



Meeting of Council

Minutes of the 124th Meeting of Council held in public on Thursday 18 July 2024 at Osteopathy House 176 Tower Bridge Road, London SE1 3LU and via Go-to-Meeting video conference

Confirmed

Chair: Jo Clift

Present: Gabrielle Anderson (CA) (Online)
Dr Daniel Bailey (Online)
Harry Barton (Chair, Audit Committee)
Elizabeth Elander (Chair, People Committee)
Sandie Ennis
Caroline Guy
Simeon London
Professor Patricia McClure (Chair, Policy & Education Committee)
Laura Turner (CA)

In attendance: Steven Bettles, Head of Policy and education (Item 12)
Fiona Browne, Director of Education, Standards and Development
David Bryan, Head of Fitness to Practise (Item 7)
Dr Stacey Clift, Senior Policy and Research Officer (Items 11) (Online)
Rachel Heatley, Senior Policy and Research Officer (Item 13)
Banye Kanon, Senior Quality Assurance Officer
Sheleen McCormack, Director of Fitness to Practise
Liz Niman, Head of Communication, Engagement and Insight
Darren Pullinger, Head of Resources and Assurance
Matthew Redford, Chief Executive and Registrar
Marcia Scott, Council and Executive Support Officer (Online)
Stacey Towle, Senior Communications Officer

Observer/s Daniel Collis, Vice-President, Institute of Osteopathy (iO)(Online)
Dr Jerry Draper-Rodi, Director, National Council for Osteopathic Research (NCOR) (Online)
Rhys McCarthy, Scrutiny Officer, Professional Standards Authority (PSA) (Online)
Sheena Wynn, Senior Regulation Officer
Fergus Doyle, FtP Case Manager

Item 1: Welcome and apologies

1. The Chair welcomed all to the meeting. Special welcomes were extended to stakeholder observers:
 - Daniel Collis, Vice-President, iO
 - Dr Jerry Draper-Rodi, Director, NCOR
 - Rhys McCarthy, Scrutiny Officer, PSA
2. Apologies were received from:
 - Gill Edelman (Lay Member)
 - Jess Davies (Senior Communications Officer)

Item 2: Questions from Observers

3. There were no questions from observers.

Item 3: Minutes

4. The minutes of the 123rd public meeting, 16 May 2024, were agreed as a correct record subject to the following amendment:

Item 6: Chief Executive's Report – Finance Report: Paragraph 11a:

- a. For the year end 31 March 2024 the income was just under £3m with expenditure, including designated funds, just over the same sum. The GOsC had a net surplus of c.£15k.

Item 4: Matters arising

5. The Chief Executive introduced the report which asked that Council note the work streams which are ongoing:
 - a. The expansion of the pool of Legal Assessors: this work has been delayed as the GOsC was handling in-depth questions arising from the PSA Performance Review Process.

The Executive expect to have concluded this activity by September 2024.
 - b. Social Media Policy: the final compliance check remains an outstanding action. It is expected to have concluded by end July 2024.
 - c. Annual Registration Report: the Executive will reflect on the benefit of producing an annual registration report and present conclusions to Council with the next registration update in November 2024.

- d. North East Surrey College of Technology (NESCOT) RQ: Privy Council are to confirm from the that the qualifications have been renewed (Full-time MOst, BOst; Part-time BOst)
 - e. Duty of Candour: It was confirmed that the Duty of Candour Research Report had been published.
6. In discussion the following points were made and responded to:
- a. It was confirmed that the Duty of Candour report had been published with the headlines being that patients prefer clarity, honesty, openness, transparency and dialogue.

Noted: Council noted the matters arising from the meeting of Council 16 May 2024.

Item 5: Chair's Report

7. The Chair presented her report and update on activities to date. The following points were highlighted:
- a. PSA/Health Regulator Chairs' Roundtable (9 July): the focus for discussions included the NMC Independent Review on Culture, and recruitment of non-executives.
 - b. Introductory meeting with the NMC Chair (16 July): The meeting took place post publication of the NMC Independent Review with some of the issues raised by the report being the main topic of the discussion.

Noted: Council noted the Chair's report.

