



Council
20 November 2019
Acting 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.
Recommendations	To note the contents of the report.
Financial and resourcing implications	None
Equality and diversity implications	None
Communications implications	None
Annexes	A: 2019-20 Business Plan monitoring at end of October 2019 B: Financial report to 30 September 2019 C: Performance Measurement report 2018-19 D: PSA Performance Review – Audit Committee paper
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Introduction

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

Control environment

2. Following the change in leadership at Chief Executive and Registrar level and the resultant change to the size of the Senior Management Team, there have been necessary amendments to the control environment, specifically around payroll and pensions but also in other areas in relation to finance. The financial control environment and protocols have been considered in detail by the Senior Management Team identifying risks arising and mitigating actions from the changes. Proposed changes to the control environment were discussed with the Chair of Council, Chair of Audit Committee and our external financial auditors.
3. The revised control environment was scrutinised by the Remuneration and Appointments Committee and Audit Committee on 24 October 2019.

Professional Standards Authority (PSA)

4. At the July 2019 Council meeting, it was noted that the previous year PSA Performance Review (2017-18) had recently been published and there were actions arising for the Executive to consider. Council wished to receive an update on those actions at its November 2019 meeting. This was also discussed by the Audit Committee at its October 2019 meeting, and that paper is provided as Annex D for members information.
5. The 2019-20 Performance Review assessment against the updated standards and evidence framework will commence in December 2019 and will continue into the early part of 2020. The year under consideration runs from January 2019 to December 2019. PSA has advised that in order to establish a baseline assessment of each regulator against the updated standards and evidence framework, we will have the opportunity to either complete a self-assessment template or undertake a targeted review. Our preferred approach will be the completion of a self-assessment template.
6. The impact is that we will have to provide more information to PSA this year about how we undertake our processes but that in future years, we will not need to repeat this level of detail unless there have been changes to what we do.
7. During the summer all regulators were able to pilot one or more of the updated standards and new evidence framework. We have previously reported to Council that we piloted the new Equality and Diversity standard, and in September 2019, the Senior Management Team met with PSA colleagues to discuss their findings. Based on the pilot, PSA advise that if they had been undertaking a review of our performance against the new standard, they would have required additional

evidence before being satisfied the standard had been met. For example, this additional evidence related to being able to show how an equality impact assessment had influenced a change to policy so showing more clearly, not just that we collected the data, but that we did something with the data.

8. The Executive consider there to be useful learning arising from the pilot exercise, about the impact of what we do and in relation to the way that we collect and analyse data, which will further inform how we approach the 2019-20 self-assessment and our ongoing programme of work.
9. In October 2019, I met with Alan Clamp, PSA Chief Executive, to discuss the PSA levy proposals and to maintain the dialogue and openness between our respective organisations. We discussed a number of matters including the PSA performance review approach and how it might be possible to increase the transparency of the decision-making processes within PSA; our Chair appointment processes, and our views on regulatory reform.
10. I extended an invitation to Alan for him to speak at the Council meeting in May 2020 when we will have a new Chair and new Council members in attendance. Alan was open to this invitation and we are in discussions with his office to ensure the date is held in his diary.

Chairs' and Chief Executives' dinner

11. In September 2019, a dinner was held for Chairs' and Chief Executives' at the Nursing and Midwifery Council. Discussion centred on three main areas: workforce, reform and collaboration. There was broad consensus that the sector can work closely together on several shared interest activities across these three areas and the Chief Executives will continue discussions at their monthly meetings.
12. The next Chairs' and Chief Executives' dinner is to be organised for early 2020.

Regulatory reform

13. Discussions continue between the regulators and the Department of Health and Social Care about the potential for s60 orders that will streamline the fitness to practise processes and governance arrangements across the regulators. However, it is unclear over what timescale the proposals are to move forward particularly now that a General Election has been called.
14. Regarding fitness to practise (FtP) we have emphasised that any steps to modernise our outdated legislation would be welcome, while trying to influence the nature of the precise changes. In this regard, in September, we provided detailed feedback to DHSC on draft instructions for FtP. In relation to governance, the proposals centre on the introduction of a unitary board model (i.e. one on which executives and non-executives serve).

Connecting patients, practitioners and regulators in supporting positive experiences and processes of shared decision making: a progress report

15. We are delighted to report that the Journal of Evaluation in Clinical Practice, a 'high quality international scholarly journal which is concerned with the evaluation and development of clinical practice across medicine, nursing and the allied health professions'¹ has published an article by the GOsC Professional Standards Team.
16. The article details our values work with others including the General Dental Council, the Collaborating Centre for Values Based Practice in Health and Social Care, the University College of Osteopathy and Community Research, practitioners and patients. This work explores the role of the regulator in embedding standards in practice contributing to supporting person centred care and processes of shared decision making and reducing harms. The full article can be read here: <https://onlinelibrary.wiley.com/doi/full/10.1111/jep.13279>
17. On the back of the article, Fiona Browne, Director of Education, Standards and Development has been asked by the University of West London to lecture on a course run by Michael Loughlin. The lecture, which will be delivered to other health professionals, will involve presenting and facilitating discussion on the article which provides an opportunity to focus on our key statutory aims of public protection and the role that osteopaths play in the health environment.

