

GENERAL OSTEOPATHIC COUNCIL

**Minutes of the 57th meeting of the General Osteopathic Council held in public on
Tuesday 11 March 2008 commencing at 10.00am at Osteopathy House,
176 Tower Bridge Road, London SE1 3LU.**

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Chairman: Professor Adrian Eddleston

Present:

Dr Stephen Barasi	Rachel Pointon
Martin Booth	Robin Shepherd
Robert Burge	Paul Sommerfeld
John Chuter (Treasurer)	Rosalind Stuart-Menteth
Fionnuala Cook	Dr Andrew Thompson
Catherine Hamilton-Plant	Fiona Walsh
Professor Ian Hughes	John Wilden
Tim McClune	Margaret Wolff

In attendance:

Evlynne Gilvarry, Chief Executive & Registrar (CE&R)
Marcus Dye, Professional Standards Manager
Gillian O'Callaghan, Head of Registration and MIS
Matthew Redford, Head of Finance & Administration
Brigid Tucker, Head of Communications

Jane Quinnell, Clerk to Council

1. Professor Eddleston welcomed members to the meeting; his first as Chairman and Evlynne Gilvarry's first meeting as CE&R. He also welcomed Nigel Graham from the British Osteopathic Association who was observing. Nigel Clarke's letter of thanks for the dinner in his honour, the previous evening, was read out.
2. The Chairman drew attention to the new style of the Council agenda and papers which included summaries, highlighted decisions to be taken and indicated key risks. The change was aimed at facilitating Council decision making.
3. The order of the agenda was changed to allow for the two National Council for Osteopathic Research (NCOR) items (6 and 13) to be heard first, as Professor Ann Moore and Ms Carol Fawkes, from NCOR, had to leave promptly.

APOLOGIES

4. Apologies were received from Claire Cheetham, Nigel Clarke, Professor Trudie Roberts and Dr Les Wootton and from Vince Cullen from the Senior Management Team.

QUESTIONS FROM OBSERVERS (five minutes)

5. No questions were raised.

MINUTES OF THE PREVIOUS MEETING

6. The minutes were signed by the Chair as a true record of the meeting held on 4 December 2007.

MATTERS ARISING

7. There were no matters arising.

CHAIRMAN'S REPORT

8. Council Meetings The Chairman said he and the Chief Executive were anxious to promote Council's aim of openness, transparency and honesty at meetings. Members should feel free to speak openly and be unafraid to ask questions, even if they felt them 'naïve'.
9. Advancing Osteopathy 2008 – 10th Anniversary event The Chairman wished formally to draw attention to the success of the event which provided a showcase for British Osteopathy to the rest of the world.
10. Privy Council appointed lay members of Council Following a meeting involving the Chairman and CE&R, the Department of Health and the Appointments Commission, it was agreed that the six lay members, whose terms of office were due to expire on 8 May 2008, should be re-appointed. This process would be conducted by the Appointments Commission and the terms would extend until the new Council was in place. This process involved securing the members' agreement to stand for the re-appointment period and providing the Appointment Commission with the re-appointment paperwork which included a current CV and appraisal. The Appointments Board was due to sit on 19 March 2008 and a decision is awaited. The Appointments Commission is also handling the recruitment of two lay members to fill the vacancies left by Anne Jones and Andrew Popat. It is hoped that these would be filled by the end of June/beginning of July 2008.
11. The Appointments Commission had offered to come and speak to Council members to explain the new appointments process and answer any questions. A slot at the June 2008 Council meeting would be set aside for this.

12. British Osteopathic Association (BOA) The Chair and Chief Executive had had a recent, very positive, meeting with the BOA, at the end of which agreement had been reached on a new way of working. The GOsC and the BOA would meet at least quarterly and the discussions would be confidential between respective Chair/President and Chief Executives in order to build constructive relationships. At the end of each meeting, it would be agreed which, if any, of the items could be reported back to the respective organisations. Also, it was agreed that both bodies would flag up any articles due to be published in the respective publications, likely to cause contention. Members accepted that this was an appropriate way forward and acknowledged that a constructive relationship with the BOA was something worthwhile to be achieved.

