Declarations of interest: members are reminded that they are required to declare any direct or indirect pecuniary interest, or any non-pecuniary interest, in relation to any matters dealt with at this meeting. In accordance with Standing Orders, the Chair will rule on whether an interest is such as to prevent the member participating in the discussion or determination of the matter.

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<td>1.</td>
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<td>2.</td>
<td>A. Council Minutes of 23 September 2020</td>
<td>To approve</td>
<td>Chair</td>
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<td>B. Matters Arising</td>
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<td>3.a</td>
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<td>Fitness to Practise update</td>
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<td><strong>BREAK 11.15 (15 mins break)</strong></td>
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<td>Budget 2021</td>
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<td>10.</td>
<td>Report from the Chair of the Education Committee (EC) further to its meeting of 18 November 2020</td>
<td>To note and approve</td>
<td>Chair, EC</td>
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<td>Annual report of the Education Committee</td>
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<td>11.</td>
<td>Report from the Chair of the Audit &amp; Risk Committee (ARC) further to its meeting of 9 November 2020</td>
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<td>12.</td>
<td>Report from the Chair of Remuneration &amp; HR Committee further to its meeting of 25 November 2020</td>
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<td>Any Other Business</td>
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<td><strong>Close of meeting: 12.25</strong></td>
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Minutes of the meeting of the General Chiropractic Council on 23 September 2020 by videoconference

Members present
Mary Chapman (Chair of Council)  Ralph Pottie
Roger Dunshea  Carl Stychin
Tom Greenway  Gay Swait
Steven Gould  Phil Yalden
Gareth Lloyd  Fergus Devitt
Sharon Oliver  Keith Walker
Keith Richards  Anne Newsam

Apologies
There were no absences.

In attendance
Nick Jones, Chief Executive and Registrar;  Richard Kavanagh, Business Officer and Project Manager;
Penny Bance, Director of Development;  Eleanor Poole, Director of Fitness to Practise (Maternity Cover);
Joe Omorodion, Director of Corporate Services;  Mary Nguyen, Committee Administrator

Observers
John Witt - Capsticks

1. Apologies and declarations of interest
The Chair opened the meeting by welcoming to the meeting all Council members, observers and the newly appointed Council members – Anne Newsam and Keith Walker - and Eleanor Poole, the Director of Fitness to Practise (Maternity Leave Cover).

No apologies were received.

No declarations of interest were made.

2. Draft minutes of the Council meeting of 25 June 2020 and matters arising

A. Minutes  (CO200923-02)
Council agreed that the minutes were an accurate record of the meeting.

B. Matters arising  (CO200923-02a)
The Chair confirmed matters arising were included in the meeting papers.

3. Chair’s report, July to September 2020
The Chair presented her report of activities since the meeting with Council in June 2020  (CO200923-03).
Council noted the Chair’s report.

4. **Chief Executive and Registrar’s report**

The Chief Executive and Registrar (CER) presented his report (CO200923-04), highlighting the business continuity arrangements that remain in place while staff continued to work from home; the Professional Standards Authority (PSA) Performance Review 2019 of the General Chiropractic Council (GCC), and the implications of European Union exit.

Council was interested in developments on staff working from home after the recent government advice announced on 22 September 2020.

The CER noted a phased return to the workplace was considered when the UK Government encouraged organisations to return to the workplace in late August 2020. The CER drew attention to the revised advice from government indicating a risk of a second wave and that those able to work from home should do so. He noted that the assessment of risk undertaken with the senior team indicated there would be no return to the workplace at this stage. The CER further stated that the risk assessment would continue to be reviewed, taking into account government advice.

Development activities on mental health and resilience had been organised, with support and guidance provided to managers and all staff adjusting to the new working arrangements.

The Chair and CER report drew Council’s attention to the Department of Health and Social Care (DHSC) direction of regulation reform. The CER informed Council that changes to the expected timetable were envisaged, further to a change in approach and also that officials working in the area of regulation reform may be further redeployed to work on Covid-19 activities.

Council noted the CER’s report with no further comment.

5. **Director of Fitness to Practise Report**

The Director of Fitness to Practise (FtP) presented her report (CO200923-05) giving an update on the five areas of operation.

Part A: The Director of FtP highlighted the key data on operational performance for the period from 1 June 2020 to 31 August 2020 and, particularly, some changes made to the Council data set within the FtP dashboard. The Director of FtP reported that to date, the recorded starting point of cases that begin as an enquiry was ‘date of receipt’ of information. Following the feedback received from Council in June 2020 meeting and further scrutiny of that data, the intention henceforth is to record the date the case becomes ready to progress. The effect proposed was to provide a more accurate picture of performance. The Director of FtP confirmed to Council that ‘enquiry stage’ data would be presented at its next meeting.

Council commended the Director of FtP for improving the structure of the FtP dashboard, therefore presenting quantifiable data that better expresses performance.

Council commented on the resource implications of dealing with potential complaints not resulting in referral to Investigating Committee and suggested consideration of a performance metric in that regard.
**Action:** Director of FtP to consider an additional metric in the development of its reporting of performance to Council.

Council queried the increase in time taken to action high-risk cases and sought clarification as to what this may indicate. The Director of FtP acknowledged high-risk cases may take longer to progress due to their complexity. Fortnightly meetings are held between the Investigations Manager and the team to review cases and the Director receives a regular report on all high-profile matters.

Council queried overall performance in arranging Interim Suspension Hearings. The Director of FtP explained that the team relies on a report from an expert to identify and verify any harm involved in a case before referring the matter to an interim hearing. The Director of FtP also confirmed that a review of experts will be undertaken next year to both expand the pool and also to explore how advice could be acquired more quickly.

Council **noted** Part A of the report.

Part B: The Director of FtP confirmed the changes to the General Chiropractic Council’s powers to serve statutory notices electronically via email formally came into effect on 18 July 2020.

Council **noted** Part B of the report.

Part C: The Director of FtP informed Council that the annual appraisal of members of the Regulatory Committee will be concluded by the end of the September 2020 and will identify those who will express an interest to extend their term. A recruitment campaign (agreed by Council at its meeting in June 2020) for regulatory committee members was underway and scheduled for completion by end January 2021.

Council **noted** Part C of the report.

Part D: The Director of FtP updated Council on the progression of the advertising cases lessons learnt recommendations that were a part of the 2020 Business Plan, highlighting the proposal of revised recommendations for approval.

The revised actions would form part of the Business Plan 2021. In particular, the production of a digital toolkit of resources to support appropriate advertising, a review of our social media and advertising guidance and the production of frequently asked questions.

In response to a query from Council as to the outcome of a meeting with the complainants the Director of FtP noted the meeting attended by the GCC was positive and a range of possible actions to discourage unevidenced claims made by chiropractors were discussed.

Council **noted** Part D of the report, **recognised** that the original lessons learnt recommendations had been advanced as far as possible and **agreed** the actions proposed be taken forward as part of the GCC Business plan 2021.

Part E: The Director of FtP presented a policy for dealing with ‘whistleblowing’ concerns, noting that chiropractic associations’ stakeholders had been asked to provide feedback with some improvements incorporated.

Council asked that consideration be given to a change to the policy name as ‘whistleblowing’ as a term has somewhat negative connotations.
**Action:** The Director of FtP agreed to consider the proposal.

Council highlighted the statement in the policy, point 4.4 required amendment and suggested that educators be included in the statement.

**Action:** The Director of FtP agreed to review point 4.4 on the policy on handling whistleblowing concerns prior to its implementation.

Council noted Part E of the report.

### 6. Finance Update 2020

The Director of Corporate Services presented the finance update report (CO200923-06).

**Performance in the period to 1 January – 31 August 2020**

The Director of Corporate Services noted that at the end of August 2020 a surplus of £145k was realised compared with a budgeted surplus of £43k year-to-date, exceeding the full year forecast of £28k. It was noted the large variance was due to a combination of a larger than expected increase in registrant fee income of £26k, efficiency savings of £10k and expenditure not incurred (but expected to be) in the period of £66k. The Director of Corporate Services noted the budgeted expenditure within the Fitness to Practise area (relating to costs of Investigating Committee and the Professional Conduct Committee (PCC) hearings) and other cost centres was expected to be utilised by the end of this financial year and as such was a timing issue rather than a saving.

Council sought confirmation on expectations as to financial performance at the year-end. The Director of FtP informed Council that much work had been undertaken on the scheduling of PCC cases and there was confidence that expenditure deferred would be incurred in the final quarter. The Director of Corporate Services assured Members that the focus was on delivering the planned activities and that the forecast surplus of £28k was expected to be realised by year-end.

Council noted that at its forthcoming meeting and as part of its regular review of the management accounts activity the Audit & Risk Committee would explore this matter in further depth.

**Investment Portfolio Performance**

The Director of Corporate Services drew Council’s attention to the negative impact of the pandemic on its investments.

Council noted the report with no further questions.

### 7. Business Plan 2020 Performance Update

The Business Officer and Project Manager (BOPM) presented an update on the Business Plan 2020 (CO200923-07) to Council, noting good progress of projects despite the limitations faced due to Covid-19. The BOPM noted some projects, including regulatory reform, were impacted and as a result delayed for completion.

Council raised concerns as to progress on completing the recommendations made by the Coroner following the inquest on the death of a patient. The BOPM confirmed one of the recommendations was completed – the implementation of
reflection on First Aid knowledge and skills as part of Continuous Professional Development (CPD) requirements for 2019/20. Progress on conducting a review on the use of imaging had been delayed. The BOPM explained that a primary barrier to undertaking the review during the pandemic had been the difficulty of securing the involvement of relevant stakeholders. The BOPM informed Council the review was being progressed.

Council questioned whether the risk rating applied gave sufficient weight to the reputational risk, given delays to progressing the imaging work.

**Action:**

**a)** The Executive to report progress on the imaging project more specifically at its meeting in December 2020.

**b)** The risk register to be reviewed.

Council queried the update on supporting and promoting inter-professional learning and working between GCC and General Osteopathic Council (GOCs). The Director of Development noted two activities being undertaken jointly on patient involvement in education and inter-professional learning.

Council suggested that a report should be provided on the benefits that have been realised as part of the projects completed in 2020, at the meeting of the Council in March 2021.

Action: The Executive to report the benefits realised of projects in the business performance update at the meeting of the Council in March 2021.

Council **noted** the report with no further comment.


The CER presented the first draft of the business plan for 2021 (CO200923-08) to Council, noting the plan for the third year of the five-year strategy with proposed projects supporting change; an increase in knowledge; improvements in the ability to carry out core functions and in meeting regulatory duties more effectively.

The CER highlighted the relationship between the strategic objectives (supporting the GCC strategic aims) and the proposed activities.

Council raised several points to inform the development of the draft of the Business Plan 2021 in advance of its consideration of the final draft at its meeting in December 2020. In particular Council asked whether the various activities with a research element could be presented in a more integrated way; that some activities might be better allocated to other strategic objectives; and that more focus is put to measuring the outcomes, effectiveness and success of projects.

Council also noted the importance of seeing the final draft plan alongside the proposed GCC budget 2021. It suggested that, given the uncertainty of projections relating to income in 2021, decision-making could be aided by the Executive’s consideration of a priority order for projects in the plan.

The CER commented on the inherent difficulties and costs of evaluating the impact of some projects, particularly where cause and effect is difficult to measure. The CER also suggested that prioritisation of activities is a shared endeavour with Council.

**Action:** The Executive to reflect on comments and bring forward the final draft business plan to the meeting of Council in December 2020.
Council noted the report.

9. **Review of Equality & Diversity & Inclusion Arrangements**

The Director of Development presented proposals on necessary (CO200923-09) revisions to the GCC Equality, Diversity and Inclusion Policy (ED&I) and explained that those revisions would need to consider actions from the perspective of the GCC as both a regulator to the profession, and as employer.

Council welcomed the report and advised the action plan would need to give a clear sense of ownership across the organisation, including Council, and ensure regular communication on the progress of the actions.

Council emphasised that research be undertaken on the activities of other professional health and care regulators, noting any best practice and expertise that could be extracted.

The Director of Development acknowledged the feedback received from Council and welcomed Council Members involvement in supporting next steps. Keith Richards, Carl Stychin and Fergus Devitt offered their support.

Council agreed the proposal.

10. **Committee Chair update**

**Education Committee**

The Chair of the Education Committee presented her report to Council (CO200923-10), updating on developments since the Council meeting in June 2020.

Council noted the report with no comment.

11. **Any other business**

The Chair thanked all Council members and GCC staff for their participation and closed the meeting.

Date of next meeting: 10 December 2020
**Agenda Item:** CO201210-02a  
**Subject:** Matters Arising from 23 September 2020  
**Presenter:** Mary Chapman, Chair GCC  
**Date:** 10 December 2020

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<tr>
<td>CO200923-05</td>
<td><strong>FTP Report</strong>&lt;br&gt;Regarding the suggestion to add a performance metric in its reporting to Council. &lt;br&gt;&lt;br&gt;<strong>Action:</strong> The Director of FTP agreed to consider an additional metric in the development of its reporting of performance to Council.</td>
<td>Completed – Agenda Item 5 (CO201210-05)</td>
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<td>CO200923-07</td>
<td><strong>Business Plan 2020 Performance Update</strong>&lt;br&gt;Following queries from Council on further updates from imaging project, Executive advised Council an update would be presented at its meeting in December 2020.</td>
<td>Completed – Update in Council Private Session Item 4 (CC201210-04)</td>
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<tr>
<td>CO200923-07</td>
<td><strong>Business Plan 2020 Performance Update</strong>&lt;br&gt;Regarding the suggestion to report should be provided on the benefits that have been realised as part of the projects completed in 2020, at the meeting of the Council in March 2021. &lt;br&gt;&lt;br&gt;<strong>Action:</strong> The Executive to report the benefits realised of projects in the business performance update at the meeting of the Council in March 2021</td>
<td>Incomplete – Report to be provided in March 2021</td>
</tr>
<tr>
<td>CO200923-08</td>
<td><strong>GCC Strategy 2019-2023: Business Plan 2021 (First Draft)</strong>&lt;br&gt;Further to feedback, the Executive to reflect on comments and bring forward the final draft business plan to the meeting of Council in December 2020</td>
<td>Completed – Agenda Item 8 (CO201210-08)</td>
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Council Meetings

1. At our last meeting of Council and in the Development Day we identified the need to think a little differently about how we operate as a Council, in the light of continuing COVID-related restrictions. Whilst we continue to meet, albeit virtually, and can carry out our duties well, we agreed that some of the more informal aspects from meeting in person were diminished. We agreed to get together as Council Members in between the formal quarterly meetings of Council.

2. The additional meeting in November provided the opportunity to develop a deeper understanding of our business plan priorities for 2021, and to hear about early findings from two areas of research on the experience of registrants and patients. The final draft of the 2021 business plan, an important feature of today’s agenda, has benefited from that review and insights gained from Members. The discussion has helped to refine the ambitions and expected outcomes of work to further the development of professionalism in chiropractic.

3. The intention is to continue with these short meetings at least until the end of the requirement to work from home. This will be reviewed, together with other changes to working practices, as we consider the most effective arrangements for the future.

Regulatory Reform

4. As I emphasised at our last meeting, the GCC has real challenges in fulfilling its current duties effectively, based on outdated legislation and rules. The changes anticipated as part of the Regulatory Reform programme are the opportunity to remedy that situation. With news emerging of uncertain progress on the government’s reform agenda, Council agreed that I should write a letter to the Minister responsible for professional and healthcare regulation. I wrote to lodge
our concerns regarding the continuing risks in the absence of legislative change. We have yet to receive a response to the letter issued in October.

5. On 24 November 2020 the Secretary of State for Health and Social Care announced a “bureaucracy-busting” drive, on behalf of the NHS, to reduce red tape and ensure that positive changes seen during the pandemic are maintained. Within the report published at the same time, there is a brief but important section on professional regulation that references the improvements expected from reform with which we have become familiar. Perhaps more significantly, there is also a commitment to ‘review the number of regulators’ as ‘having nine separate professional regulators is inefficient and confusing for the public. We therefore want to work with the public, the professions and the regulators to understand how we could simplify the regulatory landscape.’

6. We understand that officials are not advanced in their thinking and have confirmed that currently there is no preferred outcome, nor indeed process for undertaking the review. Members will be aware that the government’s consultation in 2018 Promoting professionalism; reforming regulation raised the possibility of consolidation or merger of the existing regulatory bodies. Its response last year noted the issue remained under consideration, albeit there was a sense it had lost momentum. This announcement places the matter back on the table. When there are material developments I will report these to Council.

