



## Meeting of Council

**Minutes of the 127<sup>th</sup> Meeting of Council held in public on Thursday 15 May 2025 at Osteopathy House 176 Tower Bridge Road, London SE1 3LU and via Go-to-Meeting video conference.**

*Unconfirmed*

**Chair:** Jo Clift

**Present:** Dr Daniel Bailey  
Harry Barton (Chair, Audit Committee)  
Professor Debra Towse (Chair, People Committee)  
Sandie Ennis  
Professor Patricia McClure (Chair, Policy and Education Committee)  
Gabrielle Anderson (Council Associate)  
Caroline Guy  
Gill Edelman (online)  
Arwel Roberts (Council Associate)

**In attendance:** Fiona Browne, Director of Education, Standards and Development  
Steven Bettles, Head of Policy and Education  
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  
Ben Chambers, Head of Registration (Item 11)  
Nerissa Allen, Executive Assistant (Online)

**Observer/s** Maurice Cheng, Chief Executive, Institute of Osteopathy  
Lynne Chambers, Praesta (Board Effectiveness Review)  
Pete Freeman, Praesta (Board Effectiveness Review)  
Colette Byrne, Scrutiny Office, Professional Standards Authority (online)  
Abdul Rahman Lawal, Performance Review Team, Professional Standards Authority. (online)  
David Propert, Osteopath (online)  
Ben Katz, Osteopath (online)  
Arthur Kyeyune, Osteopath

### **Item 1: Welcome and apologies**

1. The Chair welcomed everyone to the meeting. Special welcomes were extended to:
  - a. Professor Debra Towse who joined Council on 1 April 2025 as the new Lay Council member from Wales who will be the Chair of People Committee.
  - b. Arwel Roberts the new Council Associate.
  - c. Lynne Chambers and Pete Freeman from Praesta who are undertaking the Board Effectiveness Review.
  - d. Online and external observers.
  - e. The Chair explained about the two registrant vacancies that Council was carrying, with interviews taking place the following week. The Chair assured Council that quoracy was still met to allow meeting to take place.
2. Stakeholder observers:
  - a. Maurice Cheng, Chief Executive, Institute of Osteopathy (iO).
  - b. Colette Byrne, Scrutiny Office, Professional Standards Authority (online)
  - c. Abdul Rahman Lawal, Performance Review Team, Professional Standards Authority (online).
3. Apologies were received from:
  - a. Dr Jerry Draper-Rodi, Director, NCOR

## **Item 2: Questions from Observers**

4. There were no questions from online observers.

## **Item 3: Minutes**

5. The minutes of the 126<sup>th</sup> public meeting, 6 February 2025, were agreed as an accurate record of the meeting.

**Agreed: Council agreed the minutes of the 126<sup>th</sup> public meeting 6 February 2025.**

## **Item 4: Matters arising**

6. The Chief Executive introduced the report which asked that Council note the workstreams completed and underway.

- a. The Chief Executive provided an update on the amendment to s32 of Osteopaths Act noting there would be two online meetings next week to undertake pre-consultation activity with stakeholders and a consultation document would be issued in June.
- b. The Chief Executive confirmed that the NCOR concerns and complaints report was now published on the website.

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

- a. It was noted that, in the Fitness to Practise report, the Director of Fitness of Practise had commented on the rise of sexual misconduct cases and had advised that training for the relevant groups in terms of handling these would be undertaken. Council asked if there had been specific training on sexual misconduct.

The Director of Fitness to Practise advised she would review the minutes and revert to Council around training and sexual boundaries.

- b. Council noted that reference had been made to the work on the 'Theory of Change' but there was a lack of clarity around the timing of when that work would be reported to Council.

The Chief Executive advised that there would be another internal workshop (two had already been held) therefore it was most likely to be reported at November Council.

