



Meeting of Council

Minutes of the 126th Meeting of Council held in public on Thursday 6 February 2025 at Osteopathy House 176 Tower Bridge Road, London SE1 3LU and via Go-to-Meeting video conference.

Confirmed

Chair: Jo Clift

Present: Dr Daniel Bailey
Harry Barton (Chair, Audit Committee)
Elizabeth Elander (Chair, People Committee)
Sandie Ennis
Simeon London
Professor Patricia McClure (Chair, Policy and Education Committee)
Laura Turner (Council Associate)
Gabrielle Anderson (Council Associate)
Caroline Guy
Gill Edelman
Dr Christopher Stockport

In attendance: Fiona Browne, Director of Education, Standards and Development
Steven Bettles, Head of Policy and Education (online)
David Bryan, Head of Fitness to Practise (Item 8)
Lorna Coe, Governance Manager
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 [**Matthew Redford left the room 1509 returned 1511.**]
Nerissa Allen, Executive Assistant (Online)
Tim Langman, Perspective Wealth Management (Item 9)
Ria Corrigan, Senior Digital Communication Officer (Item 13)

Observer/s Dr Jerry Draper-Rodi, Director, National Council for Osteopathic Research (NCOR) (Online)
Maurice Cheng, Institute of Osteopathy (in person)
Professor Debra Towse (new Wales Lay Member from April 2025) (in person)
Angela Stevenson, Osteopath (in person)
Arwel Roberts (Council Associate from April 2025)
Lesley Pitts (Donald) Osteopath [**left 1325**]

Karen Smith, Osteopath
Ben Katz, Osteopath (in person)

Item 1: Welcome and apologies

1. The Chair welcomed all to the meeting. Special welcomes were extended to:
 - a. Professor Debra Towse who will join Council on 1 April 2025 as the new Lay Council member from Wales.
 - b. Online and external observers.
2. Stakeholder observers:
 - a. Dr Jerry Draper-Rodi, Director, NCOR
 - b. Maurice Cheng, Chief Executive, Institute of Osteopathy (iO).
3. Apologies were received from:
 - a. Elizabeth Elander
4. Special thanks were extended to:
 - a. Simeon London and Elizabeth Elander whose last meeting it was and sincere thanks were extended to them both for their support and work on Council.
 - b. Laura Turner, Council Associate whose last meeting it was and thanked her for all her contribution to Council.
 - c. Chris Stockport who would also be finishing his tenure today. Having moved location, he no longer meets the criteria for Welsh Lay Member. The Chair thanked Chris for his contribution.
 - d. Marcia Scott, Council and Executive Support Officer/EA to the Chief Executive and Registrar who would retire at the end of February. The Chair extended the Council's thanks to Marcia for everything she had done for Council and GOsC and noted how missed she would be.

Item 2: Questions from Observers

5. Maurice Cheng Chief Executive of the iO stated he was pleased to see Items 10 (Business Plan/Budget relating to the community's perception of GOsC) and 11 (Amendment to Section 32(1)) but that he wanted to urge a broadening of the brief in relation to both to assist in rebuilding the trust and respect of the osteopathy community in their regulator (GOsC).

6. The iO wanted Council to consider going further than only osteopathic techniques and consider adding the word osteopathic to ensure protection of title in more situations.

In addition, the Chief Executive of the iO asked Council to consider further emphasis in the Business plan to focus on GOsC's reputation amongst its community arising from the perception survey which had highlighted some concerns in relation to the community's belief in its regulator.

7. There were no questions from online observers.

Item 3: Minutes

8. The minutes of the 125th public meeting, 20 November 2024, were agreed as an accurate record of the meeting.

Agreed: Council agreed the minutes of the 125th public meeting 20 November 2025.

Item 4: Matters arising

9. The Chief Executive introduced the report which asked that Council note the workstreams completed.

Noted: Council noted the matters arising from the meeting of Council 20 November 2024.

Item 5: Chair's Report

10. The Chair introduced the report and added some verbal updates.

11. The key points were:

- a. Chris Stockport the Welsh Lay Council member was leaving Council as due to a change of job and location he no longer met the criteria for a Welsh Member. When recruiting the Welsh lay member, the panel had other appointable candidates and had made a recommendation to the PSA and Privy Council that Professor Debra Towse be appointed. This had been agreed, effective from 1 April 2025.
- b. Two lay and two Osteopathic members of the Policy and Education Committee had been appointed.
- c. Interviews for two new registrant members to Council in November did not prove successful and the recruitment process would re-run early in 2025. This meant Council would have two registrant Council vacancies for a few months, as Simeon London and Liz Elander would finishing their second terms at the end of March 2025.