Governance matters

7. I wrote to Members in October with initial proposals as regards succession planning for Council membership. Next year there are retirements and terms of office ending, including my own. I have included a separate paper setting out specific proposals for Council’s consideration.

8. I have now completed appraisals for half of Council Members, and am grateful for the commitment shown to making these constructive discussions. As planned, all Members eligible to seek re-appointment have been appraised which means we are well-placed when considering the potential for reappointments to the Council.

Engagements

- **28 September: with Rachel Parmley, HR Consultant:** to review the GCC Learning and Development strategy and plan
- **30 September: with Annie Newsam, GCC Council Member** for an induction meeting
- **7 October: with Keith Walker, GCC Council Member** for an induction meeting
• 3 November and 5 November: Attended the Professional Standard Authority (PSA) Symposium on ‘Regulation Reset’: Session 1 on regulating and supporting the current workforce. Session 3 on equality, diversity and inclusion issues in regulation.

• 4 November: Chaired an extra meeting with Council Members: Explored areas of research relating to registrants, and patients’ perceptions of chiropractic.

• 25 November: Attended a meeting of the GCC Remuneration & Human Resources (HR) Committee

Mary Chapman,
Chair, GCC
Introduction

1. This paper follows up on issues raised in the October briefing to Council members covering succession planning, re-appointments and appointments to Council. It invites Council to consider formally a proposed approach to addressing the departures and completion of terms of appointment due to take place during 2021.

The Challenge

2. It appears that, in the past, members of Council were appointed in groups, presumably to achieve the most cost-efficient recruitment processes. The consequence of that has been the bunching of terms of appointment.

3. The GCC will see eight of its members complete either their first or second term of office next year. Tom Greenway will leave Council on 31st December this year. Gay Swait, Gareth Lloyd and Roger Dunshea (Chair of the Audit and Risk Committee) will leave on 31st March 2021. Keith Richards, Ralph Pottie, Sharon Oliver (Chair of the Education Committee) and Mary Chapman (Chair of Council) will complete their first term of office on 31st July 2021.

4. While Council has some flexibility to run with slightly fewer than the 14 members specified in our rules, the majority of those potential vacancies will need to be filled.

Regulatory Reform – impact on Council composition

5. The part of the regulatory reform agenda which relates to governance is subject to similar delays as those affecting fitness to practice.

6. Council discussed this aspect of reform at its meeting in December 2019. At that time, Council was broadly positive about the draft changes proposed by DHSC.
These included a relaxation of the very specific rules on the size and composition of Council memberships and the introduction of a unitary board model, where executive directors would also become members. There was a nudge towards smaller Councils, with a new maximum rather than required membership of 14. This was welcomed by Council as the GCC’s current size is disproportionate to the number of staff and carries a significant governance cost. There was also a move towards a greater proportion of lay rather than registrant members and specification that the Chair must be lay.

7. Recent announcements from Government indicate the possibility of more sweeping changes to governance, raising again the question of reducing the number of regulators.

8. In all, the future is uncertain.

9. In these circumstances it would seem sensible to plan in a way that gives the GCC some flexibility to manoeuvre once the policy decisions are clearer. It is proposed that Council should take advantage of the confirmation from the Privy Council that it would not be unreasonable to carry a few vacancies against the prescribed total membership, provided that we are able to demonstrate that we can fulfil all our Council and committee responsibilities, give four nation representation and not deviate too far from the lay/registrant balance. It would be easier to adjust the numbers upwards, if it proves necessary, than to adjust them downwards in the face of major change. It is envisaged that this course of action could result in a Council of 11 or 12 people.

**Skills and Experience**

10. Every governing body should seek to have a blend of the skills needed to fulfil its duties as a Board. There are some competencies which are required for all Council members. Members also bring individual experience drawn from their other roles. This is particularly vital in a professional regulator where (as a generalisation) the registrant members bring a deep understanding of the profession which is complemented by the deeper functional and governance experience of the lay members.

11. In addition, it is helpful to combine in a Board those with wisdom born of their experience of the organisation and those, more recently appointed, who bring a fresh perspective to the debates. Ideally there will be space for individuals who, with development, will be able to take on committee chairing roles. These points are important in considering whether reappointment of people completing their first term of office is desirable and indeed preferable to going out to recruit new members.
Potential Reappointments

12. Taking into consideration the four members departing at the end of their second term and the two members who have only recently joined Council, a decision not to consider the reappointment of the four members completing their first term would leave the Council with only four members with experience of the GCC. The risks associated with this significant drop in experience seem untenable. Moreover, it would create an unreasonable burden on the executive team to support the recruitment of 6-8 new members.

13. For these reasons, it is proposed that Council should agree that reappointments for three members of Council, without open competition, should be considered before seeking to make new appointments. The question of the Chair will be considered separately and is not covered in this paper.

14. This proposal is made in the knowledge that all three members of Council have demonstrated unquestionable commitment to public service and to the GCC during their first period of office. Appraisals completed for 2020 have had positive outcomes. All three have indicated their interest in standing for a second term.

15. If the Council agrees this proposal, the procedure for reappointments would be applied. See Annex A. The Chair would set up a re-appointments committee formed from members who are in their second term of office.

New Appointments

16. Even allowing for reappointments, the GCC will need to consider recruiting to fill at least some of the vacancies that will be created at the end of the first quarter. It is proposed that, unless the regulatory landscape becomes clearer in the early part of the new year, recruitment would be for two members, one lay and one registrant.

17. While it would be desirable to wait until there is more chance of face-to-face interviewing, that would put the start of recruitment into the second quarter at best. The Council would have ten members for its June meeting. Our experience of virtual recruitment has been quite positive, resulting in successful appointments in 2020. It is proposed to commence the recruitment round for new members in March, with the hope that candidates might be seen personally but with the expectation that new appointments could be made, virtually if necessary, in time for the June meeting.

18. In preparation for the recruitment process, the Competency Framework has been updated with input from Council members. In the main, Council members felt that
the competencies reviewed last year were still relevant. The revised version is attached at Annex B. The changes strengthen the requirements around skills for governance and understanding of the GCC’s work and context. They increase the focus on Council’s role in holding the Executive to account. They emphasise the importance of team working in the committee context.

19. Council is asked to approve the revised Competency Framework as the basis for recruitment and selection during the next 3 years or up to any earlier date when review is deemed necessary.

20. There are two other matters relevant to the requirements for new appointments. The first is the matter of diversity: ethnic diversity and gender balance. The Council has committed to increase its focus on issues of diversity and inclusion and this applies to Council membership as much as any other part of GCC’s work. The gender balance of the Council is currently weighted 10/4 towards men. There is one member from an ethnic minority background. It must be a priority to encourage applications from candidates in these two groups. The executive team will be asked to consider how best this might be done.

21. The second issue concerns the skills mix within Council. Based on the most up to date skills assessments, the GCC is fortunate in having reasonable coverage of the specific functional skills that it has identified as relevant. Where that is much less the case is in Financial Management and Technology. This situation will be aggravated by the departure of Roger Dunshea who is a qualified accountant and long-term Chair of the Audit Committee. While this need was partially addressed during this year’s recruitment round, it remains a weakness. The requirement for skills in this area will be included in the candidate specification.

22. A further issue for consideration is the desirability of increasing the number of lay Council members with experience in the healthcare sector. This would enrich the Council’s discussions, particularly around the objective to develop professionalism and consideration of the research agenda.

Action

Council is asked to:

a) Agree that reappointments for three named members of Council should be considered without open competition.
b) Invite the Chair to convene a Reappointments Committee.
c) Approve the revised competency framework as the basis for recruitment and selection for up to three years.
d) Agree that, for each recruitment round, any specific skills, experience and diversity issues at the time will be addressed in the candidate specification.
e) Agree that the GCC will commence recruitment in March to fill 1 lay and 1 registrant vacancy.
Re-appointments to the General Chiropractic Council – Procedure Note

For Information

Introduction

1. This procedure note replaces the procedure note agreed by Council in September 2015.

2. Its basis is the Professional Standards Authority (PSA) Good practice in making council appointments: Principles, guidance and the scrutiny process for regulators making appointments which are subject to section 25C scrutiny (March 2019). [As such, a consequential amendment to the current Terms of Reference of the GCC Reappointments Committee, as set out in the GCC Governance Manual, must be noted. Those terms of reference require the involvement of a Chair of another professional health and care regulatory body in the reappointment of Chair process. The PSA expressly do not require this regarding it as unnecessary.]

3. The GCC’s role is to assist the Privy Council to make the appointments. The GCC is responsible for managing the processes to identify suitable candidates and recommending these candidates to the Privy Council for appointment. This includes recommending the Privy Council reappoint or extend the term of existing council members, as well as to suspend or remove them when necessary.

4. The PSA sets out the Principles of a good appointments process

| Merit | All selection decisions must be based on evidence of candidates’ merit. This means appointing and reappointing individuals whose skills and experience have been judged to best meet the needs of the regulator and, where appropriate, recommending the removal or suspension of individuals where there is a strong case for doing so. |
| | Fairness | Processes used in appointments must be objective, impartial and applied consistently. Processes must promote equality and be free from discrimination, harassment and victimisation. |
| | Transparency and openness | Public appointments must be advertised in a way that is designed to attract a strong and diverse field of suitable candidates. Information about posts and appointment processes must be publicly available. The reasons for any recommendations made to the Privy Council arising from these processes must be clear. |
Inspiring confidence

The regulator’s processes and systems must inspire confidence that it regulates in the public interest and take into account external perspectives. All processes must meet the requirements of the regulator’s legislative framework.

5. The GCC must have regard to the Equality Act 2010 and its Public Sector Equality Duty (PSED) in its appointments processes. The PSED requires public authorities and organisations fulfilling public functions to have due regard to the need to:

- eliminate unlawful discrimination, harassment, and victimisation and other conduct prohibited by the Equality Act 2010
- advance equality of opportunity between people who share a protected characteristic and people who do not
- foster good relations between people who share a relevant protected characteristic and those who do not.

6. The PSA expects the GCC to be able to demonstrate it has had due regard to equality obligations through both the planning and implementation of an appointment process.

7. Finally, the GCC must ensure all Members and those recommended for appointment subscribe to the GCC code of conduct and confirm that they understand the standards of probity required by public appointees outlined in the ‘Seven Principles of Public Life.’

Council Chair and Members

8. Where a Council Chair or a Member applies for re-appointment, Council will re-evaluate the balance of skills, knowledge and experience required by the Council.

9. Council has delegated authority to the Chair of Council to:

- Decide who will sit on the Re-appointments Committee for a particular re-appointment including, at their discretion, an independent member. If the Chair of Council is applying for re-appointment, the Chair of the Audit Committee will appoint the panel and be responsible for ensuring the process meets the principles of a good appointments process;

- Be responsible for identifying and nominating for the approval of the Privy Council the candidate or candidates selected by the Re-appointments Committee for re-appointment. The Chair of the Audit Committee will notify the Privy Council of the Re-appointments Committee’s recommendation in respect of Chair of Council.
Re-appointments Committee

10. The primary role of the Re-appointments Committee is to assess candidates against the agreed criteria, to ensure the correct process is followed and to decide whether or not the candidate for re-appointment should be presented for re-appointment.

11. In undertaking its role, the Re-appointments Committee will be supported by the Chief Executive and Registrar (CER) or their nominee. They will play no part in decision-making but will lead on the process and organisation and drafting the reports to the PSA and Privy Council under the direction of the Chair of the Re-appointment Committee.

Conflict of Interest

12. Where a potential conflict of interest arises, whether actual or perceived, then it will be fully explored with the candidate by the Re-appointments Committee. The panel will agree the most appropriate course of action and discuss with the candidate. The panel may consider the conflict sufficient to make the candidate unsuitable for re-appointment or make it a condition of appointment that the individual gives up the conflicted activity. Alternatively, the Re-appointments Committee may consider the conflict not relevant to the position or one that can be managed and poses no risk. The Re-appointments Committee will ensure that the candidate recognises the potential impact of the matter.

Criteria

13. Any Council Member who is eligible for re-appointment must not take part in consideration of their re-appointment.

14. There is no automatic right to re-appointment by the Privy Council, and all re-appointments will be considered on merit. In order to be considered for re-appointment, the Chair of Council or Council Member will need to have demonstrated that they have the skills and experience that the Council will need in the future. This is important as the needs of the Council may change over time. Evidence of satisfactory performance and attendance will also be required. A current serving Council Member is eligible for re-appointment as long as they have not served for more than an aggregate of eight years.

Council Re-appointments process – General

15. The Re-appointments Committee will be provided with a guide of the process to be followed.

16. Council Members (and the Chair of Council if applicable) eligible for re-appointment will be asked to submit an expression of interest which:
Annex A: CO201210-03a - Council Membership 2021

- Addresses how their skills and experience meet the competencies expected of the role.

- Confirms their wish to be considered for re-appointment and that they remain able and willing to commit to the required time commitment during their term of re-appointment; and

- completes a performance appraisal a maximum of six months prior to the date of consideration for re-appointment. The appraisal will include consideration of how the Council Member meets the desired competencies currently required and a discussion of the Council Member’s skills and experience.

17. The CER will prepare a report on each Member expressing an interest for consideration by the Committee. This report will include information on attendance; whether any complaints have been received about performance or conduct; any conflicts of interest further to the Member’s most recent submission on interests; and comments and observations as to the Member’s performance as observed.

18. An interview will be undertaken. The Re-appointments Committee will advise the CER of the questions to be asked such that an interview pack can be produced. During the interview the Re-appointments Committee will use the interview assessment sheets to make notes on each candidate’s responses to questions.

19. After interview the Re-appointments Committee Chair will complete an interview record for each candidate which incorporates the collective view of all panel members.

**Reporting**

20. Following interview, the Re-appointments Committee will prepare a report which will include:

- confirmation that each Council Member eligible for reappointment remains able and willing to commit the required time commitments during a further period of office;

- an explanation of the Council Member’s performance, in particular how they have demonstrated the required competencies to an acceptable level during their term of appointment such that the appointment has been made on merit; and,

- whether the Council Member will be able to assist the GCC in meeting its anticipated future needs during a further period of appointment.

21. In respect of re-appointments to Council, the Chair of Council write to the Privy Council to recommend the re-appointment of Council members. The Chair of Council will oversee the submission to the PSA with information about the process for re-appointment.
22. The PSA, having considered the information, will advise the Privy Council on whether it can have confidence in the process used to select the recommended candidates.

23. Once the Privy Council has made a decision it will notify the GCC. The successful Council member(s) will have their re-appointment confirmed by the Privy Council.

24. The process for the re-appointment of Council Chair will be led by the Chair of the Audit Committee who will collate and assess evidence in the same way as the Council Member’s reappointment process.

December 2021
Competencies for Members of Council

All Council members should meet the following competencies. Applicants must set out how they meet these essential requirements:

1. Public interest and engagement
   • demonstrates an understanding of and commitment to high personal standards as set out in the Nolan principles of public life
   • commitment to protection of the public and patients
   • commitment to engagement with the patients and the public
   • demonstrates commitment to the GCC's statutory duty under the Equality Act 2010

2. Strategic direction
   • understands the functions of governance and how they apply to the statutory duties of the GCC
   • demonstrates an awareness of the chiropractic profession and the healthcare context in which it operates
   • able to set the strategic direction of an organisation, plan its delivery, monitor performance effectively, provide critical support and challenge constructively
   • exercises sound judgement

3. Analytical thinking and judgement
   • thinks clearly, analytically and creatively
   • sees the big picture as well as the detail
   • makes sense of complexity whilst being comfortable working with uncertainty
   • weighs up other people’s ideas and has own ideas
   • reviews objectively own and organisation’s performance and acts on the results

4. Team working
   • builds constructive relationships and works effectively in a team
   • accepts and promotes all decisions of the Council
   • understands and respects the different roles of the non-executive and executive functions
   • takes on work and responsibility equally with others in various committee roles

5. Holding to account
   • accepts own accountability while holding the executive and other members to account
   • probes and challenges effectively
   • understands means by which accountability is given and exerted
   • scrutinises performance, provides effective oversight and manages risks

6. Effective influencing and communication
   • well-prepared for discussion and decision
   • respects the views of others
   • able to influence and persuade others
   • debates cogently
   • uses evidence to support views, welcomes change to achieve improvement
Summary

This regular report summarises key developments in the period since the last Council last met, on 23 September 2020.

Action required: For information.