NATIONAL COUNCIL FOR OSTEOPATHIC RESEARCH (NCOR) – ANNUAL REPORT 2006-07

13. Professor Moore and Ms Carol Fawkes presented NCOR's Annual Report for 2006-07 with the aid of a short PowerPoint presentation. The Annual Report included reports from six of the Osteopathic Educational Institutions. She highlighted key points from the Report including:
 - a. growth of the research hubs to 11 with a 12th in line for establishment
 - b. details of the hubs' projects
 - c. development of the *expert* hub
 - d. Dr Janine Leach's appointment as a Senior Research Fellow in Osteopathy
 - e. high quality of applicants for the Research Officer post to support Dr Leach
 - f. NCOR's future planned activities.
14. Members' questions about the Report were clarified as follows:
 - a. There were about 12 members of each hub, currently and it was thought wise to allow the hubs to consolidate before further recruitment. It was planned to recruit more members in a year's time, involving new graduates. The meetings between the GOsC and the osteopathic educational institutions could facilitate this new recruitment. NCOR had volunteered to speak to final year students, was involved with presentations of awards at graduation ceremonies and would advertise NCOR at the COP Conference. The hubs' work would have a significant impact on the profession and the work on the Standardised Data Collection project was all adding to the evidence base. It was possible that NCOR would get all the hubs together at the British Osteopathic Association (BOA) conference to share good practice. Reports were being prepared to disseminate the results of the hubs' work to the profession.
 - b. The Darzi Report on the future of the NHS (Oct 2007) suggested areas in which osteopaths might have an interest (long term conditions, post-pregnancy, mobility, diabetes and patient experiences) and NCOR was looking at the Report in detail.

- c. Originally, the idea for the hubs was that they were self supporting but NCOR had now recognised that they needed help in establishing themselves and would do so for some time yet. Carol Fawkes spent a huge amount of time in supporting the hubs and this involved numerous meetings, mainly at weekends. NCOR was considering the recruitment of someone to support the hubs directly so Ms Fawkes could concentrate on other work.

NATIONAL COUNCIL FOR OSTEOPATHIC RESEARCH (NCOR) – STANDARDISED DATA COLLECTION PROJECT – SECOND PHASE REPORT

15. Professor Ann Moore, Chair of NCOR, and Carol Fawkes, NCOR Research Officer presented the final Report for Phase 1 (covering the 7-9 month period and the 10-11 month period). The tools developed by the hubs had been merged and duplication had been removed. The tool was still over-long and the next stage was looking at segmenting into patient, practitioner and outcomes and follow-up sections.
16. **Agreed:** members noted the progress on the project so far and approved the release of the next tranche of funds of £15,000.
17. In conclusion Professor Moore highlighted the fact that NCOR had been in existence for five years and that thought needed to be given to its future and a succession plan for the Chair. Professor Moore and Ms Fawkes were thanked for their contributions and left the meeting.
18. Members proceeded to have a short discussion about NCOR in general. It was reported that the members of NCOR had recently had a meeting to consider the next five years. NCOR had unanimously agreed that Professor Moore should be asked to remain as Chair for another five years but that serious consideration must be given to succession planning for the period thereafter. Further debate was required by NCOR as to whether NCOR should have an osteopath chair or a chair with outside expertise, at the end of the next period of five years. Feedback from osteopaths was that an osteopath would be the preferred choice if the right person could be identified. The possibility that in the longer term NCOR might not be based at the University of Brighton would also be considered as part of succession planning. It was confirmed that NCOR would consult widely when proposing candidates for the chair, following the next term. The GOsC would make an appointment on a recommendation by NCOR.
19. It was confirmed that NCOR, its future funding and the appointment of a Chair would be the subject of a paper to be considered at the next meeting of the Council in June 2008.

GOVERNMENT REVIEW OF HEALTHCARE REGULATION

First Section 60 Order Consultation response

20. Council noted the response made on behalf of the GOsC to a Department of Health consultation on the First Section 60 Order aimed at implementing reforms recommended in the Foster report. There were no questions.

Governance Working Group and Osteopathic Competency Working Group

21. The CE&R reported on the progress of both Working Groups (WG). The Osteopathic Competency WG's work was now complete and the competencies/criteria developed had been submitted to the Governance WG. The Governance WG had agreed the role of the new Council and drawn up a set of competencies and criteria for new Council members. It was next scheduled to meet on 7 April 2008 when it would take forward remaining work including roles of Chair and Treasurer and job descriptions for Council members. A final report would be made to the Council in June. Members of both groups were thanked for their contributions so far. No questions were raised.