- d. Progress had been made with the Patient Partner programme recruitment and more information would follow.
- e. The Chair advised she had attended the London roadshow in November and the subsequent awards event.
- f. The Chief Executive and Registrar and Chair held a bilateral with the iO CEO (Maurice Cheng) and the new President (Dan Collis) and would hold similar meetings three times a year.
- g. The Chair and the Chief Executive and Registrar attended the Marx Memorial Lecture and the GMC's education conference and were both asked by the GMC Chief Executive to share the learnings on patient partner involvement from a governance perspective.
- h. The Chair advised she would attend the OE conference in March.
- i. The process of appointing a company to run the Board Effectiveness Review was underway. The review would commence in April and is expected to conclude in July 2025.

The following points were added by the Chair at the meeting:

- a. The success of the Board Effectiveness Review will rely on the engagement Council members, Council associates and the executive.
- b. In terms of stakeholder events, the HCPC had asked Chairs from health regulators to take part in a meeting regarding consent and patient safety with a view to releasing a good practice statement shared by those regulators.

Noted: Council noted the Chair's report.

Item 6: Chief Executive and Registrars Report

- 12. The Chief Executive introduced the item which presented a review of activities and performance since the last Council meeting that was not reported elsewhere on the agenda.
- 13. The following points were highlighted and expanded upon by the Chief Executive and Director of Education, Standards and Development:
 - a. Chief Executive and Registrar had been invited to chair a session at the Professional Standards Authority and Patient and Client Council event in Northern Ireland on *'Improving workplace culture in health and social care by listening and involving all healthcare professionals, staff the public'*. This meeting was rescheduled due to bad weather.

- b. GOsC had arranged to meet with osteopaths in Northern Ireland and invited colleagues from the Institute of Osteopathy and National Council for Osteopathic Research to attend also and this would be rescheduled in line with the PSA event in March.
- c. There had been a lot of collaboration with regulatory partners
- d. GOsC had continued to respond to the DJS registrants' perception survey and were reflecting on the 'tone of voice' across all communications.

In relation to the point raised by the Chief Executive of iO at the start of the meeting the Chief Executive reassured him that there was a focus on responding to the DJS findings across all that GOsC does.

In addition, there had been work undertaken with Susan Biggar in Australia around kindness in regulation which formed part of the work being done in response to the perception survey. Materials had been shared and there was a further commitment to continue the conversation from both the FtP and Education and Standards teams.

- e. The Director of Education, Standards and Development advised that Paul Stern, who had been working with other regulators regarding AI, was invited to present at the Council of Deans on AI in Regulation alongside Jamie Hunt Head of Education in Health and Care Professions Council. Paul's presentation showed how osteopathy was leading in thinking in some of those areas particularly in terms of regulation. Congratulations were offered to Paul for the success of this noting he had some really passionate questions which he had responded well to particularly in relation to patient use and expectations.
- f. A number of engagement meetings with colleagues across the healthcare sector to inform the work of GOsC and thinking had been held, including the General Medical Council Marx Memorial Lecture and Education Conference. There was also work regarding patient partnership, including with Henrietta Hughes, the first Patient Safety Commissioner for England.
- g. There had been a considerable amount of non-executive recruitment. There was a need to re-run the campaign to find two new osteopath members of Council as the 2024 campaign was unsuccessful.
- h. Council was requested to agree that Andrew Harvey, Chair of the Professional Conduct Committee, also continued as Chair of the Health Committee from 1 April 2025 to 31 March 2029.
- i. Council was requested to agree the appointment of lay and osteopath members to the Policy and Education Committee from 1 April 2025 to 31 March 2028 and 2029 as set out in the email dated 30/01/2025.

Lay members:

Jayne Walters 4 years from 1 April 2025 to 31 March 2029

Kate Kettle 3 years from 1 April 2025 to 31 March 2028

Osteopath members:

Patrick Gauthier 4 years from 1 April 2025 to 31 March 2029

Andrew Macmillan 3 years from 1 April 2025 to 31 March 2028

Council Associate:

Arwel Roberts, 2 years from 1 April 2025 to 31 March 2027

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

- a. It was highlighted that all the osteopath members of PEC were trained at the same school which raised a question of external perception in relation to fairness.

The Chief Executive noted that the size of the profession made these situations hard to avoid but assured Council that any conflict of interest would be managed in meetings accordingly.

- b. Council asked the Chief Executive if there were any identifiable reasons for the lack of success in the campaign for osteopathic members of Council.

The Chief Executive advised that applicants had not performed well enough at interview. However, an on-line webinar had been arranged for the following week to talk about what it meant to be a Council member and set out what the purpose of GOsC was and 20 registrants were signed up with at least 4 from Scotland.

Sandie Ennis, who had sat on the panel –raised the question as to whether the GOsC role was fully understood, given the responses from candidates at interview

The Chief Executive advised it had been agreed by People Committee that in this round of recruitment, the successful candidates would be sent the general topics that the questions would cover, in advance of the interview so they had awareness of the general areas of questioning.

- c. Council discussed the fact there had been challenges with recruitment of Registrant osteopaths historically and it was suggested that providing osteopaths who were 65/70% suitable with a short period of support and regarding e.g. governance and strategic thinking could be a solution.