1. The GCC staff team continues to work from home. We have paused consideration of returning to the workplace as the uncertainty placed upon us by restrictions continue. The GCC office is in a tier two area, currently, albeit for all tiers the expectation is that if we can work from home we should. It is unlikely that restrictions will change significantly in the new year, and as such I have informed staff that our working arrangements will be unchanged until we can see a clearer path in the light of both transmission rates and progress with a vaccine.

2. I remind members, the primary concern of staff in the GCC as to any sort of routine and regular return to the office is (in common with staff in many workplaces in London) the risks of travel. All staff are reliant on public transport where distancing will continue to be challenging. I see (at least) three issues for us:

   • Firstly, the prolonged period working in this manner raises well-being issues for our staff. We have developed lots of ways to create new ways of working and contact between us, as reported previously. In addition, over the last few weeks we have all attended training on resilience and well-being – which was well-received; and our first ‘inspire and innovate’ session, (a component of our learning and development ambitions) delivered by a guest speaker on ‘resilience in a changing world’, took place on 2 December 2020.

   • Secondly, sustaining the engagement and commitment by staff to our mission. The recent meeting of the HR and Remuneration Committee (elsewhere on the agenda) received a report, including on the results of the recent staff engagement survey. Indications are very positive, and taken together with measures of performance reported to this meeting of Council, the signs are very positive. Equally, workloads are increasing (as measured
objectively) and the requirement for good and effective people skills and management over the next few months cannot be overstated.

- Thirdly, we must develop a strategy and plan for the GCC working model that will evolve over the next period. The advantages of home-working (and virtual working for much of our work with committees and panels) can be built-on; and our evolution will ideally be deliberate and consultative. Organisations are increasingly seeing the office as space for collaboration rather than for ‘administration.’

‘COPOD’

3. Council is aware that I attend monthly meetings of the Chief Executives of Professional Regulatory Bodies (CEORB), an effective platform for sharing information, responding to developments, developing joint positions and so on. Over the last few months productive discussions have been taking place within a sub-set of the regulatory bodies including the GCC. COPOD is a sub-group of the Chief Executives of Healthcare Profession Regulatory Bodies (CEORB) to bring together the Chiropractic, Optical, Pharmacy, Osteopathic and Dental regulatory bodies within a collaboration pod. The aim is to:

- support joint working in the day to day operational and corporate areas
- alleviate pressures within each organisation by unifying solutions where possible
- provide developmental opportunities to lead on collaborative process improvement strategies
- ensure our respective sectors and registrants have an overview of the benefit of our collaboration.

4. The group is committed to exploring the opportunities to drive through efficiencies, which can be realised through financial, resource or time savings – a welcome development.

Professional Standards Authority matters

a) Annual performance review

5. The PSA formally reviews the performance of statutory healthcare regulators annually. Our performance review for 1 April 2019 to 31 March 2020 was published in October 2020.

6. This was the first year of being assessed against the new standards of good regulation (these conflated several of the existing standards and added five new general ones with the total reduced from 24 to 18.

7. The report is positive on the basis the PSA has recognised the improvements made since the previous year’s report. It concluded that the GCC did not meet Standard 3, in relation to equality and diversity, albeit meeting all other Standards. The PSA did not see enough evidence that the GCC properly
considers equality and diversity implications of its initiatives and were not satisfied that the GCC has controls in place to ensure that its processes do not present barriers to people based on protected characteristics.

8. We have developed an action plan for addressing the main areas for development, alongside issues highlighted elsewhere in the report. In particular, and as reported at the last meeting of Council, we alerted Council to our ambitions in developing an Equality, Diversity & Inclusion Strategy, focusing on matters relevant to both our staff and those we regulate. We have started on a significant piece of work as a key component of our delivery ambitions for 2021 (within the proposed business plan for 2021) and recommended for approval at this meeting. We will engage with the profession on equality and diversity to ensure we are an inclusive regulator, such that equality, diversity and inclusion (EDI) is embedded effectively across the organisation; establish an EDI strategy, action plan and annual report; better collection and use of EDI data; engage effectively with our registrants and members of the public/complainants on EDI by holding workshops and online web meetings; carry out staff training; and ensure our recruitment processes are bias free.

9. The first of the workshop sessions with registrants was held recently, and which I attended, and I believe this was a positive and useful experience for all – providing a good base for more consultative work.

10. The full PSA report is here [GCC performance review 2019/20](#).

b) Learning from Covid-19

11. The PSA is undertaking a review of learning for professional regulation from the first phase of the Covid-19 pandemic, reporting in January 2021. It is reviewing the measures taken by regulators during the emergency response (January to July 2020), looking at how key decisions were made, assessing the effectiveness of different approaches, and identifying learning for the future. We made a submission as requested by mid-October 2020, covering in summary:

- new approaches or key decisions that have been most effective in responding to the pandemic;
- the impact of those – positive and negative; with any unintended consequences;
- whether any regulatory gaps have been disclosed by the pandemic;
- and the main learning points for further waves of the virus, other future crises, and future business as usual.

12. The PSA was pleased with our response and reportedly struck by the range and number of actions taken by regulators in response to the pandemic across all functions. Along with the other health and care professional regulators, we have now been invited to submit further information on a few areas of interest (providing coverage of many different areas) to lead to the presentation of illustrative case studies or vignettes which will look more deeply at specific actions, measures or areas of work with some focussed on cross-cutting themes.
13. The GCC has been asked to focus on virtual course monitoring visits and the move to paperless (on FIP and other functions).

14. The PSA has been sensitive as to the impact on workload of the respective regulators, although the extent of requirements subsequent to the initial request is more than expected and we have been advised that the PSA propose to seek comments from stakeholders. In any event we look forward to supporting the PSA and the important objectives foreseen.

**Public sector exit payment cap**

15. The Small Business, Enterprise and Employment Act 2015, as amended by the Enterprise Act 2016 (‘the 2016 Act), provides the power for HM Treasury to make regulations implementing a £95,000 cap on exit payments in the public sector. The cap of £95,000 will apply to the aggregate sum of payments made in consequence of termination of employment.

16. Following consultation, the government has confirmed that for the purposes of the exit payment, the professional healthcare regulatory bodies are in scope and the GCC amongst others is identified as such within the regulations. Further to correspondence, HM Treasury has confirmed the inclusion of the regulators in the schedule, noting it ‘should help provide further confidence to the public and the professions regulated that money spent on exit packages is appropriate and proportionate to other public bodies.’

17. Published Guidance and directions at consultation set out the circumstances and the process for when a mandatory waiver must be used to relax the cap but Council is informed (as employer) that any relaxation outside of the circumstances outlined in the directions can only be done with HM Treasury consent.

**Meetings and engagements (all virtual unless stated otherwise)**

**September 2020**

- 28 September 2020 – with the Chair, met with Rachel Parmley, HR Consultant to discuss the GCC Learning and Development strategy and plan

**October 2020**

- 5 October 2020 – John Barwick, Chief Executive and Registrar, HCPC
- 9 October 2020 – Matthew Redford, CER GOsC for a catch-up (in person)
- 15 October 2020 – Alan Clamp, CEO, PSA
- 19 October 2020 – with the Director of Corporate Services, met with GOsC CER, Matthew Redford
- 20 October 2020 – attended training workshop run by Mind on “Managing Mental Health at Work” with GCC Senior Management (Directors of Development; Corporate Services and Fitness to Practise)
- 21 October 2020 – attended the monthly meeting of CEORB
• 21 October 2020 – Conducted an annual appraisal with David Clarke, PCC Chair
• 22 October 2020 – attended a HR Cross-Regulatory meeting hosted by General Pharmaceutical Council

November 2020

• 3-5 November 2020 – attended Professional Standard Authority (PSA)’s Symposium x3 workshops: Regulating and supporting the current workforce; How should regulation evolve to support the workforce of the future?; Equality, diversity and inclusion issues in regulation
• 9 November 2020 – attended the meeting of the GCC Audit & Risk Committee
• 10 November 2020 – attended a training workshop on Core Management Responsibilities
• 11 November 2020 – attended the annual review meeting of the Test of Competence assessors
• 12 November 2020 – attended a masterclass, as contributor CEO, on Nye Bevan Programme - Wider Systems Leadership facilitated by NHS Cross Sector Leadership Exchange
• 17 November 2020 – with the Director of Development, met with President and CEO of Royal College of Chiropractors
• 18 November 2020 – attended the meeting of the Education Committee
• 19 November 2020 – attended workshop training on “Building Resilience and Mental Wellbeing”
• 23 November 2020 – telephone call with Mark Bennett, Deputy Director of Professional Regulation Branch of Department of Health and Social Care
• 25 November 2020 – attended the meeting of the GCC Remuneration & HR Committee
• 26 November 2020 – attended the monthly meeting of CEORB and later the monthly meeting of COPOD

December 2020

• 2 December 2020 – with all staff attended training session on ‘Resilience for a Changing World’ hosted by Dr Carole Pemberton
• 8 December 2020 – attended a PSA seminar on appointments
• 9 December 2020 – attended a session on Leadership and Resilience facilitated by Leadership Centre
• 9 December 2020 – attended a training session on Cyber Awareness facilitated by Risk Evolves
<table>
<thead>
<tr>
<th><strong>Summary</strong></th>
<th>This paper provides Council with an update on the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part A – Commentary on the Fitness to Practise (FtP) dashboard</td>
<td></td>
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<tr>
<td>Part B – Update on Regulatory Committee member recruitment and appraisal</td>
<td></td>
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<tr>
<td>Part C – Update on Investigating Committee member recruitment and appraisal</td>
<td></td>
</tr>
<tr>
<td><strong>Action</strong></td>
<td>The following action is asked of Council:</td>
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<tr>
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<tr>
<td>Part A – To note</td>
<td></td>
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<tr>
<td>Part B – Approve</td>
<td></td>
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<tr>
<td>Part C – Approve</td>
<td></td>
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<tr>
<td><strong>Recommendations</strong></td>
<td>Council is asked to note this report and approve the proposed reappointments in Part B and appointment in Part C.</td>
</tr>
<tr>
<td><strong>Annexes</strong></td>
<td>Annex A: FtP dashboard</td>
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</table>
Part A: Commentary on FtP dashboard

1. The *dashboard* at Annex A covers the period of operational performance from 1 September 2020 to 30 November 2020.

2. At the September 2020 meeting of Council, we committed to providing data on FtP enquiries which has now been incorporated in the quarterly dataset.

3. We began the last quarter with 26 open enquiries\(^1\), more and older than ideal. The team has worked hard this quarter clearing all aged enquiries, with three of the four currently open enquiries\(^2\) received in this quarter. The median age of open enquiries is three and a half weeks (target of less than 12 weeks)\(^3\). 13 new enquiries were received in the last quarter\(^4\). Only two of these enquiries related to requests for general information or queries. The rest were held at enquiries stage, due to reasons such as a lack of consent to share the complaint with the chiropractor, the chiropractor was unknown, the complainant wanted to be anonymous and four related to matters the GCC could not investigate\(^5\).

4. In the last quarter, the team have resolved 34 enquiries, closing 29 and promoting five into fitness to practise\(^6\). The median time taken to close enquires in the last quarter was 27 weeks (target of 12 weeks). The high figure was due to the age of some of the enquiries\(^7\). Our ‘closure’ median performance will much improve in future now most older enquiries have been cleared.

5. We saw 26 new fitness to practise complaints in the performance period\(^8\), compared to 23 complaints in the same period in 2019. October was the highest month (16 incoming cases), 50% higher than the monthly average (8 cases) and there is a clear upward trend in referrals this year\(^9\).

6. Of the 26 complaints received in this quarter, the risk rating (‘RR’) of these complaints is as follows:

<table>
<thead>
<tr>
<th>RR1</th>
<th>No injury has taken place and/or issues have been addressed</th>
<th>16</th>
</tr>
</thead>
</table>

\(^1\) Annex A – item 4
\(^2\) Annex A – item 1
\(^3\) Annex A – item 2
\(^4\) Annex A – item 3
\(^5\) Annex A – item 5
\(^6\) Annex A – item 6
\(^7\) Annex A – item 7
\(^8\) Annex A – item 8
\(^9\) Annex A – item 9
RR2 Moderate
Treatment resulted in injury, conduct was not persistent and/or deliberate, issues have been addressed 1

RR3 High
Sexual misconduct, issues complained of remain unresolved, ongoing risk to patients / public from the chiropractor’s clinical practice / behaviour, conduct is persistent and / or deliberate 9

RR4 Severe
Sexual misconduct, life may be in danger, risk of major injury or serious physical or mental ill health. The conduct is increasing in frequency and/or severity 0

The makeup of the cases received in the period is more complex and high risk than received in the previous quarter (June-August 2020 – RR1-15, RR-2, 0, RR-3 8, RR-4 0).

7. At 1 December 2020, the pre-Investigating Committee (IC) caseload was 78 open cases\(^{10}\), compared with 81 open cases pre-IC at the same point last year.

8. Of the total open cases pre-IC, the median age of those complaints is currently 21 weeks\(^{11}\), from the date a case was opened. This is slightly outside of the 20 week target and is up from 18 weeks in the last performance period.

9. In the last quarter, three IC meetings were held hearing 28 cases and two preliminary matters. Of those, 25 were closed, one was referred to the PCC and two were adjourned for further information. Closed cases in 2020 are now at 83\(^{12}\) - a one-third increase in productivity at the same point last year. Both staff and IC members are working diligently to keep cases progressing in difficult circumstances.

10. The median time to close cases in the last 12 months was 33.5 weeks,\(^{13}\) a reduction from 34.5 weeks in the last reporting period and movement towards the target of 28 weeks.

11. The number of referrals to the Professional Conduct Committee (PCC) this year has increased to eight cases with ‘no case to answer’ decisions at 75 cases\(^ {14}\). Whilst the number of ‘no case to answer cases’ is high (the conversion rate to

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\(^{10}\) Annex A – item 11
\(^{11}\) Annex A – item 13
\(^{12}\) Annex A – item 14
\(^{13}\) Annex A – item 15
\(^{14}\) Annex A – item 17
PCC is currently 11%, this remains likely due to the high volume of Covid-19 cases received since March 2020, none of which have warranted referral to PCC.

12. One interim suspension hearing was held resulting in no order being imposed\(^\text{15}\). The median time taken from identifying the need for an interim suspension hearing to the hearing date remains at four weeks\(^\text{16}\).

13. There are 11 cases awaiting a PCC hearing\(^\text{17}\), a reduction of one case in this reporting period. The target to list a PCC matter is nine months from IC referral to the matter being listed. There are four cases where the target has not been met and three cases where the target is no longer applicable as the hearing has started, but not completed. Since my last report when nine of the 12 PCC cases had not been listed, all but two now have a fixed listing date.

14. We continue to work hard on our protection of title cases (s.32 complaints). As of 1 December 2020, 18 active cases\(^\text{18}\), relating to 13 individuals\(^\text{19}\) are being handled, a significant decrease from the last reporting period (38 active cases on 18 individuals).

15. The internal target for complaints received after 1 January 2020 has been set at 16 weeks. The median time taken to close s.32 cases (discounting backlog cases) is down to an impressive 10 weeks, from 21 weeks in the last reporting period\(^\text{20}\). I look forward to reporting further improvements in the next reporting period.

16. In November, we held our inaugural fitness to practise stakeholder meeting with representation from the professional associations and their instructed legal providers. The purpose of the forum is to foster good relationships, create stronger joint working and initiatives and identify process improvements as best as we can within the current legislative restraints. The meeting was extremely positive, and we are looking forward to our next meeting in February 2021.

**Part B: Update on Regulatory Committee member recruitment and appraisal**

17. At its meeting in June 2020, Council was informed that the terms of 10 regulatory committee members were due to expire in May 2021. Council agreed to the extension of five member’s terms for 12-18 months from May 2021 to assist with the transition and training of new regulatory committee members due to be appointed in March 2021.

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\(^{15}\) Annex A – item 18

\(^{16}\) June-August 2020 median time from date enough information received to hearing = four weeks

\(^{17}\) Annex A – item 19

\(^{18}\) Annex A – item 23

\(^{19}\) Annex A – item 24

\(^{20}\) Annex A – item 29
18. The annual appraisal of all regulatory committee members has now concluded, and all were noted as being satisfactory or above.

19. Current members were approached for expressions of interest in an extension of their term. Following submission of a short-written application which was reviewed by the Director of Fitness to Practise and the overall Chair of the Professional Conduct Committee, the following have been selected for reappointment by Council:

- Stuart Smellie – Chiropractic member – 18 month extension
- Paul Allison – Chiropractic member – 12 month extension
- James Gaiger – Chiropractic member - 12 month extension
- Helen Potts – Lay and Chair member – 18 month extension
- Philip Geering – Lay and Chair member – 12 month extension

20. Under The General Chiropractic Council (Constitution of the Statutory Committees) Rules Order of Council 2009, Rule 7(1) and 8(1), Council is asked to approve the reappointment of the above mentioned members for the terms proposed. If approved, extended terms will commence from 1 June 2021.