Revalidation Working Group

22. The first meeting of this group had concentrated on exploring varying methods of revalidation and identifying which would be better suited to a largely self-employed profession. The WG concluded that the focus should be on developing an assessment tool that would form the basis of a self-certification scheme. It was agreed that a draft assessment tool would be drawn up by the Professional Development staff and circulated in advance of the next meeting of the WG on 14 April 2008.
23. The CE&R reported that official soundings taken suggested that self-certification might be acceptable as step 1 of a 2 or 3 step scheme of revalidation where the subsequent steps involved robust measures in relation to osteopaths who gave rise to concern at step 1. However, the CE cautioned that until the Department of Health published its interim report on non-medical revalidation – due in March – it was not possible to say definitively what would be acceptable. The self-assessment tool would be developed this year to fit in with the Government's timetable of piloting schemes in 2009. It was therefore proposed to consult widely in 2008 followed by a further comprehensive consultation in 2009 and potentially pilot the scheme at the end of 2009. The Revalidation WG would be making an interim report to Council at its June 2008 meeting and a full report in September 2008.
24. Members stressed the importance of adequate communication of revalidation plans to the profession. The Council was informed that a communication plan, currently being developed, envisaged communication in print, online and through regional meetings starting in the second half of this year.

Governance arrangements - a specification for the Department of Health (DH)

25. In order to issue clear instructions to the DH's lawyers who would be drafting the Constitution Order to provide for the new governance arrangements, it was necessary for the Council to confirm its position on the following issues:

- Size of Council
- Duration of terms of office
- Discount of previous experience
- Appointment/election of Chair.

26. Appointment/election of Chair The Council had previously voted in favour of an elected chair but were asked to re-consider this in light of decisions by a majority of regulators to appoint their chairs. It was confirmed that, in the interests of continuity, the DH was happy to provide that the current chair should remain in office until 6 months into the term of the new Council, at which point he would be re-appointed. Notwithstanding that possibility, the Chair said he felt the issue should be considered afresh by the Council and he would stand by their decision. If the decision was to appoint a chair in advance of appointing the new Council (the formula being used by many other regulators), Professor Eddleston confirmed that he would be a candidate.
27. In the ensuing debate, views for and against an elected chair were aired. Members stressed the value of continuity and retaining the experience of the current Chair and also the Treasurer. One member noted that the role of Chair was different from the other Council members and a different set of competencies would be required. He could not therefore see how it was possible to elect a Chair from appointed members if they had not all been appointed to potentially match the Chair's required skill set. Several members commented that, listening to the arguments in favour of appointed chairs, they were swayed in favour of that approach. Members wondered whether the Appointments Commission could be asked to re-appoint (as there was a re-appointments' process) the elected Chair so that Professor Eddleston could continue as Chair of the new Council for its first four years. It was confirmed that the GOsC would set the competencies for the Chair of Council and the Governance WG would be considering these at their April 2008 meeting.
28. The issue was put to a vote. There were no abstentions and two against (Mr Booth and Mrs Stuart-Menteth), **Agreed**: that the current chair of Council continue in office until the new Council had been in existence for 6 months, at which point he would be subject to a re-appointment process conducted by the Appointments Commission. Thereafter, all chairs of the GOsC to be appointed.
29. Size of Council It was confirmed that with devolved governments, at least one member of the new Council (whether lay or professional) had to come from England, Northern Ireland, Scotland and Wales. Currently, the legislation only allowed for parity of lay and professional members of Council. Council had previously been surveyed on the number of Council members and had agreed on 15. The legislation would be amended in due course to allow for a lay majority and it would then be necessary to appoint one lay Council member. With an even number of Council members, it was confirmed that the Chair would have the casting vote in the event of a tie vote.
30. **Agreed**: The Council should comprise 14 members of Council – seven lay and seven osteopaths.
31. Discount of previous experience Members discussed this in detail, particularly focusing on the need to ensure that opportunities were created for new blood on the Council. With this in mind some members expressed concern that if all previous service was discounted, there was a chance that some existing Council members, if appointed, could serve two terms of four years making a total in some cases of 14 years plus. However, other members argued strongly that as the new appointments were to be made against specific competencies, previous service should not be an

impediment.

32. A motion proposing that, in relation to existing Council members, one term of four years service be discounted, was put to a vote. No abstentions, two for the motion (Mrs Cook and Dr Thompson) and the rest of Council against.
33. The Council then voted on the recommendation in the paper which proposed that all previous service be discounted. One abstention (Mrs Hamilton-Plant), two against (Dr Thompson and Mrs Cook) and the rest of Council for the proposition.
34. Duration of terms of office
Agreed: that all newly appointed Council members should be able to serve two terms of four years as a maximum.
Agreed: that initially terms of office would be staggered with six members being selected to serve a three year term and eight members to serve four years. Thereafter, all members would serve four year terms. This would avoid all Council members ending their terms simultaneously.