**Noted: Council noted the matters arising from the meeting of 126th public meeting 6 February 2025.**

### **Item 5: Chair's Report**

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

9. The key points were:

- a. Recruitment was underway for two new registrant members of Council and there was a strong field of applicants for the re-run of the previously unsuccessful recruitment in 2024.
- b. Candidates had been shortlisted for the Patient Partner role and interviews will be in June.
- c. The Chief Executive and Chair held a bilateral with the outgoing iO CEO (Maurice Cheng) and the new President (Dan Collis). There will be a new CEO announced shortly.

- d. The Chief Executive and Chair would meet with the CEO and Chair of the General Chiropractic Council in May.
- e. The Chair and the Chief Executive attended the Institute of Regulation annual conference in March.
- f. The Board Effectiveness Review was underway and the report will be presented at July Council.
- g. The Chair and committee chairs meet three times a year.
- h. The September Council Day would cover:
  - I. Team building to welcome new members.
  - II. A workshop held by Praesta to help us plan following the Board Effectiveness Review.

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

- a. The Professional Standards Authority Chair round table had taken place the day before and the main focus was the GMC Chair giving feedback on its experience around bringing anaesthetist associates and physician associates into regulation.
- b. The iO CEO Maurice Cheng was retiring and the new CEO had been appointed.

Maurice Cheng advised the iO had appointed Dr Alison Robinson Canham as new CEO who fitted well with their strategy of investing heavily in education and policy development, as she had significant experience in that area as an academic.

The Chair noted a firm thanks for all the significant contribution which Maurice Cheng had to the profession.

**Noted: Council noted the Chair's report.**

### **Item 6: Chief Executive and Registrars Report**

- 11. The Chief Executive introduced the item which presented a review of recent activities and performance not reported elsewhere on the agenda.
- 12. The following points were highlighted and expanded upon by the Chief Executive:

- a. The Chief Executive attended and chaired a session at the Professional Standards Authority (PSA) 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'.
- b. The Chief Executive attended the Spring Conference of Osteopathy Europe and participated in a panel discussion around challenges for regulated and unregulated countries and presented on the statutory process for handling complaints made against osteopaths.
- c. GOsC had responded to a PSA consultation on revisions to the 'Standards of Good Regulation', a call for evidence from the PSA on reviewing Right-touch regulation and had also provided evidence to the PSA for a good practice report on Standard 3 of the Standards of Good Regulation, Equality and Diversity.
- d. Non-executive recruitment campaigns continued to run, specifically for two osteopathic Council members.
- e. The following decisions were made outside electronically, outside of Council and reported for minutes in Chief Executive's report appointing the following members to the Investigating Committee:

Mickael Iqbal	Lay	1 April 2025	31 March 2029
Sandra Smith	Lay	1 April 2025	31 March 2029
Jennifer Fletcher	Osteopath	1 April 2025	31 March 2029
Chantal Prince	Osteopath	1 April 2025	31 March 2029

- f. Annexed to the paper was a document regarding points of reflection relating to the Nolan principles of standards in public life.

**Noted: Council noted the content of the report.**

**Noted: Council noted the decisions taken electronically by Council, outside of the normal meeting cycle, in relation to fitness to practise appointments to the Investigating Committee.**

### **Item 7: Assurance Report**

13. 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. A separate item on the agenda considered a revised approach to performance reporting, using a dashboard, which could replace reports presented to Council during the business year.
14. In discussion the following points were made and responded to in relation to the Business Plan and Monitoring April 2024- March 2025 (Annex A):

- a. Council asked if it was possible for the report to have additional horizontal lines to make reading easier.
- b. The Chair asked about the revised timing for the financial and asset management strategy.

The Chief Executive advised that it would be likely the November Council meeting and would include the proposed revised business plan reporting to Council.

- a. The Chair of Audit asked for the environmental elements to be considered within the forward plan.