The Chief Executive agreed that support for new Council members would be important but that it was not a profession specific issue and the PSA would be clear that any such approach would need to be consistent for lay and osteopath members.

- d. Council noted it was positive to see the actions in response to the DJS perception survey. They noted that adding stats to show the uptake on the new communication channels (and using them to create KPIs in the Business Plan) would help Council understand what success looks like in terms of making progress with building trust and confidence in the regulator.

The Head of Communication confirmed that the team would take that on board and would share stats where possible with the proviso that changing minds/perceptions was a longer process.

- e. It was confirmed that the CEN document referenced in paragraph 31 regarding Osteopathy Europe, was the European standard that GOsC had previously helped create.

Noted: Council noted the content of the report.

Agreed: Council agreed to the appointment of the PEC appointments:

PEC Lay members:

Jayne Walters 4 years from 1 April 2025 to 31 March 2029

Kate Kettle 3 years from 1 April 2025 to 31 March 2028

PEC Osteopath members:

Patrick Gauthier 4 years from 1 April 2025 to 31 March 2029

Andrew Macmillan 3 years from 1 April 2025 to 31 March 2028

Council Associate:

Arwel Roberts, 2 years from 1 April 2025 to 31 March 2027

Agreed: Council agreed that Andrew Harvey continue as Chair of the Health Committee from 1 April 2025 to 31 March 2029.

Item 7: Assurance Report

15. The Chief Executive (Annex A) and the Head of Resources and Assurance (Annex B) introduced the item which provided a set of assurance reports to Council on the performance of the organisation.

16. In discussion the following points were made and responded to in relation to the **Business Plan and Monitoring (Annex A)**:

- a. The Chief Executive noted that the detailed reports were in the annexes. There would be a new 'dashboard' approach as requested by Council which was in development. This would be considered by Audit Committee before being presented to Council.

Council commented that whilst the helicopter view of the Business plan was helpful members would still want to have the option to drill down into the detail. Members were reassured that the detail would still be available if needed.

- b. The Chair summarised it would be helpful for Council to have a set of medium level KPIs to help measure progress against GOsC strategy and assess whether the organisation was reaching the agreed targets and outcomes.
- c. Council requested an update on the timeline for the theory of change workstream, and clarification that it would assist with some measures that could be used to check progress against delivery of desired outcomes.

The Director of Education, Standards and Development advised that internal staff workshops would start June 2025 and would be reported at Council July or September Council meetings for further conversation.

- d. Council noted the CRM project was amber in the Business Plan and requested an update.

The Chief Executive assured Council the project was progressing with no additional costs due to delays and confirmed that the configuration work was 95% complete. The delay related to the integration of the new CRM system with Ozone and the website but it was underway with an anticipated completion date of March 2025.

17. Financial Report to 31 December 2024 (Annex B)

18. Key messages from the report were:

- a. Registration fees were on track to meet budgeted expectations.
- b. Expenditure was around £2.33m and was £166k over budget for the nine-month period.
- c. The Balance Sheet was in a strong position.
- d. Cash at bank was around £105k lower than at year end; however, it was expected that the cash position would return to a similar level to the March 2024 position by the end of the financial year.

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

- a. The Head of Resources and Assurance advised Council that he had added percentages into the variances as requested at the previous Council meeting.

- b. Council commented that there was a negative variance between actual costs and budget in the third quarter for Fitness to Practice and requested reassurance that this view was not overly optimistic noting that the gap could widen in the final quarter.

The Head of Resources and Assurance advised he was not aware of anything that would widen that gap and explained the usual approach was to take three quarters of the year's actual budget and then add on whatever was left of that to get the forecast amount. However, if it was known that more work had been done on a particular area at the start of the year, then the approach was to phase it. In either case, the spend was monitored month by month.

Noted: Council note the assurance reports as set out in Annex A and Annex B.

Item 8: Fitness to Practise Report and Dataset:

- 20. The Director of Fitness to Practice introduced the report and explained, for new members, that her team produced stats around Fitness to Practice and activities that were undertaken in regulation and the detailed dataset covered the previous quarter (October to end of December).
- 21. The key messages from the report were:
 - a. In the reporting period, there was a decrease in the number of concerns received (13) in comparison to the previous quarter (16).
 - b. As of 31 December 2024, 3 of the 18 cases referred by the Investigating Committee (IC) to the Professional Conduct Committee (PCC) were listed. A breakdown of the cases awaiting hearing was in the quarterly dataset at Annex A.
 - c. In that quarter three cases were concluded, consisting of one PCC substantive hearing and two rule 8 meetings (consensual disposal). A further two cases went part heard.
 - d. Training had been scheduled for all committee members and legal assessors within the current quarter.
 - e. GOsC had published the annual Fitness to Practise report.
- 22. The Director of Fitness to Practice highlighted the age of the cases and pointed out that was mostly related to the continuing burden of third-party investigations (which ran concurrently with Fitness to Practice investigations) either run by the police, the CPS (where they had decided to charge a registrant and the matter was proceeding to a court case), or those smaller cases where it involved an investigation by the NHS that had not been disclosed to GOsC.