Item 6: Chief Executive and Registrars Report

8. The Chief Executive introduced the item which presented a review of activities and performance since the last Council meeting and not reported elsewhere on the agenda.
9. The key messages and following points were highlighted:
- a. The Professional Standards Authority published their report into the GOsC's performance for 2023-24. The GOsC had once again passed all Standards of Good Regulation for the fourteenth year demonstrating to the public, patients and stakeholders a robust system of regulation.
 - b. Members of the Executive attended and participated in three regional roadshows organised by the Institute of Osteopathy, with more to follow in 2024 and 2025.
 - c. The GOsC will be stepping back into the international osteopathic arena with plans to attend the Osteopathy Europe (OE) Conference in Luxembourg and

the Osteopathic International Alliance (OIA) Conference in Sydney, Australia. Both events will take place in October 2024 with feedback to Council at its November meeting.

- d. There have been discussions with the People Committee on the implications of the judgement handed down in relation to NMC v Somerville. Decisions for Council will come later in the business year.
- e. The People Committee met in June 2024 and have recommended changes to the payment of reading fees for Professional Conduct Committee members and payment for mandatory online training for new members of the governance structure.

10. In discussion the following points were made and responded to:

- a. Mandatory Online Training and payment: In relation to the recommendation the Chair of the People Committee advised that the relevant online mandatory online training applied to all members of the governance structure (Council, Council Associates, and Committee members – Fitness to Practice, statutory and non-statutory members) - to ensure requisite knowledge was kept up to date.
- b. Clarification on payment: it was agreed that payment of time to complete online training was specifically for those members who were paid day rates.
- c. International matters: the Osteopathic International Alliance (OIA): the online discussions with Australian and New Zealand counterparts covered a number of similar themes being faced by the profession in the UK including:
 - Concerns relating to falling/flatlining student numbers
 - The respective pathways to join competent authorities. A consultation from New Zealand is expected this year and will be shared with the GOsC once launched.

Another meeting is scheduled in September 2024 ahead of the OIA Conference at the end of October 2024.

- d. The Chair commented that the GOsC's current thinking on how to smooth the path for those who might wish to train as osteopaths in the UK and then return to practise in their home countries was a primary reason for the GOsC to become more active in the international forum; to consider this and other issues facing the profession more widely.

Noted: Council noted the content of the report.

Agreed: Council agreed that a reading fee for Professional Conduct Committee members be automatically paid where the total number of pages in the bundle exceeds 750 pages.

Agreed: Council agreed that the mandatory online training modules for members of the governance structure who receive a daily fee be a paid activity amounting to no more than a half-day fee.

Item 7: Assurance Report

11. The Head of Resources and Assurance introduced the item which provided a set of assurance reports to Council on the performance of the organisation.
12. It should be noted these reports had previously been annexed to the Chief Executive and Registrar's Report, however, a new agenda item has been created specifically for assurance reporting.
13. In discussion the following points were made and responded to:

Business Plan and Monitoring

- a. Strategic Priority - Strengthening Trust: It was suggested that the activity at page 6: *Enhance how we develop and use our people (executive and non-executive) so we maximise the talent at our disposal*, might be reworded to better align and be consistent with the priority 'to enhance/improve our relationships with those we work with so together we can help protect patients and the public'.
- b. It was also suggested that the activity could be broadened to include how the GOsC recruit, develop, support and utilise (develop a people strategy). It was noted that this had been an area of discussion at the meeting of the People Committee. It was agreed that the suggestion would be taken on board and wording reviewed.
- c. In response to comments about on the Monitoring Report format it was explained this was reflective of the Business Plan agreed by Council at its meeting in May 2024, in terms of activity, measurable actions, timeline and additional columns representing status. The monitoring colours would change as the business plan progresses through the year.

Further discussion about the Business Plan and measurements of progress against activities would take place at the private session of Council in November.

Financial Report to 30 June 2024

- a. In response to the question as to whether historically a substantial deficit in relation to the income from the registration fees had ever been experienced by the GOsC, it was explained that the income stream had never varied radically to any degree. It was explained that the majority of renewals and fee payments takes place between the months of May to September, with renewal letters being sent slightly earlier than the set renewal date. This

means that the flow of income runs at a slightly different cycle with a variance in the deferred figure.