21. The recruitment campaign for the new cohort of regulatory committee members is well underway. An advertisement was placed with Guardian Jobs for 6 weeks from 1 October to 12 November 2020. We received over 300 applications in total across the various roles. All applications have been reviewed and 44 applicants have been advanced to interview, taking place in early January 2021.

22. We expect to nominate proposed regulatory committee members for appointment by Council at its meeting in March 2021.

Part C: Update on Investigating Committee member recruitment and appraisal

23. Rule 6(2) of The General Chiropractic Council (Constitution of the Statutory Committees) Rules Order of Council 2009 makes provision for the appointment of one panel Chair from the Investigating Committee (IC) to act as the overall Chair of that Committee.

24. There are several important tasks that need to be undertaken in 2021 regarding the IC, including appraisal, reappointment and recruitment of new members and training. All of these tasks would be better undertaken with the support and input of an experienced overall Chair of the Committee. It would also allow for liaison and joint working with the overall chair of the Professional Conduct Committee and provides consistency in terms of the Executive’s point of contact for each Committee.
25. An expression of interest process ran from 5 to 23 November 2020 and all who expressed an interest were interviewed by the Chief Executive and Registrar and the Director of Fitness to Practise.

26. The following applicant has successfully been selected for appointment by Council:

- Jill Crawford – Investigating Committee Chair

27. Jill is in her final year of term with the GCC and in accordance with Rule 6(4), as her IC term is due to conclude on 6 December 2021, her appointment to overall Chair of the Investigating Committee can only run until that date (or for as long has her substantive membership of the Committee continues).


**Council is asked to:**

Note this report
Approve the proposed reappointments in Part B
Approve the appointment in Part C.
Enquiries

1. Total number of open enquiries
   4

2. Median age of open enquiries
   3.5 weeks
   Target = <12 weeks

3. Total number of enquiries opened in last quarter
   13

4. Total number of open enquiries at start of month

5. Categories of enquiries opened in last quarter

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outside of remit</td>
<td>4</td>
</tr>
<tr>
<td>No consent</td>
<td>2</td>
</tr>
<tr>
<td>Wants to be anonymous</td>
<td>2</td>
</tr>
<tr>
<td>No consent and wants to be anonymous</td>
<td>0</td>
</tr>
<tr>
<td>General enquiry</td>
<td>2</td>
</tr>
<tr>
<td>Unclear if it is a complaint</td>
<td>1</td>
</tr>
<tr>
<td>Chiropractor unknown</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>13</strong></td>
</tr>
</tbody>
</table>

6. Total number of enquiries closed/promoted in last quarter
   34

7. Median time taken to close enquiries in last quarter
   27 weeks
   Target = <12 weeks
9. Average new referrals per month over last 12 months
8
10. Average new referrals per month over last 5 years
5

11. Complaints currently open
78

12. Risk rating of open complaints

13. Median time cases have been open for
21 weeks

Target = <20 weeks
14. Number of complaints closed by the Investigating Committee in 2020

83  (+33% vs whole year closures 2019)

15. Median time taken to close cases in last 12 months (Dec 2019 – Nov 2020)

33.5 weeks ▲

Target = <28 weeks

16. Number of cases not closed within target timeframe in last quarter (Sept – Dec)*

<table>
<thead>
<tr>
<th>Number of cases not closed within target timeframe in last quarter (Sept – Dec)*</th>
<th>Number of cases not closed within target that are categorised as severe or high risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>3</td>
</tr>
</tbody>
</table>

*based on decision to proceed date

17. Decisions of the IC in 2020

- No case to answer, 75
- PCC, 8

18. Interim Suspension hearing decisions in 2020

2  (0 suspended)

Median time from date complaint received to hearing = 18 weeks
Median time from date enough information received to hearing = 4 weeks
Cases referred for hearing

<table>
<thead>
<tr>
<th>Case</th>
<th>Date referred from IC</th>
<th>Date listed for hearing</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case 1</td>
<td>16/07/2019</td>
<td>01/02/2021</td>
<td>Part heard</td>
</tr>
<tr>
<td>Case 2</td>
<td>23/07/2019</td>
<td>25/01/2021</td>
<td></td>
</tr>
<tr>
<td>Case 3</td>
<td>20/08/2019</td>
<td>15/03/2021</td>
<td></td>
</tr>
<tr>
<td>Case 4</td>
<td>11/12/2019</td>
<td>08/03/2021</td>
<td>Part heard</td>
</tr>
<tr>
<td>Case 5</td>
<td>28/01/2020</td>
<td>07/12/2020</td>
<td></td>
</tr>
<tr>
<td>Case 6</td>
<td>25/02/2020</td>
<td>20/01/2021</td>
<td>Part heard</td>
</tr>
<tr>
<td>Case 7</td>
<td>20/03/2020</td>
<td>19/04/2021</td>
<td></td>
</tr>
<tr>
<td>Case 8</td>
<td>02/04/2020</td>
<td>Not listed</td>
<td></td>
</tr>
<tr>
<td>Case 9</td>
<td>21/04/2020</td>
<td>14/12/2020</td>
<td></td>
</tr>
<tr>
<td>Case 10</td>
<td>21/05/2020</td>
<td>04/01/2021</td>
<td></td>
</tr>
<tr>
<td>Case 11</td>
<td>21/09/2020</td>
<td>Not listed</td>
<td></td>
</tr>
</tbody>
</table>

20. **Target**

All cases to be listed for a hearing within 9 months of being referred by IC

Target not met

21. **Recent hearings activity**

Number of PCC hearings held in last quarter
3

Number of hearings concluded in last quarter
2

Number of adjournments/case going part heard in last quarter
1

22. **Decisions of the PCC in 2020**

<table>
<thead>
<tr>
<th>Decision</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struck off</td>
<td>0</td>
</tr>
<tr>
<td>Suspended</td>
<td>0</td>
</tr>
<tr>
<td>Conditions of Practice</td>
<td>0</td>
</tr>
<tr>
<td>Admonishment</td>
<td>1</td>
</tr>
<tr>
<td>No UPC</td>
<td>4</td>
</tr>
<tr>
<td>No Evidence Offered</td>
<td>0</td>
</tr>
</tbody>
</table>
23. Total number of current Section 32 complaints  
**18**  
(-42% vs September 2019)

24. Total number of current Section 32 individuals being investigated  
**13**

25. Number of open complaints received before 1 Jan 2019 (‘backlog’)  
**7**

26. Number of open complaints received after 1 Jan 2019  
**11**

27. Complaints closed in 2020  
**40**

28. Open cases at the start of the month

29. Median time taken to close cases received in 2020  
**10 weeks**

Target = <16 weeks
**Agenda Item:** CO201210-06  
**Subject:** Finance Update  
**Author(s):** Joe Omorodion, Director of Corporate Services  
**Date:** 10 December 2020

| Summary | This is a report of the management accounts report to 30 November 2020.  
These show an (expected) surplus of £238k compared to the revised forecast surplus for the period of £234k.  
Subject to expenditure in December '20 and year-end audit adjustments, we expect to finish the year with a surplus which is in the region of 190k.  
Further details are outlined in the report. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Action</td>
<td>To note.</td>
</tr>
<tr>
<td>Recommendations</td>
<td>It is recommended that the Council is asked to note this report.</td>
</tr>
<tr>
<td>Annexes</td>
<td>Annex A: Management Accounts for November 2020</td>
</tr>
</tbody>
</table>
Management Accounts for the Period 1 January – 30 November 2020

1. This report comprises:

   - Income Statement for the period to 30 November 2020;
   - Balance Sheet as at 30 November 2020; and
   - Recommendations

Income statement to 30 November 2020

2. The surplus for the period is £238k (column A of the Table below), compared to the forecast surplus (of September 2020) of £234k (column B). The positive variance of £4k between actual and forecast income and expenditure is at column C.

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£'000s</td>
<td>YTD</td>
<td>YTD</td>
<td>Full Year</td>
<td>Full Year</td>
</tr>
<tr>
<td>Income</td>
<td>£</td>
<td>Actual</td>
<td>Forecast</td>
<td>Variance</td>
<td>Budget</td>
</tr>
<tr>
<td>Expenditure</td>
<td>£</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surplus /(Deficit)</td>
<td>238</td>
<td>234</td>
<td>4</td>
<td>190</td>
<td>3</td>
</tr>
</tbody>
</table>

Forecast expenditure – under-spent by £4k.

3. The under-spend is made up as follows:

   - Investigating Committee (£13k) and Interim Suspension Hearings (£2k) – under-spend is caused by the timing of professional legal fees which are caseload-driven. We expect to fully spend this budget December ’20.
   - Shared office costs over-spend (-£11k) – relates to the unbudgeted CRM database annual charge which was identified after the forecast was agreed.

Reconciliation of Budget ’20 (set in December ’19) to the Forecast for the Year

4. The table below shows the reconciliation of the budgeted surplus of £3k (as set in December 2019) to the forecast surplus at the end of this financial year. Where there is an expected over-spend of the initial budget (which is now superseded by the Forecast for 2020), the amounts are preceded by a minus (-). The remaining figures in the table either reflect the over-achievement of income or the under-spend of the initial budget.
Balance sheet as at 30 November 2020

5. A summary of the GCC’s assets, liabilities and reserves is presented on the Balance Sheet page of this report.

*Investments Performance as at 1 January 2020 and 30 November 2020*

6. The coronavirus pandemic continues to impact negatively on our investments. The value of the investments was £4.3m as at 30 November ’20. The value of the portfolio fell by £189,545 in the eleven months of this year to 30 November ’20, and by 0.8% in the 12 months to the end of the same reporting period (see below).

7. As such, the performance of the funds against the benchmark continues to be disappointing.

<table>
<thead>
<tr>
<th>Portfolio value – Start 31 Dec 2019</th>
<th>£4,480,144</th>
</tr>
</thead>
<tbody>
<tr>
<td>Portfolio value – 12-month to 30 November 2020</td>
<td>£4,290,599</td>
</tr>
<tr>
<td>Increase / Decrease in value in period</td>
<td>-189,545</td>
</tr>
<tr>
<td>Year to date 12-month return</td>
<td>0.8%</td>
</tr>
<tr>
<td>Long-term/(ongoing) benchmark return</td>
<td>3.8% (0.8% CPI plus 3%)</td>
</tr>
</tbody>
</table>

*Working Capital*

8. The current ratio shows that the GCC has £0.69 (October ’20: £0.31) available to settle every £1 owed to its short-term suppliers/creditors. The ratio is below the standard level of at least of £1/£1, and this is largely due to how we must account
for the registrant fees which we receive in advance in the prior year.

9. Consequently, this is not considered to be a serious solvency issue but only a technical accounting one, given that the amounts deferred from the prior year into the current year’s accounts will be released into the income statement by the end of each financial year.

**Total Net Assets**

10. The total net assets of £3.4m are represented by the General and Designated reserves.

**Recommendation**

11. That the Council is asked to note this report.
## General Chiropractic Council
### November 2020 Management Accounts

#### Overview Report

### Key Income Statement

<table>
<thead>
<tr>
<th>INCOME</th>
<th>Actual</th>
<th>Forecast</th>
<th>Variance</th>
<th>Var %</th>
<th>Actual</th>
<th>Forecast</th>
<th>Variance</th>
<th>Var %</th>
<th>Forecast '20</th>
<th>Budget '20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registrant fees</td>
<td>212,304</td>
<td>221,621</td>
<td>-9,317</td>
<td>-0</td>
<td>2,394,546</td>
<td>2,394,545</td>
<td>1</td>
<td>0</td>
<td>2,616,535</td>
<td>2,576,000</td>
</tr>
<tr>
<td>Investments</td>
<td>10,000</td>
<td>10,000</td>
<td>0</td>
<td>0</td>
<td>110,000</td>
<td>110,000</td>
<td>0</td>
<td>0</td>
<td>120,000</td>
<td>120,000</td>
</tr>
<tr>
<td>Test of Competence (ToC)</td>
<td>12,000</td>
<td>12,800</td>
<td>-800</td>
<td>-0</td>
<td>50,000</td>
<td>50,000</td>
<td>0</td>
<td>0</td>
<td>50,000</td>
<td>40,000</td>
</tr>
<tr>
<td>Other Income</td>
<td>403</td>
<td>2,362</td>
<td>-1,959</td>
<td>-1</td>
<td>6,110</td>
<td>6,109</td>
<td>1</td>
<td>0</td>
<td>6,109</td>
<td>-</td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td><strong>234,707</strong></td>
<td><strong>246,783</strong></td>
<td><strong>-12,076</strong></td>
<td><strong>-1</strong></td>
<td><strong>2,560,655</strong></td>
<td><strong>2,560,654</strong></td>
<td><strong>1</strong></td>
<td><strong>0%</strong></td>
<td><strong>2,792,644</strong></td>
<td><strong>2,736,000</strong></td>
</tr>
</tbody>
</table>

### EXPENDITURE

| Governance costs¹  | -28,987 | -30,496 | -1,509 | 0   | 74,401  | 73,665  | -736   | -1%  | 84,435       | 149,846   |
| Shared Central costs² | 58,573  | 65,474  | 6,902  | 0   | 807,626 | 797,365 | -10,261| -1%  | 863,503      | 1,045,813 |
| Fitness to Practise (FtP)³ | 118,020 | 43,498  | -74,522| -2  | 1,069,510| 1,085,492| 15,982 | 1%   | 1,239,493    | 1,045,976 |
| Development costs⁴ | 56,732  | -5,269  | -62,000| 12  | 370,836 | 370,188 | -647   | 0%   | 415,115      | 491,643   |
| **TOTAL EXPENDITURE** | **204,338** | **73,208** | **-131,130** | **-1** | **2,322,372** | **2,326,711** | **4,338** | **1%** | **2,602,546** | **2,733,278** |

### SURPLUS/(DEFICIT)

<table>
<thead>
<tr>
<th>November</th>
<th>Year-To-Date (YTD)</th>
<th>Full Year</th>
<th>Full Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actual</td>
<td>Forecast</td>
<td>Forecast '20</td>
<td>Budget '20</td>
</tr>
<tr>
<td>30,369</td>
<td>173,575</td>
<td>238,283</td>
<td>233,943</td>
</tr>
</tbody>
</table>

### Notes
1. Council, ARC and RemCo
2. CER, Technology, HR, Finance and Property
3. Investigations, IC, PCC, ISH and Protection of Title
4. Policy, Education, Registration, QA, ToC, Communications, Education Committee
## Report by Income & Cost Centre