Around 47% of cases at Investigating Committee stage were third party. Those at Professional Conduct Committee stage were around 40%. The data showed there had been a jump in cases over the 52-week target for the end-to-end KPI (from when received the case to when concluded). As a regulator GOsC cannot be seen to prejudice a police investigation so a case could not progress until police had concluded or there had been an outcome in a court case.

23. The Head of Fitness to Practice made the following points in relation to the Fitness to Practice report and datasets:

- a. The number of cases made formal at the screener stage was lower because the majority of the cases received in that reporting period were towards the end of that quarter so hadn't been formalised in that time. It was expected they would be by the next reporting period and that KPI had in fact been well exceeded.
- b. At Investigating Committee Stage, 9 cases were considered in that period and the number of third-party cases as of 6 February had increased to 56%.
- c. At the Professional Conduct Committee stage a breakdown of cases awaiting hearing was provided on p5. The committee were awaiting the listing questionnaires which helped the team schedule the hearings.
- d. The sharp rise in the longevity of cases that was due to the number of third-party cases highlighted and the team were keeping a careful eye on that.
- e. The number of 'breach of title' cases (where an individual who was not registered with GOsC but was practicing and was potentially breaching the title Osteopath) had reduced in that quarter.

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

- a. Council asked if the rise in the number of third-party cases suggested that GOsC were receiving a higher number of more serious complaints about osteopaths than it had previously.

The Director of Fitness to Practice concurred there had been a consistent rise in sexual boundaries cases however commented that whilst these cases had come into sharper focus there had always been concerns about sexual boundaries and consent.

The aftershock of the pandemic meant that the police, court system and NHS were overloaded and cases were proceeding more slowly which was a recurring theme. The impact was that GOsC had to wait until these cases were concluded.

- b. The Head of Fitness to Practice was asked if there were any other factors they considered contributed to a rise in the number of these cases and they advised that the Me-Too Movement had been alluded to in some cases and appeared was underpinning the number of referrals to police.

Some patients were referred to the police before any referral GOsC

- c. Council asked whether the KPI for the age of cases would be met if the timeline was assessed from the point at which the third-party investigation was concluded and the GOsC process began.

The Director of Fitness to Practice noted that the team had not looked at that before most likely because the PSA did not require it but concurred that it would provide useful information to Council about the effectiveness of case progression.

Noted: Council welcomed and noted the reports.

Item 9: Investment and Reserves annual review

25. The Chair welcomed the guest Tim Langman from GOsC's Financial advisers and asked the Head of Resources and Assurance to introduce the item.

26. Key messages from the paper:

- a. It was considered good practice to hold reserves for unforeseen events and to invest excess funds in order to maximise assets. It was also good practice to review both reserves and investments on an annual basis, which Council would usually do at its February meeting.
- b. Council had previously agreed a target reserves range of £350k-£700k, which was based on its assessment of risk and the possible financial impact. At the year ended 31 March 2024, funds held were above the target reserves range (£839k).
- c. The investment portfolio was relatively stable at the time of reporting, having gained £61k (4.81%) in the year to date since March 2024. The market volatility during the period of the covid pandemic had calmed.
- d. The most up to date investment valuation was £1.33m, as of 31 December 2024.

27. Tim Langman from Perspective Financial Group (advisors to Council and who deal with the fund managers on behalf of GOsC) was present at Council to report on the performance of the portfolio.

He advised that the fund had performed well the previous year at 8.97% against the benchmark of 8.9%. A potential change was strong returns across all asset classes: US up 24%; Japan 18%; global 15%; UK 9% and Europe 7%.

GOsC has a mixed portfolio probably around 65% equity, 35% bonds and cash. The bonds brought down performance (bonds performance was about 2/2.5% compared to property which was around 30%) but added in the cautious approach that GOsC had wanted i.e. moderate risk.

The Environmental Social and Governance checklist for the investment risk was used with a score of 75% which represented moderate risk.

28. Future options were discussed. 2025 had started volatile with Donald Trump, tariffs, debate on whether the UK would go back to Europe or USA regarding trade agreements. European and UK banks had cut interest rates to stimulate growth in markets. The view was that 2025 would not be as strong as the previous year but should still be a positive performance.
29. The Advisors had suggested to GOsC that it could potentially look at different fund managers noting that the current firm charges were relatively high annually at 1.85% meaning that GOsC would want to get a pretty positive performance each year to make sure the portfolio moved forward. It was suggested that GOsC could probably achieve the same if not better performance with a lower charged discretion fund manager.
30. Overall, it was noted that it had been a positive year. At the end of December, the fund was at £1.330m and as of yesterday it was £1.354.
31. In discussion the following points were made and responded to:
 - a. Council requested to clarify the recommendation that the investment should be via a fund route rather than a segregated portfolio.