- b. It was asked if there might be a need to review the budget for IT infrastructure and if necessary review overall budgetary planning. It was explained that budgets would be continuously reviewed throughout the year and if necessary budgets could be reallocated. It was noted that a number of new IT projects had recently started with significant amount of upfront spending and that there might be a need for some reforecasting of the budget. The Audit Committee had been reviewing the approach to different IT projects and the development of a financial and asset framework would further support this work.

Annual Performance Measurement (APM) Report 2023-24

- a. It was explained that the APM review and report were activities established for Council to self-reflect on its performance. It was not something required by the Charity Commission.
- b. It was confirmed the APM report had been reviewed by the Audit Committee. The Chair of the Audit Committee commented that the context was understood but did have some concern that it could divert focus from other areas of importance to Council. To ensure the APM remains useful and relevant it was suggested that this should be considered in November 2024 as part of the Council seminar discussion on performance metrics.

Noted: To note the assurance reports as set out.

Item 8: Understanding Fitness to Practise: Presentation

- 14. The Director of Fitness to Practise gave a presentation on the work of the Regulation team and the Fitness to Practise Committees and processes. A case study was presented by the Head of Fitness to Practise to demonstrate and consider how legislation works in practise.
- 15. The highlights of the presentation covered:
 - a. The Legislation – relating to concerns, self-referrals, allegations, unprofessional conduct, professional incompetence, criminal convictions, impact of health conditions on ability to practise.
 - b. Initial stages procedures - threshold criteria, Screeners and screening decisions
 - c. Investigating Committee – considers whether or not a case to answer, if a case to answer referral to the Professional Conduct Committee
 - d. Professional Conduct Committee – considers whether allegation is well founded (if allegation based on UK criminal conviction no further action), imposes sanctions, imposes conditions, removal from the Register
 - e. Health Committee – considers whether an allegation is well founded, imposes conditions of practice, imposes sanctions, no power to remove from Register.

- f. Professional Standards Authority: Standards of Good Regulation.
- g. The Independent Support Service for patients, witnesses and osteopaths.

Noted: Council welcomed and noted the presentation on the work of the Regulation Team and the Fitness to Practise Committees.

Item 9: Fitness to Practise Report and dataset

16. The key messages of the Fitness to Practise Report and dataset were:

- a. In this reporting period, an increased number of concerns were received (23) in comparison to that of the previous quarter (15).
- b. As of 30 June 2024, 4 of the 18 cases referred by the Investigating Committee (IC) to the Professional Conduct Committee (PCC) had been listed. A breakdown of the cases awaiting hearing can be found in the [quarterly dataset](#).
- c. The PCC considered a restoration application in which it concluded to restore the applicant to the Register of Osteopaths subject to Conditions of practice.
- d. An induction training day was held for the new IC panellists at Osteopathy House on 21 May 2024.
- e. Bespoke remote training has been arranged for all IC, PCC and legal assessors on the European Convention on Human Rights (ECHR) and the Equality Act (including the public sector equality duty) in decision making for 10 and 25 July 2024.

17. In discussion the following points were made and responded to:

- a. It was confirmed that the Dataset median-time would be presented at the next meeting of Council without third-party information.
- b. It was clarified that a registrant going through a fitness to practise process would be able to continue working unless there was a suspension order placed upon them by either the Investigating Committee or Professional Conduct Committee. This happened in only the most serious of cases.

Noted: Council noted the Fitness to Practise report.

Item 10: Annual Report and Accounts 2023-24

18. The Head of Resources and Assurance introduced the item which sought Council's approval for the publication of the Annual Report and Accounts for the financial year 2023-24.

19. The key messages and following points were highlighted:

- a. The annual financial audit was undertaken by Haysmacintyre in May and June 2024.