### General Chiropractic Council
November 2020 Management Accounts

### November

<table>
<thead>
<tr>
<th>Detailed Income Statement</th>
<th>Dept</th>
<th>Actual</th>
<th>Forecast</th>
<th>Variance</th>
<th>Var %</th>
<th>Full Year Forecast</th>
<th>Variance</th>
<th>Full Year Budget</th>
<th>Var %</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>£</td>
<td>£</td>
<td>£</td>
<td></td>
<td>£</td>
<td></td>
<td>£</td>
<td></td>
</tr>
<tr>
<td>Income</td>
<td>72</td>
<td>813</td>
<td>-6,654</td>
<td>7,447</td>
<td>-2</td>
<td>110,188</td>
<td>67,241</td>
<td>42,947</td>
<td>84%</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>0</td>
<td>75</td>
<td>-75</td>
<td>-2</td>
<td>700</td>
<td>875</td>
<td>-175</td>
<td>-20%</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>204,333</td>
<td>223,858</td>
<td>-19,525</td>
<td>-0</td>
<td>2,236,339</td>
<td>2,279,084</td>
<td>-43,747</td>
<td>-2%</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>2,208</td>
<td>1,044</td>
<td>1,164</td>
<td>2</td>
<td>20,392</td>
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<tr>
<td></td>
<td>72</td>
<td>800</td>
<td>1,434</td>
<td>634</td>
<td>-0</td>
<td>8,000</td>
<td>11,966</td>
<td>-3,966</td>
<td>-33%</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>4,150</td>
<td>1,844</td>
<td>2,306</td>
<td>2</td>
<td>15,650</td>
<td>15,969</td>
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<tr>
<td>Total Retired Fees</td>
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<td>212,304</td>
<td>221,621</td>
<td>-9,317</td>
<td></td>
<td>2,394,546</td>
<td>2,384,545</td>
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<td></td>
</tr>
<tr>
<td>ToC Income</td>
<td>74</td>
<td>12,000</td>
<td>12,800</td>
<td>-800</td>
<td>-0</td>
<td>50,000</td>
<td>50,000</td>
<td>-0</td>
<td>0%</td>
</tr>
<tr>
<td>Investments</td>
<td>33</td>
<td>10,000</td>
<td>10,000</td>
<td>0</td>
<td>0</td>
<td>110,000</td>
<td>110,000</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>Other</td>
<td>33</td>
<td>403</td>
<td>2,362</td>
<td>-1,959</td>
<td>-2</td>
<td>6,110</td>
<td>6,109</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td>Total Investments &amp; Other</td>
<td></td>
<td>22,403</td>
<td>25,162</td>
<td>-2,759</td>
<td></td>
<td>166,110</td>
<td>166,109</td>
<td>1</td>
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</tr>
<tr>
<td>TOTAL INCOME</td>
<td></td>
<td>234,707</td>
<td>246,783</td>
<td>-12,076</td>
<td>-0</td>
<td>2,560,695</td>
<td>2,560,654</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td>Governance costs</td>
<td>10</td>
<td>-29,587</td>
<td>-30,196</td>
<td>-609</td>
<td>0</td>
<td>72,350</td>
<td>71,914</td>
<td>-436</td>
<td>-1%</td>
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<tr>
<td></td>
<td>11</td>
<td>300</td>
<td>300</td>
<td>0</td>
<td>0</td>
<td>1,751</td>
<td>1,751</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>300</td>
<td>-600</td>
<td>-900</td>
<td>2</td>
<td>300</td>
<td>-</td>
<td>-300</td>
<td>-100%</td>
</tr>
<tr>
<td>Total Governance</td>
<td></td>
<td>-28,587</td>
<td>-30,496</td>
<td>-1,509</td>
<td></td>
<td>76,401</td>
<td>73,665</td>
<td>-176</td>
<td>-4%</td>
</tr>
<tr>
<td>CER Office costs</td>
<td>30</td>
<td>20,277</td>
<td>21,354</td>
<td>1,077</td>
<td>0</td>
<td>224,190</td>
<td>224,386</td>
<td>-4</td>
<td>-0%</td>
</tr>
<tr>
<td>Shared Central costs</td>
<td>31</td>
<td>6,812</td>
<td>25,216</td>
<td>18,404</td>
<td>2</td>
<td>172,788</td>
<td>167,494</td>
<td>-5,294</td>
<td>-3%</td>
</tr>
<tr>
<td></td>
<td>32</td>
<td>-3,838</td>
<td>-14,225</td>
<td>-10,387</td>
<td>2</td>
<td>76,957</td>
<td>67,457</td>
<td>-9,500</td>
<td>-14%</td>
</tr>
<tr>
<td></td>
<td>33</td>
<td>19,711</td>
<td>15,718</td>
<td>-3,993</td>
<td>0</td>
<td>133,778</td>
<td>137,295</td>
<td>4,517</td>
<td>3%</td>
</tr>
<tr>
<td></td>
<td>34</td>
<td>15,611</td>
<td>17,411</td>
<td>1,800</td>
<td>0</td>
<td>200,712</td>
<td>200,733</td>
<td>21</td>
<td>0%</td>
</tr>
<tr>
<td>Total Shared Central Costs</td>
<td></td>
<td>58,573</td>
<td>65,474</td>
<td>6,902</td>
<td></td>
<td>807,626</td>
<td>797,565</td>
<td>10,264</td>
<td>1%</td>
</tr>
<tr>
<td>Fitness to Practise costs (FtP)</td>
<td>50</td>
<td>30,097</td>
<td>28,662</td>
<td>-2,336</td>
<td>0</td>
<td>377,541</td>
<td>378,443</td>
<td>902</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>51</td>
<td>6,290</td>
<td>-21,417</td>
<td>-27,707</td>
<td>2</td>
<td>134,039</td>
<td>147,669</td>
<td>13,630</td>
<td>9%</td>
</tr>
<tr>
<td></td>
<td>52</td>
<td>77,727</td>
<td>52,418</td>
<td>-25,309</td>
<td>0</td>
<td>529,412</td>
<td>528,762</td>
<td>-650</td>
<td>-1%</td>
</tr>
<tr>
<td></td>
<td>53</td>
<td>786</td>
<td>-10,384</td>
<td>-11,171</td>
<td>2</td>
<td>24,026</td>
<td>26,128</td>
<td>2,102</td>
<td>8%</td>
</tr>
<tr>
<td></td>
<td>54</td>
<td>15,611</td>
<td>17,411</td>
<td>1,800</td>
<td>0</td>
<td>200,712</td>
<td>200,733</td>
<td>21</td>
<td>0%</td>
</tr>
<tr>
<td>Total FtP</td>
<td></td>
<td>58,573</td>
<td>65,474</td>
<td>6,902</td>
<td></td>
<td>807,626</td>
<td>797,565</td>
<td>10,264</td>
<td>1%</td>
</tr>
<tr>
<td>Development</td>
<td>70</td>
<td>12,796</td>
<td>4,254</td>
<td>-8,542</td>
<td>-2</td>
<td>168,117</td>
<td>168,089</td>
<td>-28</td>
<td>-0%</td>
</tr>
<tr>
<td></td>
<td>71</td>
<td>4,016</td>
<td>-27,973</td>
<td>-31,999</td>
<td>2</td>
<td>44,543</td>
<td>44,549</td>
<td>6</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>22,844</td>
<td>22,923</td>
<td>79</td>
<td>0</td>
<td>92,107</td>
<td>91,574</td>
<td>-533</td>
<td>-1%</td>
</tr>
<tr>
<td></td>
<td>73</td>
<td>1,898</td>
<td>-7,897</td>
<td>-9,795</td>
<td>0</td>
<td>6,307</td>
<td>6,308</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>74</td>
<td>10,200</td>
<td>2,984</td>
<td>-7,216</td>
<td>3</td>
<td>34,408</td>
<td>34,406</td>
<td>-2</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>75</td>
<td>3,048</td>
<td>-1,354</td>
<td>-4,402</td>
<td>3</td>
<td>16,988</td>
<td>17,469</td>
<td>480</td>
<td>3%</td>
</tr>
<tr>
<td>Total Education &amp; Regulation</td>
<td></td>
<td>56,712</td>
<td>-5,269</td>
<td>-62,000</td>
<td></td>
<td>170,836</td>
<td>170,548</td>
<td>-67</td>
<td>-4%</td>
</tr>
<tr>
<td>TOTAL OPERATING COSTS</td>
<td></td>
<td>204,338</td>
<td>71,208</td>
<td>-133,130</td>
<td>-2</td>
<td>2,322,177</td>
<td>2,326,711</td>
<td>4,538</td>
<td>0%</td>
</tr>
<tr>
<td>Surplus/(Deficit)</td>
<td></td>
<td>30,360</td>
<td>173,575</td>
<td>-143,206</td>
<td>-2</td>
<td>238,283</td>
<td>233,943</td>
<td>4,340</td>
<td>0%</td>
</tr>
<tr>
<td>Percentage</td>
<td></td>
<td>-4%</td>
<td>9%</td>
<td>8%</td>
<td>0%</td>
<td>9%</td>
<td>9%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>
### GCC Balance Sheet
**As at 30 November 2020**

<table>
<thead>
<tr>
<th></th>
<th>January 2020</th>
<th>November 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible Assets</td>
<td>£ 5,328</td>
<td>£ 515</td>
</tr>
<tr>
<td>Investments</td>
<td>£ 4,521,712</td>
<td>£ 4,421,712</td>
</tr>
<tr>
<td></td>
<td>£ 4,527,040</td>
<td>£ 4,422,227</td>
</tr>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debtors</td>
<td>£ 7,659</td>
<td>£ 245,524</td>
</tr>
<tr>
<td>Bank</td>
<td>£ 1,649,372</td>
<td>£ 1,719,272</td>
</tr>
<tr>
<td></td>
<td>£ 1,657,031</td>
<td>£ 1,964,795</td>
</tr>
<tr>
<td><strong>Current Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HMRC and pensions</td>
<td>£ 26,267</td>
<td>£ 29,215</td>
</tr>
<tr>
<td>Payments in advance</td>
<td>£ 2,363,402</td>
<td>£ 2,544,208</td>
</tr>
<tr>
<td>Trade creditors</td>
<td>£ 285,905</td>
<td>£ 94,656</td>
</tr>
<tr>
<td>Corporate tax</td>
<td>£ 14,098</td>
<td>£ 0</td>
</tr>
<tr>
<td>Other creditors</td>
<td>£ 153,948</td>
<td>£ 197,746</td>
</tr>
<tr>
<td></td>
<td>£ 2,843,620</td>
<td>£ 2,865,826</td>
</tr>
<tr>
<td><strong>Current Assets less Current Liabilities:</strong></td>
<td><strong>-1,186,589</strong></td>
<td><strong>-901,031</strong></td>
</tr>
<tr>
<td><strong>Total Assets less Current Liabilities:</strong></td>
<td><strong>3,340,451</strong></td>
<td><strong>3,521,196</strong></td>
</tr>
<tr>
<td><strong>Long Term Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>£ 183,767</td>
<td>£ 126,229</td>
</tr>
<tr>
<td><strong>Total Assets less Total Liabilities:</strong></td>
<td><strong>3,156,684</strong></td>
<td><strong>3,394,967</strong></td>
</tr>
<tr>
<td><strong>Funds of The Council</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reserves</td>
<td>£ 3,156,684</td>
<td>£ 3,156,684</td>
</tr>
<tr>
<td>P &amp; L Account</td>
<td>£ 0</td>
<td>£ 238,283</td>
</tr>
<tr>
<td></td>
<td><strong>3,156,684</strong></td>
<td><strong>3,394,967</strong></td>
</tr>
</tbody>
</table>
**Agenda Item:** CO201210-07  
**Subject:** Business Plan 2020 Update  
**Author:** Richard Kavanagh, Business Officer and Project Manager  
**Date:** 10 December 2020

<table>
<thead>
<tr>
<th>Summary</th>
<th>The paper provides an update on our performance against the 2020 Business Plan.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action</td>
<td>For information</td>
</tr>
<tr>
<td>Recommendations</td>
<td>The Council is asked to note the report.</td>
</tr>
<tr>
<td>Annex</td>
<td>Annex A: Business plan status table, December 2020</td>
</tr>
</tbody>
</table>
Background

1. The Business Plan was agreed by Council in December 2019 and is the second year of the five-year strategy 2019-2023. Delivery performance is reported at each meeting of the Council.

Summary

2. The status of each project and a short update summary of all activities in the business plan can be found at Annex 1.

18 projects have been completed:

- (Ref 1) Capture and use our knowledge to provide a sharper focus in our regulatory work by publishing and promoting guidance that supports chiropractic best practice and enables ‘upstreaming’ of complaints.
- (Ref 2) Review the need for changes to our education standards to include the wider public health agenda.
- (Ref 3) Evaluate whether the changes made to our CPD summary have led to greater evidence of reflection amongst registrants
- (Ref 7) Implement student engagement strategy
- (Ref 9) Survey the public on their views and expectations of the chiropractic profession and regulation
- (Ref 13a) Legal policy review of whistleblowing in clinics.
- (Ref 15) Increase and improve our engagement with our partners and key stakeholders, including appraisals, regular updates and access to learning opportunities
- (Ref 16) Hold a ‘lessons learnt’ steering group regarding the advertising complaints closed in 2019
- (Ref 17) Implement a mandatory learning and development programme for staff and assess performance and development needs on an individual basis
- (Ref 20) Move to a paperless system for council and committees
- (Ref 22a) Run a recruitment exercise for two new registrant Council members
- (Ref 22b) Run a recruitment exercise for one new lay Education Committee member and two reappointments
- (Ref 23) Carry out staff initiatives to gauge and improve the contentment and wellbeing of the staff team including publishing a mental health and wellbeing policy
- (Ref 24a) Make continuous improvements to website
- (Ref 24b) Make continuous improvements to the new CRM system
- (Ref 25) Review our existing business continuity plan including disaster recovery and update
- (Ref 26) Obtain cyber essentials certification and security testing to be carried out
- (Ref 27) Obtain electronic signature product for FTP department in light of Covid-19
6 projects are in progress:

- (Ref 1a) Implement the recommendations set out in the Coroner’s report
- (Ref 5) Commission research to understand current and future workforce needs and challenges of the profession
- (Ref 6) Commission research and survey existing chiropractic patients on their experiences and satisfaction to strengthen patient voice
- (Ref 11) Support and promote inter-professional learning and working between chiropractors and other healthcare professionals
- (Ref 12) Recruit new IC members (Lay and registrant) and new PCC members (registrant only)
- (Ref 13b) Correspondence with complainants and registrants review based on feedback received

1 project has not been delivered and is not in progress

- (Ref 4) Respond to policy relating to Governance and FTP emerging from the department of health’s regulatory reform agenda

5 projects have been previously deferred until 2021 at the June 2020 Council meeting and are included in the Business Plan 2021

- (Ref 10) Enhance professionalism within chiropractic by promoting opportunities for graduates, researchers, academics and other career pathways
- (Ref 14) Consider our expert witness arrangements
- (Ref 18) Implement a case management system for the FTP department
- (Ref 19) Review and update our IT document management arrangements
- (Ref 21) Review IT support contract arrangements

One project has been previously withdrawn by Council.

- (Ref 8) Develop a set of competencies for new graduates

Completed items

3. The Business Plan 2020 was an ambitious programme of work. The completion of the activities, as set out above, is a significant achievement, taking into account the impact of the pandemic on our project work. Many activities completed in 2020 involved several different areas of the organisation.

4. Analysis of the benefits that the completion of these projects will be carried out at year-end and presented to Council at its meeting in March 2021.

Update on items in progress

5. A small number of projects have not concluded in 2020 as known and previously advised, albeit they are progressing and concluding in the first half of 2021.
6. Work continues on the recommendations of the Coroner’s report (Ref 1a). As previously reported, work relating to First Aid has been completed.

7. The review of imaging in chiropractic was delayed due to the impact of the pandemic in two specific areas – firstly, the availability of chiropractic experts to support the development of a paper covering imaging within the healthcare environment generally, and the context of imaging within chiropractic care (taking into account history and research); and secondly the establishing of an expert advisory established to advise the Council, in particular colleagues from the radiology and radiography profession involved in the pandemic response. Since the early delay, we have developed a discussion paper Diagnostic imaging in chiropractic in the UK a discussion document and have assembled an expert group that will meet in the new year to review. It is expected the expert group will meet on three occasions; firstly to respond to the discussion document and suggest other considerations taking into account published research; secondly to approve the draft of a document produced for circulation widely within the sector; and thirdly to receive a report of the consultation and the steps to be taken by the various stakeholder within the system of chiropractic i.e. the GCC, professional associations, the RCC and registrants. We expect to conclude this work by May 2021.

8. Research projects (Refs 5 & 6) are being undertaken with the support of externally commissioned researchers. Both will conclude in the first quarter of 2021 and inform work in the business plan.

9. (Ref 11) Support and promote inter-professional learning and working between chiropractors and other healthcare professionals – We previously reported that this project would be completed collaboratively with GOsC. This has not been possible this year. Work is, however, in progress to develop a set of case studies and blogs and will complete by the end of 2020.

10. (Ref 12) Recruitment projects relating to PCC and IC members are concluding in 2021 as planned – a project spanning two business years.

11. (Ref 13b) Initial work on gaining feedback from complainants and registrants has been undertaken and will feed into work in the business plan 2021.

Projects not delivered and not in progress

12. (Ref 4) Respond to policy relating to Governance and FTP emerging from the department of health’s regulatory reform agenda - We continue to work with the department to seek out opportunities for reform and will carry this action over to the 2021 business plan.