Tim Langman explained that it was about liquidity i.e. if needed to get money out quickly it would be possible to exit in 7-10 days. The majority of the portfolio was funds where the investor would try and track different asset classes and markets via those funds e.g. a US tracker fund. A segregated portfolio would probably consist of more direct equities.

It was the advisors' suggestion that GOsC continue with its current approach which was balanced and spread the risk.

The Chief Executive clarified that these key principles were designed and agreed by Council when it first set out the investment strategy in 2009. The fund route was considered lower risk rather than GOsC choosing where to invest.

- b. Council asked what it meant in paragraph 21 where it said 'in terms of business development process' whether it was the investment strategy or the choice of funds. The Head of Resources and Assurance advised that he would look into that and respond.
- c. Council was pleased that GOsC was looking at investments through the lens of ESG and wanted to clarify if the score meant there was clarity over 75.96% of the portfolio or if it meant that 75.96% of the portfolio was good from an ESG perspective.

Tim Langman confirmed it meant that 75.96% of the portfolio was good.

- d. In discussing agreement to the Executive taking decisions on alternative investment managers Council asked for assurance that full due diligence would be carried out in a similar way to when the previous decision had been made. The Chief Executive confirmed it would be done by the financial advisors.
- e. Council also asked why the Executive wanted this delegated and whether it was a one-off request or ongoing.

The Chief Executive explained that it would be a one off. The Executive was trying to free up Council time and to enable the Executive to move forward with activities however if Council needed more information to make a decision, then the Chief Executive would be happy to provide this.

- f. Council clarified if it was being asked to reconfirm the target reserve range as £350k - £700K.

The Head of Resources and Assurance confirmed that this was not being asked, it was a statement of what was in the accounting policy. Discussion followed regarding changing it to stating 'x percent' or 'x number of months salaries' like some other regulators but any such change would go through Audit Committee and at that stage Council were only being asked to note at the position.

Considered: Council considered the reserves position.

Agreed: Council agreed a new £100k reserve of innovation projects having established there would be Council oversight on any spend within this.

Considered: Council considered the GOsC investment position.

Agreed subject to: Council agreed that the Audit Committee should consider the recommendation to move to Cambridge with more information provided to them before it made a recommendation to Council in May.

Meeting broke for comfort break 1355-1416

Item 10: Business Plan and Budget 2025-2026

32. The Chief Executive introduced the business plan and explained the format was the same as the previous year i.e. a smaller and more focussed business plan

33. The key messages and following points were highlighted:

- a. The draft Business Plan for 2025-26 was presented at Annex A and represented the second year of the new Strategy, through to 2030.
- b. The 2025-26 budget had been balanced.
- c. An Equality Impact Assessment had been completed for the introduction of the Business Plan and Budget 2025-26 and was presented at Annex C.
- d. The Chief Executive summarised some the key activities including: seeking a change to Section 32(1) of the Act, the theory of change and the strategic outcomes, a range of activity around inclusivity, continuous improvement with internal audit and new initiatives like AI.

34. In discussion of the Business Plan the following points were made and responded to:

- a. Council asked why it was only Non-Executive Recruitment that was being looked at for inclusivity rather than all recruitment.

The Chief Executive advised the independent review focus was making the Non-Executive Process as inclusive as possible and some outcomes would naturally filter through to all recruitment however as that work had not yet commenced it could be expanded to cover all recruitment.

- b. Council asked for the Theory of Change to be contextualised and to understand what the output would be plus the route for agreeing this through the governance structure.

The Director of Education, Policy and Development explained that this was where the Executive had been considering the KPIs and how progress against strategy could be measured. As a starting point the Executive planned to look at outcomes, considering what they might expect to see if the strategy were being successfully delivered. That would then be tracked back through staff workshops looking at the inputs, outputs and outcomes so the executive would be able to align the business plan along those tracks so everything would have impact against the strategy.

It was explained that it was still in its early stages and that workshops had been held with staff in the development of the business plan to make sure

everyone understood what outcomes were desired. However, it would still require more structure, thought and cross organisational work.

It was explained that the hope was to produce a paper for consideration for July Council or September strategy day rather than through a committee and that may be a workshop.

The aim was to have KPIs for Council to make it more accessible and understandable showing that GOsC was making the most efficient and effective use of resources and it would be more visible.

Council suggested that the work consider what the levers for change were, what results were expected and the impact those results would have e.g. 'by taking this action we believe it will make the biggest difference to registrant perception because X, Y and Z'.

- c. Annex A P9 of the championing inclusivity there were gaps in the final 2 columns – 'implement health and disability guidance and EDI CPD. The Executive confirmed this would be updated.
- d. The Chair of Audit commented that the business plan contained some large segments of work e.g. the website in Embracing Innovation and the measurable activities Long Term Financial and Asset Decisions and Strengthening Trust and suggested that an element of programme management to ensure that the individuals had capacity and experience to move forward at the right pace and have best chance of success would be beneficial.

The Chief Executive agreed that this was a helpful insight and that the Executive would reflect on that as well as how to articulate that in the plan.

- e. Council asked if that document was agreed, it would then become a working document, rag rated to it could track progress.