- b. The Executive developed the Annual Report which details the activity undertaken in the year across the GOsC's four strategic goals, the narrative around the areas of risk and the financial report, which includes the Value Proposition, the articulation of where the regulatory approach adds value.
 - c. The audit ran smoothly for the most part, except for two changes which were brought to attention of the Executive by the auditors quite late in the process.
 - d. No new control points were identified; the three control points from the previous year were resolved in during the year.
 - e. The Audit Committee recommended the Annual Report and Accounts to Council subject to Council noting the reversal of the prior provision in relation to an employment tribunal case that involved the Nursing and Midwifery Council.
 - f. Audit Committee considered information provided by the Executive on whether the GOsC was a going-concern. The Executive and Audit Committee concluded that the GOsC remains a going-concern.
 - g. Council was asked to approve the Letter of Representation to be signed by the Chair alongside the Annual Report and Accounts.
 - h. The Annual Report and Accounts would be laid before both Houses of Parliament by 30 September 2024, there was also a need to submit the accounts to the Charity Commission within nine-months of the GOsC year end.
20. Council had no additional comments or questions and agreed the recommendations as set out.
21. The Head of Resources and Assurance was commended in recognition of the lead and work he had undertaken to complete the financial audit and the Annual Report and Accounts. The Communications Team was also acknowledged for its work on the Annual Report.

Council noted and agreed the following recommendations:

- a. Council noted the Audit Findings Report.**
- b. Council noted the Letter of Representation to be e-signed by the Chair of Council.**
- c. Council agreed to remove the provision from the accounts and replace the provision with a contingent liability.**
- d. Council approved the Annual Report and Accounts for e-signing by the Chair of Council.**

e. Council noted the annual reporting requirements associated with the Charity Commission.

Item 11: CPD Evaluation Survey 2024

22. Dr Stacey Clift, Senior Policy and Research Officer, introduced the item which presented the findings of the CPD Evaluation Survey 2024 exploring the extent to which the intended benefits of the CPD scheme have been realised and what enhancements are required to the CPD guidance as a result of the findings.
23. The key messages and following points were highlighted:
- a. In June 2024, the Policy and Education Committee considered the draft Report of the CPD Evaluation Survey 2024 (in progress) examining the impact of the continuing professional development (CPD) scheme, in terms of extent to which the three¹ strategic objectives of the scheme had been achieved and the benefits realised.
 - This research is innovative for the GOsC as the organisation moves from assessing engagement with the scheme (in previous iterations of the survey) towards assessing impact (or perceived impact) of the scheme in terms of what it sets out to do for osteopaths.
 - Osteopaths had clearly engaged with the CPD scheme and the OPS and in most cases had found it to be beneficial in doing so.
 - Osteopaths engagement with the OPS and in particular, the professionalism theme tends not to focus on professional boundaries and honesty and integrity.
 - The scheme has allowed osteopaths to obtain support from colleagues, which has helped them gain different perspectives on practice, and increased the number of discussions they have had with others about their CPD and practice.
 - For a small proportion of the profession the scheme had been more successful in creating networks, but this has not necessarily translated into a sense of community or lessened ideas of risk of professional isolation.
 - It is clear what a good peer discussion review (PDR) experience looks like, and most osteopaths have experienced that.
 - b. The paper provided an additional equality impact analysis with additional conclusions.

¹ The three strategic objectives of the CPD scheme are: 1) Engage with the CPD scheme and the OPS, 2) Getting support from colleagues as part of the CPD scheme and 3) creating professional networks.

- c. The numbers are too small to make any definitive relationship between protected characteristics and barriers or benefits of the scheme. However, there is an increased proportion of people with specific protected characteristics who obtain more benefits to the scheme than respondents in general. There are also gaps in the evidence base with specific groups where we will undertake further work with them to ensure that they are able to realise the benefits and there are no barriers to doing so. We welcome feedback from Council on these findings and implications.
- d. Council was asked to publish the full CPD Evaluation Report 2024 for stakeholders so that they can see how the GOsC had evaluated the scheme and how this has informed the development of our next steps.
- e. Council was also asked to agree the proposed enhancements to the CPD Guidance informed by this evidence:
 - Strengthening CPD on Boundaries as an important part of the communication and consent requirement
 - Strengthening and encouraging CPD in the area of EDI
 - Reviewing and editing the CPD Guidance, the Peer Discussion Review guidance and associated templates to make them simpler and more accessible.
 - Strengthening the focus on the aims of the CPD scheme including promoting community and encouraging opportunities to actively engage with colleague.
 - Strengthening guidance about 'range of practice' so as to make more explicit that osteopaths must be up to date and competent when they use adjunctive therapies.
 - Making more explicit expectations about how AI could and should not be used in the CPD process.