Implications

13. The business plan relates directly to the five-year strategy.
14. There are no legal, equality or communications implications arising from this paper.
<table>
<thead>
<tr>
<th>Ref</th>
<th>BP Activity</th>
<th>Timescale</th>
<th>Lead</th>
<th>Status</th>
<th>Update</th>
</tr>
</thead>
</table>
| 1  | Capture and use our knowledge to provide a sharper focus in our regulatory work by publishing and promoting guidance that supports chiropractic best practice and enables 'upstreaming' of complaints. | Ongoing | Cross functional | Complete | A large proportion of the work in this area in 2020 relates to our correspondence in relation to Covid-19 which has taken priority in 2020.  
- Covid-19 webpage and various guidance  
- Various work strands  
- Monthly IC lessons learned meetings  
- Newsletters  
- New news content on website-- blogs/vlogs  
- HCPC – Professionalism joint research |
| 1a | Implement the recommendations set out in the Coroner’s report | 2021 | CE | In progress (will conclude in 2021) | 1. First Aid – all chiropractors have completed CPD return around first aid knowledge and skills. We will carry out an audit of these shortly. Additional question added to retention.  
2. *Diagnostic imaging in chiropractic in the UK a discussion document* has now been developed and an expert group is being assembled to meet early in the new year. Item has been added to Business Plan 2021: *Embed best practice in imaging and incident reporting to enhance safer care* |
| 2  | Review the need for changes to our education standards to include the wider public health agenda. | To EC by November | Education | Complete | EC considered and agreed on 01/04/20 that this would be fed into a wider scoping review of the Education Standards, to be carried out with the EC in 2021. |
| 3  | Evaluate whether the changes made to our CPD summary have led to greater evidence of reflection amongst registrants | June | Registrations | Complete | Final report sent to Education Committee 01/04/20. Recommendations implemented. |
| 4  | Respond to policy relating to Governance and FTP emerging from the department of health’s regulatory reform agenda | No indication of timeframe from DOH | CE/FTP | Not completed (in business plan 2021) | We continue to work with DHSC in relation to the reform agenda and will carry this action over to the 2021 business plan. |
| 5  | Commission research to understand current and future workforce needs and challenges of the profession | December | Development | In progress (will conclude in 2021) | In progress. Delayed due to Covid-19 |
| 6  | Commission research and survey existing chiropractic patients on their experiences and satisfaction to strengthen patient voice | March 2021 (+ Regular updates to Council) | Development | In progress (will conclude in 2021) | In progress. Previously delayed due to Covid-19.  
- Interim progress report received October 2020.  
- Phase 1 in progress to conclude January 2021.  
- Phase 2 to take place in 2021 as originally planned, to conclude January 2022 and included in 2021 business plan. |
| 7  | Implement student engagement strategy | Ongoing | Development | Completed | Student engagement strategy published. Implementation to continue as business as usual in future years. |
## Annex A

<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
<th>Month</th>
<th>Development Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td><strong>Develop a set of competencies for new graduates</strong></td>
<td>December</td>
<td>Development</td>
<td><strong>Withdrawn</strong> We are finalising the findings we have received and developing infographics for key findings. Will be completed by year end. Plans are being formulated for communication and dissemination via our different channels. The findings will inform work in 2021 including the digital toolkits for chiropractors and the information and resources for patients/public.</td>
</tr>
<tr>
<td>9</td>
<td><strong>Survey the public on their views and expectations of the chiropractic profession and regulation</strong></td>
<td>December</td>
<td>Development</td>
<td><strong>Completed</strong></td>
</tr>
<tr>
<td>10</td>
<td><strong>Enhance professionalism within chiropractic by promoting opportunities for graduates, researchers, academics and other career pathways</strong></td>
<td>December</td>
<td>Development</td>
<td><strong>Deferred to 2021</strong> Deferred to 2021 at June 2020 Council meeting</td>
</tr>
<tr>
<td>11</td>
<td><strong>Support and promote inter-professional learning and working between chiropractors and other healthcare professionals</strong></td>
<td>December</td>
<td>Development</td>
<td><strong>In progress (will conclude 2020)</strong> Work underway but joint work with GOsC no longer possible this year. Will conclude December 20.</td>
</tr>
<tr>
<td>12</td>
<td><strong>Recruit new IC members (Lay and registrant) and new PCC members (registrant only)</strong></td>
<td>September/October</td>
<td>FTP</td>
<td><strong>In progress (will conclude in 2021)</strong> Recruitment for IC and PCC members in progress. See FTP Director report.</td>
</tr>
<tr>
<td>13a</td>
<td><strong>Legal policy review of whistleblowing in clinics.</strong></td>
<td>July</td>
<td>FTP</td>
<td><strong>Complete</strong> Completed</td>
</tr>
<tr>
<td>13b</td>
<td><strong>Correspondence with complainants and registrants review based on feedback received</strong></td>
<td>July</td>
<td>FTP</td>
<td><strong>In progress (covered in business plan 2021)</strong> Feedback gathered early 2020, in process of being analysed and will form basis of our approach to the 2021 Business Plan item to establish a routine process for FTP feedback.</td>
</tr>
<tr>
<td>14</td>
<td><strong>Consider our expert witness arrangements</strong></td>
<td>October</td>
<td>FTP</td>
<td><strong>Deferred to 2021</strong> Deferred to 2021 at June 2020 Council meeting</td>
</tr>
<tr>
<td>15</td>
<td><strong>Increase and improve our engagement with our partners and key stakeholders, including appraisals, regular updates and access to learning opportunities</strong></td>
<td>Ongoing</td>
<td>Cross functional</td>
<td><strong>Complete</strong> • Microlearn E-learning accessible to all Council and partners. • FTP Committee appraisals undertaken. See Update in FTP director report.</td>
</tr>
<tr>
<td>16</td>
<td><strong>Hold a ‘lessons learnt’ steering group regarding the advertising complaints closed in 2019</strong></td>
<td>May</td>
<td>FTP</td>
<td><strong>Complete</strong> Council agreed that the initial advertising actions were now complete, and a new set of actions were agreed and will be undertaken as part of Business Plan 2021: Develop a digital toolkit to assist chiropractors to reflect on their own website and web material</td>
</tr>
</tbody>
</table>
### Annex A

<table>
<thead>
<tr>
<th>No.</th>
<th>Task Description</th>
<th>Target Date</th>
<th>Responsible Bodies</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Implement a mandatory learning and development programme for staff and assess performance and development needs on an individual basis</td>
<td>May</td>
<td>CE</td>
<td>Complete</td>
<td>Microlearn e-learning implemented and mandatory modules have been completed. Individual staff training needs have been considered and training to follow.</td>
</tr>
<tr>
<td>18</td>
<td>Implement a case management system for the FTP department</td>
<td>October</td>
<td>Corporate/FTP</td>
<td>Deferred to 2021</td>
<td>Deferred to 2021 at June 2020 Council meeting</td>
</tr>
<tr>
<td>19</td>
<td>Review and update our IT document management arrangements</td>
<td>Post-October</td>
<td>Corporate</td>
<td>Deferred to 2021</td>
<td>Deferred to 2021 at June 2020 Council meeting</td>
</tr>
<tr>
<td>21</td>
<td>Review IT support contract arrangements</td>
<td>June</td>
<td>Corporate</td>
<td>Deferred to 2021</td>
<td>Deferred to 2021 at June 2020 Council meeting</td>
</tr>
<tr>
<td>22a</td>
<td>Run a recruitment exercise for two new registrant Council members</td>
<td>May</td>
<td>CE</td>
<td>Complete</td>
<td>Two new Council members recruited.</td>
</tr>
<tr>
<td>22b</td>
<td>Run a recruitment exercise for one new lay Education Committee member and two reappointments</td>
<td>December</td>
<td>Education/Governance</td>
<td>Complete</td>
<td>Recruitment completed.</td>
</tr>
<tr>
<td>23</td>
<td>Carry out staff initiatives to gauge and improve the contentment and wellbeing of the staff team including publishing a mental health and wellbeing policy</td>
<td>June</td>
<td>CE</td>
<td>Complete</td>
<td>Away day 11/03/2020. Away day feedback obtained. June survey carried out. ‘People policies’ published May 2020. Training carried out by Mind carried out November 2020</td>
</tr>
<tr>
<td>24a</td>
<td>Make continuous improvements to website</td>
<td>Ongoing</td>
<td>Communications</td>
<td>Complete</td>
<td>Improvements that do not need require specific development work by the web provider are being undertaken by Communications officer as part of business as usual. Updates include: Coronavirus section, Blogs added, newsletter section, registrations and CPD pages, easier navigation, find a chiropractor button, new pictures etc.</td>
</tr>
<tr>
<td>24b</td>
<td>Make continuous improvements to the new CRM system</td>
<td>Ongoing</td>
<td>Corporate/Registrations</td>
<td>Complete</td>
<td>• Online application for graduates process completed. • First aid and CPD amendments completed. • Adding ‘change address’ feature to portal completed • Retention period concluded using system</td>
</tr>
<tr>
<td>25</td>
<td>Review our existing business continuity plan including disaster recovery and update</td>
<td>March (Covid-19 enacted)</td>
<td>Corporate</td>
<td>Complete</td>
<td>Work on project being finalised and will be completed by year end.</td>
</tr>
<tr>
<td></td>
<td>Obtain cyber essentials certification and security testing to be carried out</td>
<td>July</td>
<td>Corporate</td>
<td>Complete</td>
<td>Cyber Essentials levels 1 and 2 completed</td>
</tr>
<tr>
<td>---</td>
<td>----------------------------------------------------------------------------</td>
<td>--------</td>
<td>-----------</td>
<td>----------</td>
<td>-----------------------------------------</td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Obtain electronic signature product for FTP department in light of Covid-19</td>
<td>April</td>
<td>Corporate</td>
<td>Complete</td>
<td>Docusign purchased and implemented – 21/04/202</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Agenda Item:** CO201210-08  
**Subject:** GCC Strategy 2019-2023: Business Plan 2021  
**Author(s):** Nick Jones, Chief Executive & Registrar  
**Date:** 10 December 2020

<table>
<thead>
<tr>
<th><strong>Summary</strong></th>
<th>The purpose of this paper is to gain approval for the 2021 Business Plan and should be considered with Annex 1 and 2.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Action</strong></td>
<td>To approve the 2021 business plan</td>
</tr>
<tr>
<td><strong>Recommendations</strong></td>
<td>The Council is asked to comment on the business plan 2021 and approve the plan.</td>
</tr>
</tbody>
</table>
| **Annexes**  | Annex A – Business Plan 2021  
Annex B – Summary of all business plan items in the plan (aims, deliverables, benefits and measures) |
Background

1. At the meeting of Council in September 2020 the Business Plan 2021 was presented in draft. The comments and feedback received have been taken into account and the final version of the business plan is now proposed for approval.

2. The following material changes to the business plan following the meeting are shown:
   - More emphasis on professionalism within chiropractic. Much of the individual business plan items all work towards this key theme. The development of professionalism within chiropractic is key, and believe that we can do this through our aim of ‘developing the profession.’ Professionalism is the thread that runs through undergraduate education, into early practice and throughout a chiropractor’s career. Ensuring professionalism is embedded early on a registrant’s journey is intended to have an impact on the whole profession – albeit the benefits felt over time.
   - Our work is designed to operate within the system of chiropractic for example, the Royal College of Chiropractors and the Education providers each seeking to make an impact on the professionalism of current and future registrants. As such, we will work collaboratively with these stakeholders influencing their actions such that the system itself leads the way for the benefit of patients and the public.
   - We have removed the ‘future chiropractor’ project as , taking into account related projects, is a low priority.
   - We have added new work to embed best practice in imaging and incident reporting in chiropractic to enhance safe care

Research

3. Council considered whether the various items with a research element could be presented in a more integrated way – there are only a few research projects that are included in the 2021 business plan. The majority of the work that we have carried out to date in terms of research took place in 2020 as part of aims to ‘develop the profession’. We are now beginning to see the results of this research. The information garnered from this will be filtered into our work to ‘promote standards’. Actions in the 2021 business plan under this strategic aim are intended to provide new and important information to our registrants and patients. We will draw heavily on our research in order to tailor this effectively.
Strategic objectives

4. Council commented that some business plan items might be better allocated to other strategic objectives. We have considered the strategic objectives that each business plan item aligns with and concluded that some of these overlap across objectives and aims and are therefore difficult to attribute directly to just one. Regardless, work in these areas contribute directly to the five-year strategic plan. We will carry out work on different strategic objectives at different times across the life cycle of the strategy. We have not planned work under all the strategic objectives in the five-year strategy in 2021 because we have already carried out work under some of the strategic objectives in 2019 and 2020, for example, work on the strategic aim ‘Our focus and transparent work on protecting the title ‘chiropractor’ will provide clarity to the public and registrants’ has been absorbed into our business as usual within fitness to practice so does not appear in the business plan 2021. We have also prioritised key areas considering the current landscape; both in the regulatory/healthcare sphere and society more generally.

Outcomes

5. Council commented that more focus is put to measuring the outcomes, effectiveness and success of projects. Full business cases have now been completed for internal use to ensure that each business plan item continue to be beneficial, viable, achievable and cost effective. We have included a short summary of every new item that we have included in the business plan at Annex B with the aims, deliverables, expected benefits and how we aim to measure the success of each.

Business Plan 2021

6. The public facing version of the business plan is attached at Annex A. This sets out our vision for 2021 and how we intend to meet each of the four strategic aims by carrying out new actions and our core regulatory work.

7. The allocated/estimated funds for the separate projects are £165,482. Council will further consider the estimated costs in detail prior to completion of the final business plan in December 2020 alongside the presentation of the overall budget for 2021

8. The new actions and associated costs to be undertaken in 2021 are as follows:
**Proposed Action**

<table>
<thead>
<tr>
<th>Proposed Action</th>
<th>Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop a digital toolkit to assist chiropractors to reflect on their own website and web material.</td>
<td>10,000</td>
</tr>
<tr>
<td>Develop a digital toolkit to support chiropractors with their communication with patients/public.</td>
<td>20,000</td>
</tr>
<tr>
<td>Produce engaging, supporting information for patients/public and a dedicated area on our website and form a virtual public/patient panel</td>
<td>20,000</td>
</tr>
<tr>
<td>Respond to potential changes relating to Education and Registrations including CPD, emerging from DHSC’s regulatory reform agenda</td>
<td>10,000</td>
</tr>
<tr>
<td>Determine the need for changes to our Education Standards and Quality Assurance processes by carrying out a scoping review</td>
<td>7,500</td>
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**We Develop the Profession**

<table>
<thead>
<tr>
<th>Proposed Action</th>
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</thead>
<tbody>
<tr>
<td>Embed best practice in imaging and incident reporting to enhance safer care</td>
<td>10,000</td>
</tr>
<tr>
<td>Complete research started in 2020 to survey existing chiropractic patients on their experiences and satisfaction to strengthen patient voice</td>
<td>24,404</td>
</tr>
<tr>
<td><em>Deferred 2020</em> Enhance professionalism within chiropractic by promoting opportunities for graduates, researchers, academics and other career pathways -</td>
<td>12,000</td>
</tr>
</tbody>
</table>

**We Investigate and Act**

<table>
<thead>
<tr>
<th>Proposed Action</th>
<th>Costs</th>
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</thead>
<tbody>
<tr>
<td><em>Carried over from 2020</em> Respond to potential changes relating to FTP and Governance emerging from DHSC’s regulatory reform agenda</td>
<td>10,000</td>
</tr>
<tr>
<td>Continue to streamline our processes and make relevant operational changes within FTP within the remit of our current legislative framework</td>
<td>-</td>
</tr>
<tr>
<td><em>Deferred 2020</em> Consider our expert witness arrangements</td>
<td>10,000</td>
</tr>
<tr>
<td>Improve our processes around obtaining feedback from individuals involved in the FTP process</td>
<td>-</td>
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</table>

**We Deliver Value**

<table>
<thead>
<tr>
<th>Proposed Action</th>
<th>Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review our Equality &amp; Diversity Policy and actions and engage with the profession on equality and diversity to ensure we are an inclusive regulator</td>
<td>8,000</td>
</tr>
<tr>
<td>Seek operating efficiencies to achieve maximum value</td>
<td>2,000</td>
</tr>
<tr>
<td><em>Deferred 2020</em> Review IT support contract arrangements</td>
<td>2,520</td>
</tr>
<tr>
<td><em>Deferred 2020</em> Review our IT document management arrangements</td>
<td>2,520</td>
</tr>
<tr>
<td>Review our physical documentation in the office and external archive</td>
<td>16,538</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>165,482</td>
</tr>
</tbody>
</table>

**Reporting**

9. We currently report to Council quarterly by presenting a paper and an associated annex that sets out the projects in table format. We will make changes to how we report on our business plan in 2021. We aim to provide Council with greater clarity on both the progress we make on each business plan item and whether the progress made has garnered the benefits that we
expect to be garnered. We will implement a new reporting process that includes a summary dashboard.

Council considerations

10. It is our view that the projects identified present the most impact and best use of our resources.

11. Our intention is that Council is clear as to what each project entails to ensure objectives and benefits are realised and allow budgets to be agreed.