The Chief Executive confirmed that it would.

- f. Council commented that the procurement of appropriate models of AI for GOsC by June 2025 seemed quite early and there was no detail as to what models were proposed.

The Chief Executive agreed and advised that the business plan would be updated to reflect the fact it would a pilot.

35. The Head of Resources and Assurance introduced the Budget 2025-2026 and the key messages and following points were highlighted:

- a. Subsequent to the Government's budget announcement an additional £33k NI had to be added to the figures.
- b. Council was advised that some cost savings were expected e.g. the bringing of QA inhouse would create some savings and had been included in the figures.
- c. It was advised that there were also some additional expenditures e.g. the Board Effectiveness Review and Internal Audit as well as provision for the Chief Executive and Chair to attend overseas conferences.

36. In discussion of the Budget 2025-2026 the following points were made and responded to:

- a. Council questioned the amount of money budgeted for governance costs which were considered high and questioned what the increase in Council and Committee costs were attributed to as well as how material a miscalculation it had been.

The Head of Resources and Assurance advised that the interviewing for the internal audit tenders were underway and the costs would range from £15-£20kpa.

Council costs were slightly underbudgeted the previous year so had looked at the last 3 years actual costs to get a more realistic and prudent reflection of the costs for the 2025-2026 budget.

The Chief Executive also advised that the miscalculation of governance costs in the previous year had been significant but that the previous budget had not been written by the current Head of Resources and Assurance.

The Chief Executive advised that the responses from the Board Effectiveness Review and Internal Audit tender processes had not come in at the point the budget was written so the figures were based on a cautious approach and it was now known that there would be savings on those figures.

The cost of the Board Effectiveness Review would be around £30k.

Council asked if the Executive had benchmarked the cost of the Board Effectiveness Review against other regulators which the Chief Executive advised the amounts had not been shared however some of the organisations invited to tender had been recommended by other regulators.

The Chair added that having seen Board Effectiveness Reviews from both sides that this cost was not out of kilter.

Council asked why a review was being done at this stage and the Chief Executive explained that GOsC had not done one before, had had a significant turnover of members in 2024 and a new chair therefore it felt like a good time to fill that gap in the organisational governance.

Council discussed whether a governance review rather than a Board Effectiveness Review would have been a better scenario providing greater assurance.

The Chair advised that the specification of the tender included the successful incumbent talking to all parties to establish if there were any weaknesses within the governance structure, looking at the processes, Council and committees so that these could be addressed.

- b. The Chief Executive stated if Council did not wish to proceed with the Board Effectiveness Review it was important to know at that stage because the tender process was already underway and that the Board Effectiveness Review tender documentation had been through People and Audit Committees the previous year. Moreover, as a regulator, GOsC asked registrants to undergo CPD and therefore it only seemed appropriate that it should reflect inwards and consider areas of improvement.

The Chair noted that it was important that all parties went into the Board Effectiveness Review with an open mind so also checked that Council were happy to proceed which it was confirmed they did.

- c. Council asked what the assumptions were behind the drop in QA costs which would be brought inhouse and if there were any startup costs included in those figures or if the £124k were enduring costs. (Table on top p3).

The Head of Resources and Assurance clarified those costs started from July 2025 so some were based on external QA costs and the rest had been based on the 5- year plan in which start-up costs were included in the first year.

- d. Council asked to clarify what 'costs associated with the assessment of return to practice registration' were.

The Chief Executive explained that internationally qualified applicants have to go through a three-stage assessment route which they must pay for which covers the cost of registration assessors who assess their application including a final clinical competence examination. The narrative in the paper referred to a return to practice process; however, there are no costs for this. This is a process to support individuals who are rejoining the Register after a period of two years or more off the Register.

Council considered and agreed the following recommendations:

Considered: Council considered the Equality Impact Assessment.

Agreed: Council agreed the draft Business Plan 2025-26.

Agreed: Council agreed the draft budget 2025-2026

Item 11: Amending Section 32 (1) (protection of title) of the Osteopaths Act 1993

37. The Chief Executive introduced the item which was different from previous papers taking into account previous feedback not to overload Council with papers.

38. The key messages and following points were highlighted:

- a. Section 32(1) of the Osteopaths Act 1993 set out provisions for the protection of title.
- b. The term Osteopathic techniques was not covered by the provisions set out in Section 32(1).
- c. This created a patient safety issue as unregistered individuals were using this terminology in their advertising and members of the public may have believed they were seeing a registered healthcare professional when they were not.
- d. GOsC had engaged the Department of Health and Social Care in early conversations about changing Section 32(1).
- e. A consultation was required alongside a justice impact test. The executive requested Council agreement to delegate to them the authority to proceed with seeking to amend Section 32(1) of the Osteopaths Act 1993.
- f. Consultation document had not been provided in order to reduce level of detail and papers that went to Council.
- g. Challenge from the Chief Executive of the IO that the consultation should include the word osteopathic and not just osteopathic techniques and the Chief Executive agreed that was a fair challenge.
- h. Council was asked to agree to delegate authority for the executive to proceed with pre-consultation work.