24. In discussion the following points were made and responded to:

- a. In response to a request for broader definition of the term 'Equality, Diversity, and Inclusion' in the context of the survey it was explained that the aim was to include all nine protected characteristics as part of the study. The potential issues raised concerning language and the difficulties which could be experienced was acknowledged but it was noted language does not currently qualify as a protected characteristic.
- b. It was explained that as the Patient Perception Survey was taking place within a similar timeframe the approach was to conduct the CPD survey with a smaller sample of the register that would provide assurance about representation of the Register and also avoid survey fatigue. It was acknowledged that the timing of the surveys and the presentation of findings were not the ideal but the significant benefits shown as a result of the survey will help with further developments to improve the CPD Scheme.

- c. It was suggested that the Executive could consider the timings of future surveys and how they reach the committees and Council. A research framework to consider the purpose, the intended outcomes of survey activity, the timings for reporting and the decision-making process was suggested for consideration.
 - d. Members supported the proposed enhancements to the guidance. It was suggested that Duty of Candour could be included as part of the enhancements.
 - e. It was suggested that when reporting the findings there should be clarity on the terms sex / gender in compliance with current UK government guidance on terms.
 - f. It was agreed to circulate the Evaluation Report to council for information in advance of publication.
- a. Noted: Council noted the implications from the CPD evaluation survey findings considered by the Policy and Education Committee.**
 - b. Noted: Council considered and provided feedback on the equality analysis and implications for development of the CPD scheme.**
 - c. Agreed: Subject to the CPD Evaluation Report being circulated to Council for information it was agreed to publish the CPD Evaluation Report including the equality impact.**
 - d. Council agreed to update the CPD and associated guidance, for consultation later this year, by:**
 - Strengthening CPD on Boundaries as an important part of the communication and consent requirement**
 - Strengthening and encouraging CPD in the area of EDI**
 - Reviewing and editing the CPD Guidance, the Peer Discussion Review guidance and associated templates to make them simpler and more accessible.**
 - Strengthening the focus on the aims of the CPD scheme including promoting community and encouraging opportunities to actively engage with colleagues.**
 - Strengthening guidance about 'range of practice' so as to make more explicit that osteopaths must be up to date and competent when they use adjunctive therapies.**

- **Making more explicit expectations about how AI could and should not be used in the CPD process.**

Item 12: Student Health and Disability Guidance - Consultation

25. The Head of Policy introduced the item which asked Council to consider the publication of draft guidance for consultation:

- Guidance for Applicants and Students with a Disability or Health Condition
- Students with a Disability or Health Condition – Guidance for Osteopathic Educational Institutions
- Easy read guidance

26. The key messages and following points were highlighted:

- a. The GOsC has existing Health and Disability Guidance which had been updated following feedback from students and educators and from an EDI consultant in 2023.
- b. A further focus group with osteopathic students was held in February 2024 and feedback incorporated into the Guidance.
- c. The updated Guidance had been considered at the Policy and Education Committee. Council was asked to agree the publication of the Health and Disability Guidance for consultation in accordance with the Consultation Strategy.
- d. Easy Read versions of each draft guidance document had been commissioned and would also be consulted on.

27. In discussion the following points were made and responded to:

- a. In response to the suggestion of more web-based information members were advised that there needed to be more consideration about how to present and make more accessible following feedback from students.
- b. It was suggested that the IASCO online training function used for short in-house training modules might be a useful tool to consider.
- c. It was confirmed that the cost converting documents to Easy Read versions of the guidance were correct. The first draft of the guidance would be the consultation document with up to three subsequent modifications included in the Easy Read costing.
- d. It was added that the Easy Read versions would not replace the current guidance but would be an additional tool.

Agreed: Council agreed to proceed with the consultation as set out in the consultation strategy and consultation document.

Item 13: Patient Partner Programme

28. Rachel Heatley, Senior Policy Officer introduced the item which provided an overview of the Patient Partners programme including the success criteria and evaluation plans. Council was asked to agree the length of the pilot (one-year or two-years), the selection panel recruitment and appointment process.

