and that this would not take anything away from the schools as they were integral to NCOR.

Council noted the NCOR report.

Item 16: CPD public consultation update and next steps

- 51. The Head of Policy and Communications introduced the report on the 16-week public consultation on proposals for a revised scheme of continuing professional development for osteopaths, conducted by the GOsC between 9 February and 31 May 2015, and an indication of the next steps.
- 52. Members were informed that the next stage of work would be to publish the feedback from the consultation following analysis by an external consultant.
- 53. Members queried the response rate and whether it was felt to be too low. The Head of Policy and Communications responded that she was happy with the responses received; that it was a matter of quality over quantity. It was also noted that a number of well-attended meetings had taken place around the country and participants had had the opportunity to provide feedback at the meetings.
- 54. Members were pleased with the involvement of the regional groups and hoped that it would continue for future activities. The Chief Executive thanked staff for their support in attending meetings around the country. He added that the response rate was very reasonable compared to consultations by some larger organisations.

Council noted the content of the report.

Item 17: Committee Annual Reports 2014-2015

- 55. The Chief Executive introduced the item in which each committee, Audit, Education and Registration Standards, Osteopathic Practice and Remuneration and Appointments, reported on its work to Council.

56. Audit Committee: the following comments were made by the Chair of the Audit Committee:
- a. Financial and internal audits: both these items had been major areas of work for the Audit Committee during the year. There had been some interesting work undertaken in conducting the internal audits and it was noted there had been some slippage in the work plan. It was also noted that the programme of peer reviews had been a positive step by the Executive bringing expertise into this work from other organisations.
 - b. Risk Register: this has also been a focus of work for the Committee but it was emphasised that it was the responsibility of Council to maintain oversight.
57. The Chair highlighted the opinion of the Audit Committee in paragraph 18 of the report which noted that 'the Executive has a mature approach to financial and non-financial control frameworks and a willingness to adapt to, and to implement and process improvement. Further, Council can take assurance that the controls upon which the organisation relies to manage its risk are suitably designed, consistently applied and proportionate.'
58. Remuneration and Appointments Committee: members were informed that the planning for the new constitution was underway but was currently in the process of being signed-off by the Professional Standards Authority. Individuals had been identified to act as independent members on the interview panel and it was also acknowledged that the recruitment activity would be a major area of work for the GOsC.

Council noted the Annual Reports of the:

- a. Audit Committee**
- b. Education and Registration Standards Committee**
- c. Osteopathic Practice Committee**
- d. Remuneration and Appointments Committee**

Item 18: Welsh Language Scheme Annual Report

59. The Web Manager introduced the item. Under the Welsh Language Act 1993, the GOsC is required to publish an annual report on the implementation and progress of its Welsh Language Scheme. The paper introduced the GOsC's fourth annual report and provided an update on the forthcoming introduction of Welsh Language Standards.
60. It was noted that the timetable for publishing the new standard had been extended and the draft regulations were therefore not expected to be complied with until 2017.

Council noted the 2014-2015 Annual Report on the GOsC Welsh Language Scheme.

Council noted the anticipated changes in Welsh language requirements.

Minutes for Noting

Item 19: Osteopathic Practice Committee (OPC) – Minutes of meeting 18 June 2015

61. The Chair of the Osteopathic Practice Committee made no additional comments.

Council noted the minutes of the Osteopathic Practice Committee

Item 20: Education and Registration Standards Committee – Minutes of meeting 18 June 2015

62. The Chair of the Education and Registration Standards Committee commented that under the present circumstances and in spite of the continuing absence of the Head of Professional Standards, the Professional Standards team is working hard and responding well to the situation. It was noted that Kit Holmes should be commended and thanked for her continuing hard work.

63. It was also noted that Haidar Ramadan had attended the ERSC meeting as an observer and members were again encouraged to attend meetings outside of their own committees.

Council noted the minutes of the Education and Registration Standards Committee.

Any other business

64. There was no other business.

Date of next meeting

65. Date of the next meeting: 10.00 Thursday 12 November 2015.