### **15. Financial Report to 31 March 2025 (Annex B)**

16. The Head of Resources and Assurance introduced the report noting the figures were year-end but draft whilst the audit was ongoing. The key messages from the report were:

- a. Total income was around £3.03m and £160k over budget for the year.
- b. Expenditure was around £3.07m and £206k over budget for the year. As previously mentioned to Council, the budget for 2024-25 approved in May 2024 had been under-estimated, and members were assured that the budget for 2025-26 was more reflective of the actual spend in each area.
- c. The Balance Sheet remained strong, and GOsC could face future challenges from a position of financial health.
- d. Cash at bank was around £449k lower than at year end; this reflected the increase in costs for our expenditure. A higher proportion of income was received earlier in the financial year and there was a gradual decrease towards the end of the year.

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

- a. Council queried the areas of overspend (education, professional standards and governance) and asked why more had been spent for that year and why the executive was confident next year it would come into line.

The Chief Executive advised the current Head of Resources and Assurance had inherited a budget that had some issues and that he was confident that moving forward the budget process was much more robust and accurate.

- b. Council asked what the financial forecasting was over the next few years as Council needed to see a longer-term projection.

The Chief Executive advised that budgets set had resulted in small surpluses being achieved in previous financial years. Because of this past experience, the Chief Executive was confident that would continue to be the case going forward.

- c. There will be a three-year forecast for November Council.
- d. Council asked for the QA overspend to be explained and whether it related to additional activity that was unforeseen.

The Director of Education, Standards and Development advised that there had been additional visits because institutions had introduced new qualifications and our regulations require that GOsC visit new qualifications under a separate process. Another visit needed to be split in two and the planning was another increased cost. These factors accounted for the majority of the overspend and GOsC did not have the ability, under the regulations, to charge for QA.

- e. Council suggested that in future, using some sensitivity analysis (the potential for something you have budgeted for to go higher or lower and consider impact of that on the budget) would help to set a risk tolerance.
- f. Council asked if it was expected that external auditors would pick up on the quality of budget forecasting.

The Chief Executive advised the auditors may do however he did not expect it to be sufficient for any qualification of the accounts.

- g. It was clarified that this was a one-off budgeting anomaly for one year based on a budget the current Head of Resources and Assurance had inherited.

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

#### **Item 8: Fitness to Practise Report and Dataset:**

18. The Director of Fitness to Practice introduced the report and added some opening points:

- a. There were a significant number of cases where Fitness to Practise could not progress (e.g. third-party cases) but they were being actively monitored. The report showed that there were a large number of cases 'screened in' but they remained at the Investigating Committee stage for a period of time. Fitness to Practise had considered a large number of these cases at Investigating Committee and some had been closed and some were progressing.

- b. An external audit of threshold cases closed by Investigating Committee were reported to Audit Committee in March. It was emphasised that the headline was that of all cases closed, none of them disclosed public protection concerns. There were some learning points and things that could improve decision making but it was reassuring that none presented public safety issues.

19. The key messages from the report were:

- a. In the reporting period, there was a marked increase in the number of concerns received (23) in comparison to the last quarter (13).
- b. As of 31 December 2024, 5 of the 30 cases referred by the Investigating Committee (IC) to the Professional Conduct Committee (PCC), were listed for hearings. A breakdown of the cases awaiting hearing was in the quarterly dataset at Annex A (page 6).
- c. During the reporting period three cases were considered by the PCC including one review hearing, one rule 8 consideration and the conclusion of a part heard PCC substantive hearing.
- d. An audit of all concerns and cases closed by Screeners and the Investigating Committee involving the threshold criteria over the period 1 April 2023 – 30 August 2024 took place in February 2025. No public protection concerns were identified from the cases reviewed by the auditor. The other key findings from the report were summarised within this paper.
- e. The Regulation team hosted three training events during the reporting period including the annual training days for the IC and the PCC together with an induction day for new PCC members.
- f. A section 32 (protection of title prosecution proceedings) had commenced against one individual, Gareth Milner. The trial had been set for May 2025.