GOsC STRATEGIC PLAN 2008-2011

GOsC Strategic Plan for 2008-2011.

35. The Strategic Plan before Council was an amended version of that which had been considered at the December 2007 Council meeting. The following further suggestions for amendments were made. The first sentence in the first paragraph under Strategic Aim 1 should be corrected to avoid the misleading impression that the Quality Assurance Agency reviewed and enhanced the Standard of Proficiency. Also, list of committees featured in the diagram on page 6 of the Plan was incomplete and inaccurate.
36. **Agreed:** to approve the document as the Strategic Plan 2008-2011 for the GOsC subject to the suggested amendments.

Business Plan for 2008-2011

37. The new Business Plan had been prepared in support of the Strategic Plan 2008-2011. It would be reviewed regularly and amended as needed. The Business Plan did not specifically highlight on-going work but put the focus on new key objectives for 08/09. These would be reviewed and updated throughout the 3 years of the business cycle. Members noted that equality and diversity objectives were featured in the Business Plan and suggested that there might also be an explicit reference in the Strategic Plan. Members also felt that there should be a specific objective to enhance relations with stakeholders; the BOA and the osteopathic educational institutions were mentioned as an example.
38. **Agreed:** to approve the document as the Business Plan 2008-2011 for the GOsC, subject to suggested amendments.

PRINT VERSION OF THE GOsC REGISTER

39. The Council considered a paper recommending that the print version of the Register be discontinued principally on grounds of public protection. It was argued in the paper that as the print register, unlike its online equivalent, could not be updated on an ongoing basis, it could not be relied upon by a member of the public seeking to identify a registered osteopath. Members then discussed the matter at length and several stressed that the print version had advantages for osteopaths who did not operate online.
40. A recommendation to discontinue the print version of the Register and enhance the online version was subject to a vote. There were no abstentions and two against the proposition (Mr Booth and Mrs Stuart-Menteth) with the balance of Council voting in favour of the proposition. **Agreed:** that the print version of the register be discontinued immediately rather than phasing it out and that a letter should be written to every registrant explaining the rationale for this.

OSTEOPATHY HOUSE MAJOR WORKS - PROGRESS REPORT

41. The CE&R confirmed that the initial stages of preparation for the proposed major works at Osteopathy House were underway. A key step would be the commissioning of a full structural survey. This would clarify whether the previously considered development plans were feasible. It would also allow for a firm estimate of costs. A report based on the survey would be made to the Council in June at which point, a decision on the scope of the development would have to be taken. Meanwhile, a Workshop, facilitated by The Foundation for the Built Environment, was to be held on 27 March 2008. A tendering process to appoint a project manager would also be conducted. .

COUNCIL MEMBERS' EXPENSES

42. The Remuneration Committee's annual review of compensation paid to Council members had taken place. The Committee recommended that the £250 attendance rate and reimbursed expenses rate remain unchanged for 2008/09. It was noted that the Government's Report on Governance (chaired by Niall Dixon) had recommended that an annual honorarium be paid to members of the new Councils. However, the Committee felt that it was too early to consider means of compensation at this stage.
43. **Agreed:** to keep the attendance rate and reimbursed expenses rate for 2008/09 as that for 2007/08.

ADVANCING OSTEOPATHY 2008 – A REVIEW

44. The paper provided a comprehensive review of the 10th anniversary event – *Advancing Osteopathy 2008*. Feedback on the event had been very favourable and attendance had exceeded expectations. Financial reconciliation was still taking place but it looked like the overall cost would be well below the sum ring-fenced for the event. Thanks were offered to the Communications Committee and in particular Mr Shepherd for his enormous contribution, and to the staff of the GOsC

Communications team. Additional thanks were recorded for the very generous contribution made by the Osteopathic Educational Fund (OEF).

45. The review, *Good Health in Good Hands: UK Osteopathy Today*, produced for the event, was now being disseminated to external audiences.

