



Council
12 November 2015
Chief Executive and Registrar's Report

Classification	Public
Purpose	For noting
Issue	A review of activities and performance since the last Council meeting not reported elsewhere on the agenda.
Recommendation	To note the content of the report.
Financial and resourcing implications	None
Equality and diversity implications	None
Communications implications	None
Annexes	A. Progress against the 2015-16 Business Plan B. Financial report C. Risk Register
Author	Tim Walker

Introduction

1. This report gives an account of activities of note that have been undertaken by the Chief Executive and others since the last Council meeting, which are not reported elsewhere on the agenda.

Council reconstitution and appointments

2. Alison White's reappointment as Chair of Council from 1 April 2016 was approved by the Privy Council in September. The remaining Council posts were advertised with a closing date of 21 October. Interviews will be taking place in December and January.
3. The Department of Health (England) has concluded its consultation on the reconstitution of Council. According to DH, a small number of responses were received and were not contentious. It is anticipated that the amendment to the Constitution Order will be made shortly.
4. In addition to the Council appointments, four vacancies on the Investigating Committee and four vacancies on the Professional Conduct/Health Committees have also been advertised. The closing date for applications for these appointments is Wednesday 11 November.
5. A recruitment open day was held on Saturday 12 September in conjunction with the Institute of Osteopathy, which was aimed at helping registrants understand more about the roles and help them overcome any barriers presented by unfamiliar competency-based processes. The event was attended by 24 registrants.

Development projects update

6. Good progress is being made with a number of the development projects for which Council has provided support.
7. The first cohort of 20 osteopaths completed the leadership programme in early October. All those who commenced the programme completed it and the feedback has been very positive; there is evidence of the individuals taking part in a variety of new or extended activity already as a result. An evaluation meeting is due to take place on 11 November and, subject to ODG Board agreement, planning will commence for next year's programme for which there is already considerable interest being expressed.
8. The research phase of the mentoring project has now concluded and a draft report on next steps has been received by the project team. The final report will be circulated when it is available. This report will be used to plan pilot activity in 2017, further details of which will be provided to Council.

9. The research phase of the advanced clinical practice project has also completed. The report on finding is due early in the New Year.
10. There has also been progress in other project areas:
 - a. International cooperation – the website continues to be populated with information and will be launched shortly.
 - b. Evidence – the NCOR Patient Reported Outcome Measures (PROM) tool has completed its pilot, is in use and is due to be launched formally very soon.
 - c. Service standards – discussion are being held with an umbrella group on clinical service standards (the Clinical Services Accreditation Alliance run by the Royal College of Surgeons) to explore how the ODG project might be integrated into wider work.

Australia and New Zealand memorandum of understanding (MoU)

11. Council may recall that in 2010 we signed a joint MoU with the Osteopathic Council of New Zealand and the Osteopathic Board of Australia which enabled the Australasian regulators to develop a competent authority pathway for UK graduates seeking to work in their jurisdictions.
12. Through recent discussions and meetings we have been exploring how to revitalise relationships and are drafting a new MoU covering:
 - a. Information sharing
 - b. Streamlining registration processes
 - c. Sharing best practice.
13. I am particularly keen that we use this new opportunity to explore how to overcome barriers to mutual recognition and make the registration process for Australasian osteopaths more proportionate and cost-effective while ensuring a fair registration process for all.

Professional Standards Authority (PSA) update

14. The PSA concluded its consultation on the fee levy and submitted a proposal to the Privy Council which has now undertaken further consultation. The GOsC levy in 2015-16 (eight months) has now been confirmed as £8,938. The PSA expects to commence consultation on the levy for 2016-17 shortly.
15. The PSA concluded its review of the Performance Review process in September. They have confirmed that they will be proceeding with a new approach, however this will not include a new standard in relation to risk and will use a reduced data set. The PSA has now requested a range of information about our

processes and it is anticipated that data collection will commence before Christmas and the first assessments under the new process will take place in the New Year.

Meeting with NHS England

16. Maurice Cheng, Chief Executive of the Institute of Osteopathy, and I met Suzanne Rastrick the Chief Allied Health Professions Officer of NHS England to discuss how osteopathy could become more integrated into the work of NHS England.
17. The meeting was extremely useful and we have agreed to keep NHS England briefed on a range of matters, including standards development and initiatives such as the PROMs project. Both the IO and the GOsC have now been invited to contribute to a medicines Scoping Project which will consider the potential extension to the osteopathic profession of the prescribing rights available to physiotherapists.

Staffing changes

18. We welcomed to the GOsC Angela Albornoz, Professional Standards Officer (maternity cover), Sophie Hagon, Regulation Officer (temporary) and Lorraine Palmer, Professional Standards Officer (temporary).

Other meetings

19. Recent meetings, calls, visits and speaking engagements by the Chief Executive and others include:
 - QAA contract kick off meeting
 - NCOR Council and Trustees
 - IO awards judging
 - Scottish Osteopathic Society
 - Suzanne Rastrick, Chief Allied Health Professions Officer
 - European School of Osteopathy
 - PSA candour seminar
 - Academy of Physical Medicine CPD broadcast
 - OEI/GOsC meeting
 - Clinical Services Accreditation Alliance
 - Advertising Standards Authority
 - Osteopathic Development Group Board
 - Osteopathic International Alliance conference Montreal
 - Osteopathic Council of New Zealand
 - Osteopathic Board of Australia
 - Patient leaders and professional regulators forum
 - British College of Osteopathic Medicine graduation ceremony
 - Professor Bill Fulford and Professor Steven Tyreman
 - KPMG Regulation Leadership Network

- Society of Osteopaths in Animal Practice strategy day
- Scottish Regulation Conference 2015
- Professional indemnity insurance providers
- Caragh Brosnan, University of Newcastle, Australia.
- Education, continuing fitness to practise, equality and diversity, and performance inter-regulatory group meetings

Progress against the 2014-15 Business Plan

20. Annex A sets out the progress made against the 2015-16 Business Plan at the end of October 2015.
21. As reported at the last Council meeting we have slippage in a number of areas relating to the work of the professional standards team. Our strategy has been to prioritise our statutory functions over policy initiatives or new projects.
22. We have brought back on track the educational quality assurance Annual Reports, CPD auditing, engagement with students in OEIs and the review of guidance on health and disability and student fitness to practise.
23. Projects that will now be delayed include the consultation on a new approach to education quality assurance, a report on patients involvement in osteopathic education, revision to registration assessments and the 'state of CPD' report.
24. As indicated at the last meeting, we have decided not to carry out a further registrant survey in 2015-16.
25. All of the activities that have been delayed or postponed in 2015-16 will be rescheduled as part of the 2016-17 Business Plan.

Financial report

26. Annex B shows the financial position at the end of September (Month 6) of the 2015-16 financial year.

Risk

27. The latest version of the Risk Register is attached at Annex C. A number of minor changes have been made and a major change made in relation to the risk rating around fitness to practise. We are currently experiencing a high volume of complaints relating to advertising (see Item 6 for further details) and, while we have put in place steps to manage these in a proportionate manner, there is the potential for these complaints to disrupt our fitness to practise functions.

Recommendation: to note the report.