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

- a. A high number of concerns had been received and the team had been really busy liaising with complainants. There was a healthy number of screener decisions and the KPI at screener stage had been met.
- b. The IC KPI was missed which was due to the large number of cases referred. Half of those considered by IC were third party. If the third-party cases were extracted, the time taken was reduced to 32 weeks. Within those cases there were still very complex and difficult cases involving engaging with complainants who were vulnerable.



- c. Regarding cases at IC stage –the number had reduced significantly in the previous quarter from 34 to 24 cases (p1 table dataset). The Head of Fitness to Practise wanted to commend the team for the work that was involved in holding five IC meetings with so much preparation required for these. It was pleasing to report the team had managed this so well and it was highlighted that this was the highest number of cases which GOsC had considered during a quarter.
- d. The number of PCC cases had increased from 18 to 30 and the Head of Fitness to Practise advised this was being monitored as it was a significant increase. The FTP team were aware of the need to progress to hearings as quickly as possible.
- e. When reporting on quarterly stats on 1 April, five cases were scheduled but since then that had increased to nine being scheduled so PCC would be busy in the summer and beyond.
- f. The End-to-End KPI , which is set at 52 weeks, was missed due to one PCC substantive hearing that was third party and involved the police which caused a delay.

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

- a. Council commented on the section 32 case where the registrant voluntarily left the register but had continued to represent himself as an osteopath, and asked if GOsC had done all it could to stop this.

The Director of Fitness to Practise advised that GOsC could not do any more than what was in the provision of section 32. Some registrants had a flagrant disregard for section 32 despite a financial penalty and a criminal record. GOsC had done all it could and continued to send out cease and desist letters.

- b. Council commented on the complex case mix with sexual misconduct, boundaries etc. often being more challenging in osteopathy due to single practices, lack of chaperones etc. It was noted that it was hard for those witnesses who had been the target of sexual misconduct to go through a criminal court process and then have to go through a process with the regulator too. Council asked what GOsC did to support these witnesses to avoid those cases being dropped by witnesses.

The Head of Fitness to Practise advised that there was an independent support service for witnesses and registrants and that this was highlighted by the team as much as possible.

The regulation team had discussed how they could progress complex cases with vulnerable complainants, the challenge being that each case was very

different. The 'tone of voice' training had proved helpful in relation to this area, but it was an ongoing challenge for the team.

- c. The Head of Fitness to Practise did meet regularly with counterparts in other regulators to share experiences.
- d. The Director of Fitness to Practise advised that because GOsC had a small case load, the team needed to be cautious in identifying potential trends. People reported to GOsC and then fell away because they felt the osteopath would take action against them or they felt vulnerable in the community. The team do go back to vulnerable witnesses however, if new witnesses raised similar concerns, to see if they would act in the public interest and re-engage with the complaint. The witnesses are always offered support to come forward and take action.
- e. Council asked if there was any more colour coding could be used in the Fitness to Practise data that showed when a figure was good or bad without translating it.

It was confirmed that dashboard reporting would be covered in the next item.

**Noted: Council noted the report and dataset.**

### **Item 9: New Dashboard Reporting**

22. The item was introduced by the Chief Executive who explained that the executive was looking at ways to streamline information presented to Council through the introduction of new dashboard reporting.

23. Key messages from the paper:

- a. In order to ensure Council was understanding progress against the strategic objectives and the business plan, the executive was seeking to streamline the information presented through the introduction of new dashboard reporting.
- b. The introduction of dashboard reporting would be in two areas:
  - I. Assurance reporting [covering data on matters related to business plan activities, financial, registration, HR]. Some would be additional data reported to Council that is not already.
  - II. Fitness to Practise.
- c. The introduction of the dashboard reporting would significantly reduce the volume of papers presented to Council, although the detail would be available for scrutiny if required.

- d. The draft dashboards were presented to Audit Committee in March 2025 for comment. The attachments to the paper reflected the feedback received.
- e. The Chief Executive advised he would like to use it from July onwards and asked Council for views, gaps and discussion.