MANAGEMENT ACCOUNTS – 10 MONTHS TO 31 JANUARY 2008

46. The Management Accounts for the ten months to 31 January 2008 were presented. The new governance legislation would require all healthcare regulators to provide a value for money account to every registrant, to Parliament and the Council for Healthcare Regulatory Excellence. With this in mind, the Senior Management Team were considering how best this could be achieved and a report on this would be brought back to the Council for consideration. The amount of the registration fee was kept under annual review by the Finance & General Purposes Committee and this process would continue. Members were reminded that in very recent years, this review had to take into consideration the prevailing climate of great change. Change would remain a feature of the GOsC's environment but it was acknowledged that this should not preclude a detailed debate at Council on the level of the fee.

2007/08 BUSINESS PLAN EXCEPTION REPORT

47. The CE&R reported that this item was a regular item on the agenda and it reported on items not on target or exceeded in the Business Plan. There was nothing to report to Council in this instance. The CE&R requested that this item no longer be a standing item but that the Council should be assured that it would receive a report on any matters that reflected a change in the agreed business plan – **Agreed**.

COUNCIL FOR HEALTHCARE REGULATORY EXCELLENCE (CHRE)

CHRE Performance Review 2007-08

48. The GOsC self-assessment report against the new, pilot Performance Review had been submitted to CHRE. An interim assessment had been received in which CHRE indicated areas they wished to discuss further at the Performance Review meeting on 14 March 2008. The Chairman, CE&R and the SMT would attend the Review meeting. The SMT members were thanked for their hard work in preparing for this Performance Review.

CHRE Council Meeting Minutes

49. As previously agreed, Mr Clarke would continue to represent the GOsC at CHRE meetings until such time as the constitution of the CHRE's Council was changed by legislation. The minutes of CHRE's meetings from October 2007 and January 2008 were with the Council's papers. The minutes of the February 2008 meeting were not yet available but Professor Eddleson, on Mr Clarke's behalf, reported two significant items from the meeting:
 - a. There was concern amongst regulators that, arising from governance changes that would require members to be appointed by a Government body (The

Appointments Commission) they might be reclassified as 'Central Government Bodies. This raised fears of encroachments on the independence of regulators. The General Dental Council had raised this concern with the Department of Health, having seen itself listed on a Government website as a Non-Departmental Government Body. The GDC received a reassuring response from the Department of Health and reference to it was removed from the website. The situation would be kept under review but there appeared to be no immediate risk to the GOsC's independence..

- b. The General Medical Council was updating its advice on the treatment of patients in the light of the Mental Capacity Act. The Disability and Human Rights Commissions were taking an interest in how this would apply to regulators' Fitness to Practise and Health procedures. The GOsC would consider whether it needed to act in similar terms.
- c. The next CHRE meeting was due to be held on 12 March 2008.

CHIEF EXECUTIVE'S REPORT

- 50. The Council noted the CE&R's report which included reports from each Department.

COMMITTEE REPORTS

Audit Committee

- 51. The unconfirmed minutes were before the Council. The Chair reported that the Audit Committee had agreed to revise the internal audit programme with the effect of substituting an audit of the GOsC's HR function in place of the planned audit of governance arrangements. The Committee had also approved that the audit of the fitness to practise procedures should be put out to tender amongst firms specialising in professional regulation. No questions were raised.

Education Committee

- 52. The unconfirmed minutes were before the Council. No questions were raised.

Investigating Committee (IC)

- 53. The IC had met on 10 January 2008 to consider whether it was necessary to impose an interim suspension order on an osteopath's registration. The Committee found that this was not necessary. The meeting scheduled for February 2008 was cancelled due to lack of substantive business. The IC was next due to meet on 23 April 2008.

Professional Conduct Committee (PCC)

- 54. The PCC considered five cases since the previous meeting of Council. These included three new cases and two Review Hearings. Following one Review hearing, the case against the osteopath was concluded. In the other case, the osteopath had made an application that an interim suspension order currently imposed on his

registration be revoked. The Committee decided that the suspension order should remain in place until the substantive case against the osteopath was considered. Of the three new cases, one was concluded with no charges proven; in the second case, the Committee found that a criminal conviction had material relevance to the osteopath's fitness to practise and imposed a Suspension Order and in the third case, the Committee found the osteopath guilty of unacceptable professional conduct and imposed a Conditions of Practice Order.

Section 32 Committee

55. The Committee had not met since its last report to Council but the Council was currently prosecuting three practitioners for breach of Section 32. All three cases were listed for court appearances in March 2008.

ANY OTHER BUSINESS

56. There was no other business for discussion.

QUESTIONS FROM OBSERVERS

57. There were no questions from the observer.

DATE OF NEXT MEETING

58. Tuesday 10 June 2008 at 10.00am.