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

- a. Council asked for clarification of what pre-consultation was and the Chief Executive explained that it was informal conversations with stakeholders about issues that inform the consultation.

- b. Council noted that the paper recommendation was to allow executive to proceed with seeking the amendment to Section 32(1) as opposed to consulting on the proposed changes. Chief Executive clarified it was to seek agreement to the consultation work and that the wording would be amended.
- c. Council suggested looking at other healthcare practices e.g. cosmetic procedures carried out by non-regulated practitioners to support the case to strengthen Section 32(1).
- d. It was also suggested that, when putting the case to the Department, it may be helpful to show actual cases that had been brought to the attention of GOsC but where action could not be taken because people were using the terms not protected by Section 32(1).
- e. Council discussed that this showed positive action to registrants. It was suggested that the scope be widened e.g. where those that have de-registered but continued to practice referred to having undergone osteopathic training could be misleading. However, it was debated as to whether stating what training was undergone was a statement of fact or whether the inference was that individual was registered and therefore regulated.

The Director of Fitness to Practice advised that it would all depend on the particular facts of a case. The Fitness to Practice team do deal with deregistered people who still want to put the qualification by their name, there is a question regarding how they use this and other information on their websites to suggest they are a registered osteopath (therefore misleading the public) that could reach threshold for a Section 32 (1) case.

The risk to patient safety was where people who said they were conducting osteopathic techniques because they were misleading the public as they knew about Section 32 (1) and the loophole that it covered the title not techniques. The legal advice received by GOsC was there was nothing that could be done where someone stated 'osteopathic technique' and there would need to be more to it than that. GOsC had several cases where there was evidence to support the change but the pre-consultation work would help build that body of evidence.

It was noted that the issue regarding use of title in terms of 'osteopathic techniques' was widespread.

- f. It was also suggested that those teaching osteopathic techniques should also be qualified and be an osteopath. It was highlighted how at the NMC there was a register for those teaching nursing as well as practitioners which demonstrated that those teaching met the accreditation standards for teaching that profession.

- g. The Head of Communication pointed out the importance of recognising the value of regulation and the amount of work registrants put into being registered osteopaths.
- h. Council discussed that, whilst GOsC could not promote osteopathy, it could promote the regulation of the profession and suggested that those who met the GOsC standards were required to publish that on their website (to make it clearer to the public the difference in being registered)
- i. Council commented that as it could not delegate a change in the Act, it needed to ensure this would not become ultra-vires therefore, rather than amending the wording from 'seeking an amendment' to 'consulting on an amendment' the word delegate should be removed. Permission could be given for the Executive to go and consult on proposed changes but the ultimate decision regarding any proposed changes would come back to Council.

It was confirmed the wording would be changed to Council were asked to agree that the Executive undertake pre-consultation and consultation activity in relation to amendment of Section 32(1) and then revert to Council.

Agreed: Council agreed to the executive undertaking pre-consultation and consultation activity in relation to amendment of Section 32 (1) and to revert to Council with the outcome.

Item 12: Annual NCOR Concerns and Complaints Report

- 40. Daniel Bailey clarified if he needed to step out given a conflict of interest. The Chief Executive clarified this was a report and not a decision where he could be conflicted was required.
- 41. The Director of Education, Standards and Development introduced the item. The report collated data from insurers to understand what patients had been complaining about and what actions would be taken to address them. Paragraph 5 contained GOsC reflections and it was pointed out that one new aspect was the increased number of findings of new or increased pain. The aim was to find out whether that was down to the registrant not communicating any risks or applying therapy too strongly.
- 42. The key messages and following points were highlighted:
 - a. Every year the National Council for Osteopathic Research (NCOR) produced a report on the type of concerns and complaints that had been made against osteopaths and osteopathic services. The report for 2013-2023 was annexed to the paper.

- b. The report brought together concerns and complaint data from the General Osteopathic Council (GOsC), the Institute of Osteopathy (iO) and three insurers of osteopaths.
 - c. The updated data collection took place during January to December 2023, Key findings included:
 - i. The number of concerns about osteopaths was 117, up on the previous year (103)
 - ii. Areas of focus for this year should include:
 - 1. Forceful treatment n=5
 - 2. Treatment causes new or increased pain or injury n=25
 - 3. Failure to communicate effectively n=7
 - 4. Communicating inappropriately n=7
 - 5. Sexual impropriety n=15
 - d. GOsC continued to use this report to support osteopaths to practise in accordance with the Osteopathic Practice Standards with particular communications and policy priorities covering the areas of concern outlined in the report.
43. Dr Jerry Draper-Rodi, Director, National Council for Osteopathic Research (NCOR) was invited to explain the report in more detail.
- a. Data covered 2023 and was reported end of 2024 – 120 complaints with around a fifth were around new or increased pain.
 - b. One finding that had remained the same for a while was that an osteopath who had been practicing for more than 10 years was more likely to have a complaint against them. NCOR were monitoring this to understand more.
 - c. Male osteopaths were more likely to have a complaint made against them.
 - d. Dr Draper-Rodi noted that in the past changes in mandatory CPD requirements to address matters such as consent and communication had successfully led to a decrease in complaints on consent and communication.
 - e. The next report should have more understanding of specific aspects in order to help understand potential interventions.