12. There are equality implications arising from this paper. We will carry out equality impact assessments on those business plan items that have an impact on registrants, patients and staff. For example, the proposals also present opportunities and requirements to engage with all our stakeholders as part of the work and to communicate changes to the business plan.
Business Plan

2021
About the GCC

The General Chiropractic Council is an independent statutory body that regulates the chiropractic profession. We protect the health and safety of patients undergoing chiropractic treatment by ensuring high standards of practice, and by approving and monitoring chiropractic education programmes.

The GCC was established as a result of The Chiropractors Act 1994 but remains independent of government and the chiropractic profession. The Health and Social Care (Safety and Quality) Act 2015 implemented new over-arching objectives across health and care regulators, which reinforced the role of regulators to:

- protect, promote and maintain the health, safety and well-being of the public
- promote and maintain public confidence in the profession of chiropractic
- promote and maintain proper professional standards and conduct for members of that profession

The GCC has a duty within its Act to develop the profession.

As the UK’s regulator of chiropractors, we take our duties seriously. It is vital that:

- patients and the public can be assured that they are seeing a well-trained and competent chiropractor. Should they have any concerns about a chiropractor, we will investigate them and take action if necessary
- registered chiropractors and UK professional bodies feel engaged with the work we do to promote standards and develop the profession and can collaborate with us should they wish to. The profession values our approach to best practice to enable continuous learning and is confident in our right touch approach to regulation
- key stakeholders want to work with us to uphold our core duties to protect patients and improve professional standards and trust us to deliver effective and efficient services
Background

The GCC five-year strategy was first considered by Council in September 2018 and was agreed in December 2018. Our strategy intentionally sets out to:

- move to being less reactive and more proactive in our regulatory work
- increase our activity in enabling the development of the profession
- place stronger focus on engagement and collaborative working
- emphasise our commitment to ensure the public, patients, registrants, associations and stakeholders are satisfied with the service we provide
- deliver cultural improvement to the way we work alongside core regulatory process changes

Our Aims for 2021

During the first two years of our strategy we have worked towards giving ourselves a platform to build on; developing our foundations and transforming how we work.

In 2019, the first year of the new strategy, we implemented key technological changes to the organisation, changed some of our fitness to practise and CPD processes and made progress on our financial sustainability plan.

In 2020 we have continued to work to refine the building blocks laid in 2019 in areas such as fitness to practise, communications and registrations. We have progressed our work into developing the profession, which has garnered new research which we will endeavour to use as part of our ongoing guidance and engagement with the profession.

Our aims for the business plan 2021, the third year of the five-year strategy, is for the projects that we undertake to contribute to lasting change; increasing our knowledge base; improving our ability to carry out our core functions and meeting our regulatory duties even more effectively.

An area of focus will be on supporting professionalism within chiropractic and enabling it to flourish and develop. This key theme will cut across our broader strategic aims and encompass much of our work and thinking. We aim to:

- develop engaging content and build on research findings and emerging themes from 2020, to bring our work on professionalism in 2021 to life
- use our growing knowledge and insights to carry out activities, allowing us to work with our stakeholders to create cultures and working environments that promote and support our registrants’ professionalism
- enable education providers to develop and deliver learning that embeds professional values and behaviours.
- ensure that registrants have, and maintain, the right knowledge, skills and expertise to deliver safe, high quality care
This will require us to evolve our existing reactive model of regulation while also investing in work that helps to prevent poor professional practice.

Professionalism is the thread that runs through undergraduate education, into practice and throughout a chiropractor’s career. Ensuring professionalism is embedded early on a registrant’s journey will have an impact on the whole profession in the long term.

We will not be able to do this on our own. As a regulator, we are tasked with statutory responsibilities and have the powers to carry them out. Equally, we work within a discreet system of chiropractic for example, the Royal College of Chiropractors and the Education providers each seeking to make an impact on the professionalism of current and future registrants. As such, we will work collaboratively with these stakeholders influencing their actions such that the system itself leads the way for the benefit of patients and the public.

We will also engage more actively with the profession, patients and the public, particularly in relation to misinformation and equality, diversity and inclusivity – areas that currently present issues in wider society.

Projects and areas of work relating to our strategic objectives of ‘Promoting Standards’ and ‘Developing the Profession’, have been developed through discussions with Committees and Council member reference groups and with other stakeholders important in the implementation of our ambitions.

Changes made to our staff structure in 2020 allow us to now carry out our core tasks fully. With a solid foundation, we can enhance what we do as standard, and do it well consistently. In 2021 we can be more ambitious in relation to our regulatory functions which will allow us to tackle our work programme confidently.

The proposed actions within the business plan should not be viewed separately as areas of improvement isolated from our core work. Projects that we will undertake relate directly to our core duties and our staff doing all our work well, not just in 2021 but in years to come.
## GCC Strategy 2019 – 2023

<table>
<thead>
<tr>
<th><strong>WE PROMOTE STANDARDS</strong></th>
<th><strong>WE DEVELOP THE PROFESSION</strong></th>
<th><strong>WE INVESTIGATE AND ACT</strong></th>
<th><strong>WE DELIVER VALUE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><em>We will set, assure compliance and promote educational, professional &amp; registration standards alongside lifelong learning</em></td>
<td><em>We will facilitate collaborative strategic work to support the profession in its development</em></td>
<td><em>We will take right touch action on complaints, the misuse of title or where registration standards are not met</em></td>
<td><em>We will be a great place to work, work together and deliver effective/efficient services</em></td>
</tr>
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</table>

| **Our continued development of professional and registration standards will ensure those standards are relevant and meaningful** | **Our support for further research and clinical governance work will assist the profession in building the available evidence base for chiropractic care** | **Our development of more ‘right touch’ fitness to practise approaches will provide assurance that appropriate action/support has taken place to ensure patients are safe** | **Our communication, engagement and collaboration will build confidence and trust** |
| **Our publicity on the benefits of seeing a registered chiropractor will promote confidence in the public and patients** | **Our contribution to creating a clearer shared professional identity will help enhance the profession’s development of its identity and reputation** | **Our sharing of learning and intelligence from complaints will support registrants in preventing issues and concerns** | **Our financial planning and use of resources will provide a secure future for the GCC** |
| **Our assurance and support of education provision will reflect best practice in education and healthcare** | **Our involvement in a profession wide development strategy will support the profession to play its part in the wider/national health and well-being system** | **Our focus and transparent work on protecting the title ‘chiropractor’ will provide clarity to the public and registrants** | **Our effective procedures, processes and IT will provide staff, chiropractors and the public with an efficient modern experience** |
| **Our assurance and support of continuing professional development will facilitate best practice lifelong learning** | **Our communication of guidance and policy will support chiropractors and the profession to deliver great care** | **Our approach to decisions on registration standards will provide clarity to the public, students and registrants** | **Our culture, values and people development will make us an employer of choice** |
We Promote Standards

We will set, assure compliance and promote educational, professional & registration standards alongside lifelong learning

In 2021 we aim to build on the findings of the public perceptions research - the profession is largely trusted and perceived as giving benefits. However, a significant number of people are not aware that the profession is regulated and chiropractors must be qualified. A key area of focus will be maintaining public confidence in regulation and that patients understand the risks and benefits of treatment through informed consent and shared decision-making. We will also take regulatory action and promote evidence-based practice to counter misinformation and disinformation.

Actions

✓ Develop a digital toolkit to assist chiropractors to reflect on their own website and web material
✓ Develop a digital toolkit to support chiropractors with their communication with patients/public.
✓ Produce engaging, supporting information for patients/public and a dedicated area on our website
✓ Respond to potential legislative changes relating to Education and Registrations including CPD, emerging from Department of Health and Social Care’s regulatory reform agenda
✓ Determine the need for changes to our Education Standards and Quality Assurance processes by carrying out a scoping review

Core tasks

✓ Publish the Code and guidance covering the standards of chiropractic practice and professional conduct that all chiropractors must meet
✓ Publish and communicate relevant research findings (both GCC and others)
✓ Continue to assure the quality of undergraduate chiropractic education and training
✓ Set educational standards for individuals training to become chiropractors
✓ Approve new and support current education programmes throughout the year
✓ Maintain the register of chiropractors and register new applicants
✓ Carry out annual Continuing Professional Development (CPD) monitoring
✓ Carry out annual monitoring of the five chiropractic colleges to enhance the quality of chiropractic education
✓ Meet the demand for carrying out Test of Competence assessments for overseas graduates
✓ Continue to progress our student engagement plan

Our guidance sets out best practice, explains processes to follow, provides information about legislation and shows where additional support and advice can be found. Our Education Standards and assurance of chiropractic education will produce high quality graduates who are ready to practise.
We Develop the Profession

We will facilitate collaborative strategic work to support the profession in its development

The GCC is under a duty to support the long-term development of the chiropractic profession and understanding the public and patients’ experience of chiropractic such that the policies of the GCC better take that into account.

By the end of 2020 we completed several projects under the strategic aim of developing the profession.

Developing the profession in 2021 will be about developing professionalism. We will reflect upon intelligence gained from 2020 and undertake work that will enable us to support registrants to meet the standards that we expect of them. We aim to ensure that registrants have, and maintain, the right knowledge, skills and expertise to deliver safe, high quality care.

Actions

✓ Embed best practice in imaging and incident reporting to ensure safer care
✓ Complete research started in 2020 to survey existing chiropractic patients on their experiences and satisfaction to strengthen patient voice
✓ Enhance professionalism within chiropractic by promoting opportunities for graduates, researchers, academics and other career pathways

Core tasks

✓ Continue to work closely with professional bodies
✓ Continue to participate in the UK Chiropractic Forum, meeting at least three times in the year
✓ Participate in Forum of Chiropractic Deans to identify sector challenges, share good practice and support the development of chiropractic educators and education programmes and progress work on outcomes for graduates twice a year
✓ Engage effectively with registrants
✓ Ongoing engagement with students at all stages of their training
✓ Attend each professional association’s annual conference or equivalent event
✓ Ongoing supportive communication and engagement with registrants around CPD and becoming reflective practitioners
✓ Collect, analyse and report on generic learning points from IC meetings and fitness to practise hearings and consider implications and lessons for the profession

We will build on our relationships with all our key stakeholders and seek to build in the ‘patient voice’ to our work, capitalising on our research in 2020 with the public and planned work with patients/public in 2021.
We Investigate and Act

*We will take right touch action on complaints, the misuse of title or where registration standards are not met*

The organisation’s new staff structure allows us to carry out work in the fitness to practise department fully and effectively.

In 2021 we will work to streamline the department further in order to deal appropriately with cases to better protect the public.

Covid-19 has impacted on Department of Health and Social Care’s regulatory reform agenda. Should this work move forward we will move quickly to respond to any requirements, pursuing the changes we require.

**Actions**

- Respond to potential legislative changes relating to FTP and Governance emerging from the Department of Health and Social Care’s regulatory reform agenda
- Continue to streamline our processes and make relevant operational changes within FTP within the remit of our current legislative framework
- Consider our expert witness arrangements
- Improve our processes around obtaining feedback from individuals involved in the FTP process

**Core tasks**

- Investigate all complaints received from the public
- Investigate all complaints that relate to illegal use of the title of ‘chiropractor’
- Hold a minimum of twelve Investigating Committee meetings
- Conclude the increased number (30%) of Professional Conduct Committee hearings to reduce our caseload caused by Covid-19
- Hold Interim Suspension Hearings in a timely manner
- Report quarterly on our progress to the Professional Standards Authority
- Report quarterly on key performance indicators to Council
- Continue work started in 2020 to recruit new Committee members
- Continue to engage with committee members, including carrying out appraisals, training and learning opportunities
- Start work on IC member term extensions
- Carry out relevant appointments and reappointments for IC members

Our current legislative framework limits how we can progress our fitness to practise work. In 2021, we aim to streamline our current processes as much as possible within the restraints of our current statutory capabilities. Our plans to recruit new experts, gather feedback on FtP case progression and streamline operationally all work towards improving our ability to investigate complaints efficiently pre-regulatory reform and meets our aim to be more ‘right touch’ in our fitness to practise approach.
We Deliver Value

We will be a great place to work, work together and deliver effective/efficient services

As a regulator we have a role to play by promoting equality and diversity and we recognise that we can do more.

In 2021 we will work to ensure we are an inclusive regulator, committed to working together with all our stakeholders to build confidence and trust.

Covid-19 has caused all organisations to consider their financial situation and the GCC is no different. We will aim to find efficiencies where we can in 2021.

Actions

✓ Review our Equality & Diversity policy and engage with the profession on equality and diversity to ensure we are an inclusive regulator
✓ Seek operating efficiencies to achieve maximum value
✓ Review IT support contract arrangements
✓ Review our IT document management arrangements
✓ Review our physical documentation in the office and external archive

Core tasks

✓ Continue to improve our communication methods – continual updates of the website, social media updates and engagement, monthly newsletter, new blogs and vlogs
✓ To improve our service responsiveness and to continue to improve our website and registrant portal
✓ Deliver the third year of our three-year financial sustainability plan
✓ Engage and collaborate effectively with other regulators to share best practice
✓ Ensure we meet the annual PSA performance standards
✓ Maintain and review our governance policies and procedures
✓ Continue our work to increase the contentment and wellbeing of our staff team
✓ Implement a learning and development programme for our staff and assess performance and development needs on an individual basis

Our work to deliver effective and efficient services will continue in 2021 with our identified actions ensuring long term benefits. Work in these areas will ensure value and good practice in the future.
1. **Develop a digital toolkit to assist chiropractors to reflect on their own website and web material**

**Allocated costs**

£10,000 – Communications support and consultancy, multimedia, web design, marketing

**Aims**

- Prevention of public harm due to false, misleading or deceptive communication, information and advertising
- Provision of safe, effective chiropractic treatment based on the best available evidence

**Key deliverables**

A web-based ‘toolkit’ for advertising to host the current and new guidance and resources to include but not limited to:

- Reviewing the current advertising guidance and social media guidance, updating if necessary, communications and reminding thereof
- Information relating to the ASA/CAP Guidance and advertising requirements, evidence and the need to consider advertising from a consumer perspective. Focused on the outcome – preventing harm from false, misleading or deceptive advertising
- Any public statements and claims of effectiveness for chiropractic care and conditions that chiropractic can treat being honest, legal, decent and truthful; no promotion of unfounded ideas e.g. immunity claims
- Reminding chiropractors of need to check any ‘old’ information or available information about them/their practice on the web and asking for things to be amended or deleted (keep copies of correspondence); if retiring then to ensure information is removed
- FAQs, news articles and good practice case studies: podcasts, blogs, vlogs of chiropractors/experts/IC/PCC members,
- Linked to this would be a quarterly advertising communication campaign to ensure this is given due prominence.

**Benefits and Measures**

We expect that some of the benefits of this project will be:

- Avoid/reduce patient harm from poor advertising
- Reduce the risks of patients being misled into questionable treatment
- Encourage the profession to take responsibility for their advertising ensuring it is current, accurate and appropriate in accordance with GCC, ASA and CAP guidance
- Equip chiropractors with the appropriate tools in relation to advertising
- Collating all available tools and resources in one easy to find location

Some of the methods we will use to measure success include:
Annex B

- Carrying out surveys of registrants and patients and public perception of chiropractic
- Increased registrant engagement – web traffic, positive responses via email and social media
- Evidence of positive stakeholder engagement (associations etc.)
- Data analysis of FTP complaints – reduction in ‘advertising’ complaints
- Sample website ‘audits’ to determine reduction in misleading information appearing
2. Develop a digital toolkit to support chiropractors with their communication with patients/public.

Allocated costs

£20,000 – costs to cover external agency support and development and design of resources, vox pops etc. for website. To maximise efficiency and use of resources this project will be combined with business plan item 3 (below) so that material is co-produced by patients and registrants.

Aim:

- Enhanced quality of registrants’ communications with patients and the public and the perception of chiropractic as a trustworthy and accepted profession within wider healthcare system

Key deliverables

A web-based communications ‘toolkit’ pitched at supporting registrants to enhance the quality of their communications with patients and the public and the perception of chiropractic as a trustworthy and accepted profession. This project builds on the 2020 programme of research findings and links to GCC guidance issued during the Covid-19 pandemic relating to claims by some chiropractors that spinal adjustment and/or manipulation may protect patients from contracting Covid-19 and boost the immune system.