Council of Deans 2020

18. We have been approached by the Council of Deans, a membership association for Pro-Vice Chancellors, Deans and Heads of School in health disciplines across UK universities to attend their annual conference in January 2020. We are currently exploring what our involvement may be at this event.

Quality Assurance Procurement

19. At its meeting on 9 October 2019, the Policy Advisory Committee approved, subject to some minor amendments, the Pre-Qualification Questionnaire, invitation to tender, specification and draft contract and for a notice to be published in the Supplement to the Official Journal to the EU (OJEU). The notice was published in the OJEU on 30 October 2019.

Office for Students

20. We are working with colleagues at the General Optical Council to facilitate a workshop between regulators and the Office for Students (OfS) to help understand how we might all work better and more closely together given our different statutory duties in relation to higher education. It is planned that a pilot workshop between the health regulators and the OfS will take place on 25

¹ See <https://onlinelibrary.wiley.com/page/journal/13652753/homepage/productinformation.html>

November 2019 at the next education inter-regulatory meeting hosted by the NMC.

21. For our sector there is a particular challenge around how the different statutory responsibilities of the OfS and the GOsC interact efficiently and effectively from the perspective of our providers. Some of our providers are being required to undertake additional 'visits', on the face of it, very similar to GOsC RQ visits from the OfS because the GOsC RQ visit is not currently regarded by OfS as equivalent to a higher education review undertaken by the QAA.
22. The impact of this is the considerable additional burden of a visit which mirrors one undertaken by GOsC a couple of years earlier and which is a significant cost for small providers. We are working and supporting those providers directly affected by this matter and we are working closely with the other regulators and OfS to find better ways of working together.

McGivern follow-up research

23. As members will be aware, we commissioned Professor Gerry McGivern to undertake some research on our behalf which was published in 2015: Exploring and explaining the dynamics of osteopathic regulation, professionalism and compliance with standards in practice.
24. This research considered the experience of osteopaths, patients and osteopathic organisations in order to explore the factors that support, encourage or inhibit osteopaths from, practicing in accordance with the OPS. Having secured further funding, Professor McGivern is currently undertaking a follow-up study, involving interviews with former participants and a further questionnaire aimed at all osteopaths.
25. The interviews have now been completed, and the aim is to launch the questionnaire in January 2020. The study will help to explore how osteopaths, and others' opinions have changed since the last study.

Risk Register

26. In June 2019, Audit Committee held a risk management seminar to identify what enhancements it wished to see made to the GOsC Risk Register.
27. A revised structure was presented to Audit Committee at its meeting on 24 October 2019. The revised structure attempts to make it easier for members to engage with the risks; see the movement in the risk rating since the last meeting; to better understand whether the controls which were in place are working and what additional measures might need to be put into effect.
28. Audit Committee provided the Executive with some useful feedback which they will reflect upon such as how to present the risk register to Council to ensure the

greatest level of engagement. The Executive will continue to review the new risk register and will consider what might be presented to Council in January 2020.

Assurance audits

29. At its meeting of June 2019, Audit Committee agreed the scope of two independent assurance audits, one looking at the initial stages of the fitness to practise processes up to and including Investigating Committee decisions, with the second audit being a follow-up review of an IT audit completed in 2017. The results of the audits were presented to Audit Committee in October 2019.
30. For fitness to practise, the audit provided further assurance around the independence of decision-making within our initial stages processes up to the Investigating Committee stage. It is reassuring that no public protection issues were identified. Further information can be found in the quarterly Fitness to Practise Report on the Council agenda.
31. For IT, the follow-up audit demonstrated that significant progress had been made since 2017 in relation to the recommendations from that report. The 2017 audit, completed before the employment of a permanent IT Manager, provided only limited assurance to Audit Committee that processes/procedures were in place and were being monitored efficiently and effectively.
32. The report showed that 21 actions were identified of which 14 were classified as high-level. Since 2017, a programme of corrective actions has been put into place to enhance our IT environment. The follow-up audit has identified seven actions. Only one is classified as high-level and this relates to the provision of audit logs are not currently provided by our CRM software. We are aware of the issue which will help inform our thinking around the long-term suitability of the CRM system.

Institute of Osteopathy convention

33. The Institute of Osteopathy's annual convention took place on 1 and 2 November, with GOsC staff in attendance. On 1 November, Fiona Browne led a session aimed at osteopathic educators, exploring their role in the context of the CPD scheme and the OPS. On 2 November, Fiona Browne and Steven Bettles led a session on 'getting to grips with the CPD scheme'. This included an overview of the scheme, then some workshop-based activities centred around different aspects of the scheme. Staff from the Communications team supported the sessions and maintained a presence on a GOsC stand to talk to delegates, deal with specific queries and promote a range of resources.

Progress against the 2019-20 Business Plan

34. Annex A provides a progress report on the 2019-20 Business Plan at 31 October 2019. At this stage in the year we are reporting that all Business Plan items are on track.

Financial report

35. Annex B provides an update on the financial position at the end of September 2019.

Performance measurement report

36. Annex C provides the annual performance measurement report against a set of measures agreed with Audit Committee and which look across the full range of our business activities. Audit Committee received and noted this report at its meeting on 24 October 2019.

Recommendations: to note the contents of the report.