

The General Osteopathic Council Response to the First Section 60 Order

22 February 2008

Q1: Do you support having, as a main objective for all the regulators, a provision giving greater emphasis to the importance of public protection?

The General Osteopathic Council (GOsC) has, since its inception, placed patient protection at the centre of all its activities. It has done so through setting high standards of practice for osteopaths and by operating efficient disciplinary procedures. Against that backdrop the GOsC is supportive of the proposed main objective for regulators and accepts that the revised wording may offer added reassurance to the public that regulators regard patient safety as paramount.

Q2 Do you agree that these standard duties will improve the co-operation and co-ordination between professional regulators and key stakeholders?

Yes. The GOsC supports measures that will improve the cooperation and coordination between professional regulators and key stakeholders. The GOsC's well developed relationship with the existing eight Osteopathic Educational Institutions facilitates continual enhancement of training standards, with proper regard for the interests of registrants (including prospective registrants).

The growing use of private healthcare to meet public health (NHS) demands will require regulatory structures that link both sectors to ensure effective protection of patients. The new standard duties should aim to clarify for both service providers and service users the agencies responsible for regulation in the many varied settings in which health care is delivered.

Q3: Do you agree that Parliament should play an enhanced role in relation to the accountability of regulatory bodies, facilitated by improved arrangements for notification by the bodies of information relating to their past and future activities?

The GOsC supports the principle that professional regulators must be independent in their actions, and equally importantly, be seen to be independent.

1. The GOsC supports the proposal that it should report to Parliament on an annual basis. However, we would like to make the following observations:
 - a. In relation to the statistical report on efficiency and effectiveness of arrangements surrounding Fitness to Practise, it is particularly important that regulators provide information in a style, which is consistent, to ensure credible analysis/comparison. We would welcome direction on the style in which the information is to be presented.

The fact that there is to be further consultation on the precise nature and content of a strategic plan is welcome. The GOsC is concerned to ensure that

the requirements in this area will not involve work over and above that already devoted to drawing up a strategic plan for the organisation.

Q4: Do you agree with the new, more flexible arrangements for establishing constitutions for regulatory bodies?

Yes. The GOsC supports measures that will have the effect of enhancing public and patient confidence in the impartiality of all its activities. For this reason it supports a move to a fully appointed, smaller Council comprising, as a minimum, equal numbers of osteopaths and lay members. The GOsC also supports the proposal to effect constitutional changes by order, rather than by primary legislation. The inherent flexibility of this approach will not only facilitate amendments required in the short term but any that may be needed in the future.

Q5: Do you agree with adding appearance on a barred list to the grounds for which a health professional's fitness to practise may be considered impaired?

Yes. The GOsC agrees that the appearance on a barred list should be grounds on which a health professional's fitness to practice could be considered impaired. However, we seek assurance that the information used to make the barring decision would be available to the GOsC's Fitness to Practise panel.

Q6: Do you agree with the strategy for standardising the order and rule making powers of the regulators, and with the move towards giving them greater flexibility over internal process issues while increasing Parliamentary scrutiny of outcomes?

Yes, in principle. The greater autonomy afforded to regulators in dealing with process issues is welcome. However the effect of this would be negated if there were undue delays in receiving Privy Council approval for rules and regulations. The GOsC supports the proposal that Privy Council orders to effect changes to governance structures or where the rights of individual practitioners are at stake, should be made by statutory instrument, as now.

Q7: Do you agree that all regulators of health care professionals should be under a legal duty to maintain registers of the private interests of their Council Members?

The GOsC welcomes this move as it formalises an approach which we already follow. Our Council Members and members co-opted to our Committees must declare, in writing, to the Registrar, any professional (including any significant current association with any Osteopathic Educational Institution), personal or business interests, which may, or might be seen to, conflict with their responsibilities as Council Members.

Q8: Do you agree that regulators should have the option of engaging other bodies to assist them with their appointments functions?

Yes.

Amendments to the Osteopaths Act 1993

Q11: Do you agree that these UK trained osteopaths who have been working overseas should have their earlier qualifications recognised when they return to the UK, provided they apply within the stated time limits?

The GOsC welcomes the amendment to Section 3 (Clause 2) enabling individuals who were abroad during the transition period, to apply to be considered for registration once the S60 order is implemented. However the GOsC questions the need for 2(b) (iii). The three year period suggested appears arbitrary as it does not relate to any other time frame within the GOsC's current legislation. EU legislation (**Directive 2005/36/EC on the Recognition of Professional Qualifications**) provides for individuals from EU states to be considered for registration if they have a qualification in osteopathy. For consistency, it would be better to apply the need to have a qualification in osteopathy rather than apply a timeframe.

It should be noted that the GOsC would require any applicant applying under these conditions to demonstrate that s/he is a safe and competent practitioner. This would involve both a written and practical assessment of the applicant's clinical competence.