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

- a. Some members of Council welcomed the fact that the dashboard provided additional data e.g. HR, it was more accessible and the visuals were easier to understand.
- b. Council asked what the Employee Assistance Programme was.

The Chief Executive advised it was a support service for staff if needed help with financial matters, outside work issues, counselling support etc. It was a small cost to provide a positive benefit for staff.

- c. Some feedback was provided on specific points:
  - i. P5 adding the values on each of the bars would be helpful.
  - ii. P6 employment costs were the bulk of spend so more granularity around that would be useful e.g. salary or anything else.
  - iii. Narrative underneath – a sense of e.g. a rag rating on some statements regarding how concerned the executive was about potential variations against the plan, or a swing too far in one direction.
  - iv. Split operating expenditure and capital expenditure to indicate e.g. spend on website or ad hoc advertising costs.
  - v. P7 bottom graph those due to renew – helpful to try to show the estimated versus actuals. Consider whether looking at it annually might allow comparisons to see if anything bucking the normal trend.
  - vi. P8 third bullet – understand role in registration was that statement good or bad or indifferent.
- d. Some members of Council felt that whilst the high-level dashboard was welcome, as it included some gaps that were not being monitored through the business plan, there needed to be sufficient granularity for Council to scrutinise things in more detail where necessary and were therefore concerned about losing the granular data.

- e. It was suggested that the absence of SMART strategic objectives and milestones of what needed to achieve by when it was hard to know if GOsC was being effective in what it was doing.
- f. Council suggested caution was needed when making significant changes before the outcome of the Board Effectiveness Review.
- g. The Chair commented that the graphs and pie charts helped to create a sense of what was going on but asked how Council would see the link between strategic objectives and whether they were being successfully delivered.

The Business Plan dashboard looked quite thin so more granularity around business plan reporting would be helpful, otherwise it was very high level and would not necessarily show areas which needed to be addressed.

- h. The discussion led to Council considering that it would need both the dashboard and the detail.
- i. The Director of Fitness to Practise advised that a deep dive report on Fitness to Practise data went to each November Council and asked Council to consider if that was sufficient in terms of reporting detail or if it needed more detail on a regular basis than the dashboard would provide.
- j. The Chief Executive responded that the detailed points from the Chair of Audit Committee (24c) were helpful and would address those.
- k. The Chief Executive asked Council to consider what information was needed to be confident that the day-to-day operation was working effectively and what information it needed to ensure that the executive was delivering against the strategy. The theory of change work played into the latter point and the dashboard was intended to be the assurance on the first point.
- l. The business plan report would continue as a working document for SMT. None of the information Council received at present would stop it would be available if Council needed to see it for scrutiny reasons.
- m. The Chief Executive advised it had been heard from previous and current iterations of Council that shorter and fewer papers would be welcomed. This had been discussed at Audit Committee in response to comments that the papers were overwhelming.
- n. It was suggested that looking at the reporting from the view point of how Council gets the assurance e.g. that the executive was focusing on the right things. This would read across to risk and the delivery of the statutory responsibilities A timeline for activities rather than a list would also be helpful.

- o. The Chair summarised that there was value to the short version but not to the expense of the detail. It was suggested that Council look at the outcome of the Board Effectiveness Review and the Scheme of Delegation and make some more concrete decisions in the Autumn but in the meantime keep both.
- p. The Chief Executive advised that the executive would continue with the previous form of reporting rather than duplicate work so would pause this for July meeting and then discuss after the Board Effectiveness Review report how Council wishes to take this forward.
- q. Council noted that the Chief Executive needed a clear steer from Council of what it was looking for collectively and perhaps there needed to be a clear way of articulating the plan for the delivery of the strategic objectives.

**Agreed: Council agreed it would consider how it sought assurance after the Board Effectiveness Review report had been received and digested and the Chief Executive advised that in the meantime the previous form of report would be used to avoid duplication.**

**Comfort break 1415-1430**

### **Item 10: Health and Disability Guidance**

25. The Head of Policy and Education introduced the item which was updated guidance for Osteopathic Education Providers, applicants and students on Students studying osteopathy with a disability or health condition.