29. The key messages and following points were highlighted:

- a. In November 2023, Council agreed to pilot the Patient Partners programme, an initiative to recruit and appoint two patients to Council to act as independent 'critical friends' participating in discussions but without voting rights.
- b. Patient Partners must have lived experience of osteopathic care and will support GOsC in undertaking its statutory duty rather than representing a personal healthcare condition or interest.
- c. The programme is a key aspiration of the GOsC's patient engagement strategy, to create a model of co-production involving patients in decision making in the same way as is done with osteopaths. Both osteopaths and patients are our beneficiaries under the Osteopaths Act 1993.
- d. Council was asked to agree the length of the pilot (one or two years), the date of appointment for Autumn 2025 and the selection panel to enable progression of the patient partner pilot.
- e. In order to support Council to make its decisions, further detail was provided on the purpose of and background to the patient partner programme, the qualities being looked for in the Patient Partners, the success criteria, and how it was intended to evaluate the pilot.

30. In discussion the following points were made and responded to:

- a. It was explained that the timeline for the Patient Partner role included the development of the recruitment pack, advertising, the recruitment exercise and the completion of the process with an appointment to the pilot scheme in Autumn 2025.
- b. Members commented on how, in light of the Registrant and Stakeholder Perceptions survey, this programme would be received. It was suggested that the plan for Patient Partners plans mirrors what has now been established through the Council Associate programme and the way in which the new programme, in terms of the registrant / stakeholder perceptions, would be dependent on how the programme is conveyed.
- c. Members commented that the clarification of the role is important; is it an advocacy role, how is the role being defined?

d. Members considered the time-period for the pilot of the scheme putting forward a number of suggestions:

- A one-year was the appropriate period for a pilot scheme, a two-year appointment gave an impression of permanency rather than a pilot.
- A one-year appointment would focus attention on the outcomes of the pilot scheme.
- It was suggested there was not enough value gained from one-year appointment. With meetings of Council only taking place 4-5 per-year data collected after one-year of the scheme would not be robust enough for an informed analysis and decisions on the outcomes and next steps.
- It was noted that the initial appointment for the Council Associate scheme had been for one-year but it was also noted that Associates were osteopaths and had a significant interest in participating as members of the Governance Structure. A patient representative might not have that same interest. A two-year pilot would provide the evidence of how the scheme was working.
- It was suggested that a one-year pilot with a review after 12-months was suggested as an option. It was noted that the type of applicant for the role would be someone who is passionate in ensuring the patient voice is heard.

e. A number of suggestions were put forward on the complement and membership of the recruitment panel. This would be followed up in due course. The suggestions included extending an invitation to a member from the Patient Forum, the inclusion of the Chair of Council, and the inclusion of Gill Edelman, a lay member of Council.

Agreed: Council agreed Option B: a two-year pilot of the Patient Partner Programme with a break clause of 12 months.

Agreed: Council agreed the selection panel and to ask the selection panel following a successful recruitment process to recommend appointment of two Patient Partners for agreement by Council.

Item 14: Equity, Diversity, Inclusion and Belonging Framework 2024-30 (including Annual Report)

31. The Chief Executive introduced the item which presented the Annual Report on the work undertaken on equality and diversity in the year 2023-24 and set out the draft Equity, Diversity, Inclusion and Belonging Framework, 2024-30.

32. The key messages and following points were highlighted:

- a. Council receives an annual Equality, Diversity and Inclusion (EDI) report. Headlines from the report include:
 - The Professional Standards Authority recognising, in its performance review report, that the GOsC had demonstrated good practice in taking

action to secure external input into its policy work and the clear EDI focus of the standards required for registrants, students and Osteopathic Educational Institutions.