Matthew Redford left the room 1509 returned 1511.

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

- a. It was highlighted that in Table 3 of the report looking at the importance of targeting groups in the profession, it looked as if the percentage figures in relationship to the number of complaints received were broken down to a

ratio of number of people in the bands there was a difference. In that context there seemed to be a higher number of complaints in the 61-70 age band than any other but the percentage value suggested that was not the case. Wondered if that was a potential issue or influenced how might communicate with certain groups.

Dr Draper confirmed that he would need to look into it and respond accordingly.

- b. In relation to the increase in number of new/increased pain complaints, Council asked if that was more recent or over the whole period of time report covered.

It was explained that it may have been hidden in the past but it did seem to be an increase. This could be as a result of the work done on consent and communication meaning things had been brought to light more than previously. There had been spikes in the previous year but caution was needed with small numbers which could mean that findings were by chance rather than showing a trend.

- c. It was suggested that it would be useful to know if other healthcare professions were reporting an increase in post treatment pain.

Consider: Council considered the implications of the NCOR concerns and complaints report 2013-2023.

Agreed: Council agreed to publish the NCOR concerns and complaints report 2013-2023, subject to clarification that table 3 was accurate.

Item 13: Annual review of social media policy

45. The key messages and following points were highlighted:

- a. The Charity Commission duties required GOsC to update the social media policy every year.
- b. Three updates had been made to the wording that year to indicate that a review of the use of both Facebook and X (Twitter) was planned in 2025. A review would be undertaken to assess if they matched GOsC values.
- c. A review of social media strategy had been included in the business planning for 2025-26 as a result of the review of the social media policy, the DJS research and the Strategy 2024 to 2030.
- d. Quality assurance process that the Comms team follow when posting on social media simple forward

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

- a. Council asked if the second recommendation regarding X included looking at viable alternatives e.g. BlueSky.

It was advised that once the Comms Team had looked at current channels and their mission statements, they would start looking at other options in a strategic way. They would take into consideration what key stakeholders (other regulators, students and registrants) used.

- b. It was suggested that GOsC's values (quoted in paragraph 8), strategic themes and priorities should feature earlier in the document.
- c. Council asked whether the IT Manager looked over the policy from a cyber security perspective and it was confirmed this would be considered.
- d. It was suggested that in paragraph 20m some guidance or context around what being appropriately trained meant would be helpful for staff.
- e. It was suggested that a definition of non-paid or paid for advertising (paragraph 21) would be helpful.
- f. It was suggested that a standard statement for responding would be helpful in relation to scenarios where GOsC was tagged in a post hoping to draw attention to an issue that was not in line with the organisation's objectives. (paragraph 25)
- g. It was suggested that, as in other organisations, the policy should state that staff or members could not comment at all on anything about the organisation in a personal capacity and could only say something if it had been approved by the organisation.
- h. The Chair suggested members be given a 10-point plan of what could and could not do in connection with social media.

The Head of Comms advised that the team were looking at the ambassadorial role so that was an area that would be considered as part of that work.

- i. Council asked whether, as the staff in Fitness to Practice team would use social media in investigating osteopaths and that it might result in some material that would not be acceptable this should be referenced in the policy.

The Director of Fitness to Practise advised that everyone had the right to freedom of expression under article 10 (European Convention on Human Rights) but that this was a qualified right, not an absolute right. Producing outward facing social media guidance was an area that the executive would need to look into.

- j. Council asked how the Comms team would reach a balance in terms of using X and Facebook for effective communication versus the conflicts that could arise when reviewing their use.

It was confirmed that it was a priority for the team.

Agreed: Council agreed the Social Media Policy updates.

Noted: Council noted future plans in relation to the social media strategy.

Lesley Pitts (Donald) Osteopath [left 1325]

Item 14: Any other business

- 47. The Chair formally thanked Simeon London, Liz Elander, Laura Turner and Chris Stockport for their work on Council and thanked Marcia Scott (EA to Chief Executive and Registrar and Council) for her support over many years and wished her very well in her retirement.

Item 15: Questions from observers

- 48. An observer asked GOsC if it were appropriate to flag the Gateshead and South Tyneside coroner prevention of future deaths report regarding a case that involved a chiropractor, and whether that would be discussed at Council.

The Director of Education, Standards and Development responded that this was a report requiring a response from the General Chiropractic Council in relation to something that happened to a patient. GOsC were not required to respond as had not been named but there were implications that the Executive team would reflect on.

Date of the next meeting: Thursday 15 May 2025

Meeting closed at 1530 followed by 15 minutes Council reflection time.