26. The key messages and following points were highlighted:

- a. The paper reported on the results of the consultation on the updated guidance which was reported to the Policy and Education Committee at its March 2025 meeting (Annex A):
  - I. Studying osteopathy with a disability or health conditions: guidance for applicants and students
  - II. Students with a disability or health condition: Guidance for Osteopathic Educational Providers
  - III. Easy Read versions of each.
- b. Post consultation changes were shown in red in the annexes B and C.
- c. Agreement was sought from Council for publication of the guidance documents.
- d. Updated versions of the Easy Read versions were being developed as a result of feedback from the Policy and Education Committee.

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

- a. Policy and Education Committee were positive around the guidance and had provided some feedback on the easy read versions which maybe oversimplified things and the pictures were not accurate.

The Head of Policy and Education advised these versions were being edited.

- b. Council asked if the easy read approach was something that would be used in the future and if there were the resources to do that.

The Head of Policy and Education advised it was being trialled on this because workshops with neurodiverse students had highlighted they had known that the guidance was there but it was hard to engage with. They needed something that summed it up in one easy read.

- c. The Chair of Policy and Education Committee commended the work that had been done on the guidance for education providers and hoped they would engage with it and use it.

**Noted: Council noted the outcome of the consultation on updated guidance:**

- **Studying osteopathy with a disability or health conditions: guidance for applicants and students**
- **Students with a disability or health condition: Guidance for Osteopathic Educational Providers**

**Noted: Council noted the publication and implementation plans and the updated Equality Impact Assessment.**

**Agreed: Council agreed to publish the guidance documents.**

### **Item 11: Registration Report**

28. The Head of Registration introduced the report which provided an update on registration activity covering the six-month period from 1 October 2024 to 31 March 2025.

29. The key messages and following points were highlighted:

- a. At the end of March 2025 there were 5,596 osteopaths on the Register, representing a slight growth this year.
- b. The number of non-practising registrants stood at 187 at the end of March 2025.

- c. Ten return to practise assessments were completed in the reporting period. Four registration assessments, connected to internationally qualified applicants, were completed.
- d. Paragraph 6 provided a comparison of age categories. There was an increased number of registered osteopaths in the 51-60 bracket.

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

- a. Council asked whether sensitivity analysis was included when the Chief Executive presented the forward projection of fee income noting how difficult it was to predict what might happen due to external factors e.g. economic environment, the challenges that institutions face etc.

The Chief Executive responded that forecasts and projections were informed by all key data sources including external factors.

- b. Council asked if the Head of Registration had any thoughts about new registrants and patterns.

Head of Registration advised the team had noticed they were receiving more requests from graduates who had chosen not to register, asking GOsC to write letters to overseas regulators to support their career in osteopathy in other countries.

The Head of Policy and Education advised that the data on osteopathic student numbers and graduates was available if Council wanted to see it.

- c. Council suggested that the dashboard discipline would be helpful i.e. to agree a specific timeframe i.e. a multi-year view or an in-year comparison.
- d. NCOR had several projects in the pipeline regarding the register, one looking at whether students were intending to remain in the UK or move overseas and another that would look at predicted changes overall in the profession.

**Noted: Council noted the content of the report.**

### **Item 12 Unconfirmed Policy and Education Committee minutes, March 2025:**

31. The Chair of Policy and Education Committee introduced the minutes and gave a brief summary of the key discussions.

- a. It was noted that Debra Towse needed to be added to attendance list.

**Noted: Council noted the Unconfirmed Policy and Education Committee minutes, March 2025**

**Item 13: Any other business**

32. There was no other business.

**Item 14: Questions from observers**

33. There were no questions from observers.

**Date of the next meeting: Tuesday 15 July 2025**

**Meeting closed at 1441 followed by 15 minutes Council reflection time.**