- The positive promotion of awareness of equality, diversity and inclusion through the organisations social media and, for the first time, attendance at Pride in London.
 - That the GOsC's recruitment for non-executive positions has yielded the most diverse set of applicants ever received across a range of protected characteristics.
 - Compliance with new Welsh Language Standards which required a significant volume of work.
- b. In 2021 the GOsC developed its first Equality, Diversity and Inclusion Framework ending in July 2024, the draft Equity, Diversity, Inclusion and Belonging Framework is the next iteration for agreement by Council.
- c. The Framework describes the GOsC's current baseline position and articulates where the organisation would like to be by 2030 alongside proportionate actions to be taken over the next 12-24 months.
- d. Highlighted the Draft Equity, Diversity, Inclusion and Belonging Framework, 2024-30

33. In discussion the following points were made and responded to:

- a. Members liked the idea of the 'Belonging' content and the expansion of the framework to include the concept. It demonstrated the integrity, inclusivity and the concept of trust within the organisation.
- b. It was confirmed a public document which sets out legal duties as well as ambitions for where the organisation wants to be in the future.
- c. The typographic and grammatical errors which had been highlighted would be corrected and checked for consistency. GOsC documents across the organisation would also be checked to ensure they are consistent with and reflect the new EDIB framework .
- d. It was agreed that the structure of the document would be reviewed and would be circulated to Council for final consideration and approval before publication.

Noted: Council considered and noted the Equality, Diversity and Inclusion Annual Report 2023-24.

Agreed: Council agreed the Equity, Diversity, Inclusion and Belonging Framework 2024-30 subject to a final review.

Item 15: Annual Report to the Welsh Language Commissioner

34. The Chief Executive introduced the item on behalf of the Senior Communications Officer presenting the GOsC Annual Report to the Welsh Commissioner for 2023-24.

Under the Welsh Language Standards (No.8) Regulations 2022, the General Osteopathic Council is required to publish an annual report to the Welsh Language Commissioner on the ways in which it has complied with the Welsh Language Standards.

35. The key messages and following points were highlighted:

- a. In December 2023, the GOsC implemented the new Welsh Language Standards in accordance with the compliance notice received from the Welsh Language Commissioner in June 2023.
- b. The GOsC is expected to implement standard 20 (the provision of an online registration process available to registrants in Welsh) by 6 December 2024.
- c. The reporting period for the GOsC's first Annual Report to the Welsh Language Commissioner under the Welsh Language Standards covers the period 6 December 2023 – 31 March 2024.
- d. As of 31 March 2024, there were 163 osteopaths living and/or practising in Wales, and 43 students studying and/or living in Wales.
- e. As part of the GOsC's compliance activities, approximately 140,000 words were translated across an estimated 60 documents and forms, as well as expanding the Cymraeg section of the GOsC website to provide more information about the organisation and its work in Welsh.

36. In discussion the following points were made and responded to:

- a. It was explained that 'not desirable' as shown in the table at page 9 of the report related to new or vacant positions that required Welsh language skills. The duty did not include Governance roles.

Noted: Council considered and noted the first Annual Report to the Welsh Language Commissioner.

Agreed: Council agreed that the report be published on the GOsC's public website.

Item 16: Committee Annual Reports

37. Each Committee is required to report annually on its work to Council. Council was requested to note the Annual Reports of the Policy and Education Committee, the People Committee and the Audit Committee.

38. It was confirmed that each of the GOSC's Committees Annual Reports are published.
39. Council had no questions or comments relating to the Annual Reports of the GOSC's committees.

Noted: Council considered and noted the Annual Reports of the Policy & Education, the People, and the Audit Committees.

Item 17: Unconfirmed Minutes of the Policy & Education Committee (PEC): June 2024

40. There were no comments or questions relating to the unconfirmed minutes from the meeting of the PEC.

Noted: Council noted the unconfirmed minutes of the Policy & Education Committee.

Item 18: Any other business

41. Institute of Osteopathy: The process to recruit a new Chief Executive to succeed Maurice Cheng who will be leaving the role at the end of May 2025. Members were asked to raise awareness about the vacancy and role via their professional networks.

Item 19: Questions from observers

42. National Council for Osteopathy Research: In reference to the CPD Scheme the meeting was informed that the Health & Care Act 2022, which encompasses regulated healthcare professionals, had set requirements relating to CPD and mandatory training for autism. It was unclear how much this might impact on osteopathy as the focus for the requirement was on providers who are registered with the Care Quality Commission (CQC) but the Executive agreed to reflect on the comment.

Date of the next meeting: Wednesday 20 November 2024 at (10.00)