To include:

- Resources around communicating with patients, such as, different questions and approaches to identify patient ideas, concerns and expectations; exploring non-verbal communication mechanisms, communicating benefits and risks of treatment options, including adjunctive therapies; supporting patients to make decisions about treatment;
- Messaging and use of language and pseudo-scientific terms; current evidence around effects of manipulation (no evidence for subluxation or its correction. Increasing research demonstrating harmful effects of giving patients the message that ‘bones are out’, misplaced, damaged or that they have something that will cause illness if not ‘corrected’)
- Risk communication - clear, accurate and forming part of shared decision making and consent
- Need for chiropractors to support current, authoritative public health advice and encourage patients to do so, for example no anti-vaccination messaging
- Case scenarios, patients talking about what they expect; social media and blog campaign to influence changes in behaviour and spell out our expectations of registrants in terms of language and quality of communication with patients in clinic etc.

Benefits and Measures

We expect that some of the benefits of this project will be:
Annex B

- GCC seen as proactive and supportive - direct involvement of registrants, seeking their views of patients' information needs; thoughts on best practice in terms of communications and what can typically go wrong
- Registrant input on how the behaviours of other chiropractors could be influenced and specifically what guidance and resources would be useful for registrants, including their thoughts on content, format, channel etc.
- Resources for registrants and for education institutions to use in their degree programmes
- Collation of available tools and resources in one easy to find location to provide chiropractors with the appropriate tools in relation to communication and GCC expectations

Some of the methods we will use to measure success include:

- Carrying out surveys of registrants and patients
- Increased registrant engagement with GCC resources – web traffic, responses via email and social media
- Improved communication between registrant and patient and patient expectations of their interests being put first, being involved in decision-making about their treatment and care and treated with dignity, respect and compassion.
3. Produce engaging, supporting information for patients/public and a dedicated area on our website.

Allocated costs

£20,000 – to cover external agency support; website development and development and design of resources, vox pops etc for website. To maximise efficiency and use of resources this project will be combined with Project 2 so that material is co-produced by patients and registrants.

Aims:

- Supporting patients’ understanding of and engagement with their healthcare
- Promoting people centred, evidence-based care
- Ensuring that patients are aware that any claims made that certain treatments can help a health condition or general health need to be based on acceptable evidence: it is important that patients clearly understand what treatment is being offered to them and can give valid consent and the benefits thereof
- Exploring what is chiropractic, and approach to managing MSK pain via package of interventions that includes manual treatments, exercise and education/psychological approaches - these should heed best evidence for what is effective and that chiropractors are trained in (there is a tendency by some to be over reliant on spinal manipulation and neglect the other effective approaches, leading to big variation in the consistency of care that patients will receive).

Key deliverables

To be considered in parallel with work on digital toolkits (business plan item 2, above) and as part of our communications plans and website improvement:

- Patient information on what to expect from Chiropractic, building on ‘Patient Expectations’ set out in The Code and the recent public perceptions research
- Myth-busting information publicised through a range of sources that are more likely to reach the public
- Formation of a virtual public/patient panel and planned engagement activities

Benefits and Measures

We expect that some of the benefits of this project will be:

- A better understanding of chiropractic, its risks and benefits, by patients
- More information and resources available for patients/public in more visible place on website
- GCC seen as proactive and supportive
- Greater involvement of registrants to inform and develop resources for patients

Some of the methods we will use to measure success include:

- Monitoring web traffic
- Positive media sentiments
4. Respond to potential legislative changes relating to Education and Registrations including CPD, emerging from DHSC’s regulatory reform agenda

Allocated costs

£10,000 – to cover legal fees and drafting of Rules

Aims:

- We will respond to potential legislative changes in Education, Registrations and CPD, emerging from DHSC’s regulatory reform agenda. We will seek appropriate rule changes.

Key deliverables

- Regulators will continue to have an education and training function written in legislation which should be consistent amongst the regulators.
- Regulators will continue to have a registration function written in legislation which should be consistent amongst the regulators.
- Reforms will provide the regulators with greater autonomy to set out their operating processes. This will be achieved by repealing or revoking legislation that is overly prescriptive and will instead provide regulators with greater freedom to make changes to their operational procedures through rules.

Benefits and Measures

We expect that some of the benefits of this project will be:

- Greater autonomy to set out their own operating processes and procedures;
- We will have better control over our legislative framework and fees and will be able to change these much more easily through consultation and a Secretary of State approval process.
- Regulators to be given broadly equivalent powers to maintain a level of consistency;
- Able to repeal or revoke legislation that is overly prescriptive;
- Reform proposals may not require Privy Council approval;
- Registrant’s rights remain protected
- Public safety remains paramount and at the heart of professional regulation.
5. Determine the need for changes to our Education Standards and Quality Assurance processes by carrying out a scoping review

Allocated costs

£7,500 – for Education Committee involvement

Aim

- Ensure current Education Standards and approval processes are fit for purpose and determine the need for changes or full-scale review
- Review levels of assurance provided by the existing quality assurance methods and explore mechanisms for enhancing assurance and informing QA activities
- Ensure Standards address both the requisite technical competences but also enable education institutions to develop and deliver learning that embeds professional values and behaviours
- Ensure that qualifications we approve remain fit for purpose and meet future patient needs

Key deliverables

- Our approach to the setting and monitoring of education Standards enables an open dialogue with providers and opportunities to reflect and refine the learning they provide, ensuring it supports professionalism and prevention
- Formation of Education Committee working group and scoping review report for Education Committee

Benefits and Measures

We expect that some of the benefits of this project will be:

- Augmented QA processes that better protect patients/public
- Effective and efficient QA processes and procedures
- Ensure that the Education Standards continue to enable approved programmes to graduate chiropractors who are fit, ready and safe to practise and equipped for the demands of independent practice. This will include scientific and clinical knowledge, and clinical and professional skills and have an emphasis on professionalism and contribute to defining our education requirements for new registrants for the next decade and beyond
- Consideration given to the fact that NHS roles represent a small minority of the current work carried out by chiropractors, and the need to maintain the distinctive nature of the profession as well as more integration into mainstream healthcare system
- Where chiropractic needs to be in future for the sustainability of the profession e.g. Chiropractic education looking at healthcare needs of the nation, for example our aging population
6. Embed best practice in imaging and incident reporting to enhance safer care

Allocated costs

£10,000 – to convene an expert group, using experts and producing guidance and resources and communication support

Aim

- To improve best practice in two areas of concern in chiropractic:
  - Imaging – following Coroner’s report
  - Incident reporting – we are concerned that such a system is not utilised as widely as it could or should be in chiropractic practices

Key deliverables

- Scoping to be undertaken
- Engage effectively with key stakeholders and the profession on relevant areas
- Develop and publish guidance
- Implement necessary changes and communicate

Benefits and Measures

We expect that some of the benefits of this project will be:

- Clarity around the role of imaging in chiropractic and GCC guidance to registrants and information for patients
- Able to embed best practice in all settings where chiropractic care is provided.
- Build on the findings from the research with registrants into patient safety incident reporting procedures and systems, comfort in raising patient safety concerns with employers and how learning is taken on board from incidents
- Better and more regular use of the current system CPiRLS (The chiropractic patient incident reporting and learning system, an online reporting and learning forum that enables chiropractors to share and comment on patient safety incidents)
- Help encourage all chiropractors to adopt incident reporting as part of a blame-free culture of safety, and a routine risk management tool
- Shared learning from collective experience in the interests of patients
7. Complete research started in 2020 to survey existing chiropractic patients on their experiences and satisfaction to strengthen patient voice (Phase 2 of project commenced in 2020)

Allocated costs

£24,404 – research costs (already contracted)

Aim

- A greater understanding and evidence base of chiropractic patient experiences as to why they seek out chiropractic care; what information is sought and accessed that may influence patient choices regarding chiropractic care; what patients feel are important aspects of their experiences both positive and negative regarding their care (e.g. the impact of registration, education etc) and patient satisfaction or otherwise with chiropractic care and the factors influencing these perceptions.

Key deliverables

REPORT for Phase 1: Patient experience and satisfaction during chiropractic care: A systematic review of the literature concerning chiropractic patient experiences and satisfaction nationally and internationally.

REPORT for Phase 2: Exploration of patients’ experience and satisfaction undergoing care as delivered by UK registered chiropractors: A mixed method study to highlight the patients’ voice regarding experiences and satisfaction with chiropractic care as delivered by GCC registrants.

Benefits and Measures

We expect that some of the benefits of this project will be:

- A contemporary evidenced based understanding of the experiences of and satisfaction with chiropractic care as delivered by chiropractors in the UK
- Answers to fundamental questions as to:
  - Why do patients seek out chiropractic care?
  - What information is sought and accessed that may influence patient choices regarding chiropractic care?
  - What patients feel are important aspects of their experiences both positive and negative regarding their care (for example the impact of registration, education etc)
  - Patient satisfaction of otherwise with chiropractic care and the factors influencing these perceptions
- Allow us to enhance our relevant regulatory functions - to identify key areas to advise/guide the profession and inform patients, enabling a better understanding of the experience of care from members of the public when being cared for by a chiropractor and what they wish to see from chiropractic services.
- Discussions with stakeholders will also be informed by the patient voice.
- Shape development of guidance and resources for patients/public.
8. Enhance professionalism within chiropractic by promoting opportunities for graduates, researchers, academics and other career pathways

*This business plan item was deferred by Council in June 2020*

Allocated costs

£12,000 – Royal College of Chiropractic to undertake work on our behalf.

Aim

- To raise the profile of a range of career opportunities within chiropractic to ensure the continued research base for chiropractic, ensure the supply of future academic staff and address the need for future leaders

Key deliverables

- A selection of videos of chiropractors in different roles discussing their experiences, on the GCC website, showcasing the variety of opportunities to graduates within the chiropractic profession.
- Greater awareness in chiropractic of roles and opportunities within education, research and the NHS.

Benefits and Measures

We expect that some of the benefits of this project will be:

- More chiropractic students are moving into different roles within the profession

Some of the methods we will use to measure success include:

- Data analysis
- Carrying out research in future years
9. Respond to potential legislative changes relating to FTP and Governance emerging from the department of health’s regulatory reform agenda

*This business plan item was carried over from the 2020 business plan*

Allocated costs

£10,000 – to cover legal fees and drafting

Aim

- Ensure any rule changes cover our organisational needs by responding appropriately and planning for changes in 2022

Key deliverables

- Relevant process changes embedded

Benefits and Measures

We expect that some of the benefits of this project will be:

- Only serious cases that demonstrate real fitness to practise concerns will proceed to investigation and decision due to effective and robust triage processes
- Introduction of Case Examiners with consensual disposal options will reduce overheads with antiquated IC model and ensure cases are considered routinely instead of on a schedule. Cases will be resolved more quickly for the benefit of all parties
- Less substantive cases will be needed each year and only those likely to lead to removal. This will reduce the stress of FtP on registrants/witnesses but also significantly reduce costs associated with PCC work.

Some of the methods we will use to measure success include:

- Case data
- Positive feedback from all parties
- Financial analysis
10. Continue to streamline our processes and make relevant operational changes within FTP within the remit of our current legislative framework

Allocated costs

£0

Aim

- Speed up and make the investigation process as efficient as possible
- Improve our internal processes

Key deliverables

- Relevant process changes embedded
- Ability to move cases forward quicker as we will have more experts and less reliance on a small pool of individuals
- Reduced costs

Benefits and Measures

We expect that some of the benefits of this project will be:

- Ability to progress cases more quickly
- Complainants and registrants have a better experience of the process
- Cost savings
- Caseloads are reduced leading to improved staff wellbeing

Some of the methods we will use to measure success include:

- KPIs for timeliness is evident in reporting - less cases in the pipeline
- Post-complaint surveys
- Financial and data analysis
- Staff engagement survey – evident in 1:1 meetings
11. **Consider our expert witness arrangements**

*This business plan item was deferred by Council in June 2020*

**Allocated costs**

£10,000 – recruitment drive costs

**Aims**

- Recruit new experts to increase pool

**Key deliverables**

- Ability to move cases forward quicker as we will have more experts and less reliance on a small pool of individuals
- Reduced costs

**Benefits and Measures**

We expect that some of the benefits of this project will be:

- More experts should mean that work is spread across more people, meaning it can be completed more quickly.
- Cost savings
- Less expert issues arising in cases
- Consistency in quality and length or reports
- Time benefits
- Improved speed in case progression

Some of the methods we will use to measure success include:

- Reduced annual costs for expert witnesses visible in finances
- Improved speed in case progression visible in statistics
- Feedback
- Data analysis
12. Improve our processes around obtaining feedback from individuals involved in the FTP process

Allocated costs

£0

Aims

- Improvements based on the experiences of people who have been involved in our FTP processes

Key deliverables

- Creates a baseline of information that can be fed back to the profession
- Relevant process changes embedded
- New process in place: surveys, metrics, analysis of stats, reviewed and monitored

Benefits and Measures

We expect that some of the benefits of this project will be:

- Greater understanding of how the process affects individuals - reported on to SMT, Council.
- May outline areas of change that are necessary
- Clarity of publicly available information improved, if required
- May garner positive or negative feedback on staff performance that can assist with identifying development areas or allow for the sharing of positive feedback
- Positive feedback from PSA about the implementation of a regular feedback mechanism – visible in PSA annual review 20/21.

Some of the methods we will use to measure success include:

- Relevant changes implemented, where possible
- Positive feedback received from PSA on any implementation in PSA annual review 20/21.
- Reporting to SMT and Council
13. Review our Equality & Diversity Policy and actions and engage with the profession on equality and diversity to ensure we are an inclusive regulator

Allocated costs

£8,000 – for expert support, communications support and external activities (workshops) etc.

Aim

- We will work to ensure that we are an outward facing, inclusive regulator and engage with our registrants, stakeholders and the public effectively.
- Ensure that we do not indirectly discriminate against any individuals that deal with the GCC
- To ensure that everyone has access to the same opportunities and the same, fair treatment

Key Deliverables

- EDI is embedded effectively across the organisation
- Establish an EDI strategy, action plan and annual report
- Better collection and use of EDI data
- Engage effectively with our registrants and members of the public/complainants on EDI by holding workshops and online web meetings
- Carry out staff training
- Ensure our recruitment processes are bias free

Benefits and Measures

We expect that some of the benefits of this project will be:

- Our communication methods are improved and free from bias
- We do not discriminate against any protected groups unconsciously
- Develops the chiropractic profession
- Valuing diversity improves the GCC’s reputation
- Diversity management opens up new talent
- Equality and diversity add new skills to teams
- Diversity in the workplace promotes innovation

Some of the methods we will use to measure success include:

- We will meet our public responsibilities around the equality duty
- We meet the PSA Standard relating to Equality and Diversity
- Greater engagement with BAME registrants
14. Seek operating efficiencies to achieve maximum value

Allocated costs

£2,000 – For legal reviews of contracts

Aim

- To review and appoint investment advisors to maximise yields and capital appreciation of investment portfolio
- To maximise returns on deposits and reduce charges
- To ensure that we are getting value for money and to consider making any changes
- In conjunction with the FTP team, consider fee arrangements with our external legal provider
- To modernise our hearings by moving from transcribers to loggers
- To reduce costs

Key deliverables

- Reviews of investments, banking arrangements, estates arrangements, fee charging arrangements, transcription requirements

Benefits and Measures

We expect that some of the benefits of this project will be:

- Reduced costs
- Balanced budget in 2022

Some of the methods we will use to measure success include:

- Financial analysis
15. Review IT support contract arrangements

*This business plan item was deferred by Council in June 2020*

Allocated costs

£2,520 – for IT expert consultancy fees

Aim

- To ensure that the GCC’s IT arrangements, including service delivery, are fit-for-purpose

Key deliverables

- Review on whether our current IT arrangements are still an appropriate fit for the GCC.

Benefits and Measures

We expect that some of the benefits of this project will be:

- Better IT provision
- Understanding in greater detail what we are receiving as part of our contract arrangements

Some of the methods we will use to measure success include:

- Reviewing arrangements regularly
- Discussing with staff members and our IT provider to see whether there has been a positive change
16. **Review our IT document management arrangements**

*This business plan item was deferred by Council in June 2020*

**Allocated costs**

£2,520 – for IT expert consultancy fees

**Aim**

- To ensure that our document management arrangements are fit-for-purpose and we are utilising best practice – considering cyber security, records retention and ease of use to the business.

**Key deliverables**

- Review documentation management arrangements to define any changes that should be made. This may require moving our electronic documentation to ‘the cloud’

**Benefits and Measures**

We expect that some of the benefits of this project will be:

- We will have a clearer understanding of what and where our data is kept
- New document management arrangements will be embedded within the organisation and are a key component of how we operate.
17. Review our physical documentation in the office and external archive

Allocated costs

£16,538 – to pay for a temporary staff member (9-month contract) to work through the external archive removing the need for it.

Aim

- To ensure that we are following our records retention policy and do not keep physical documentation for longer than is necessary

Key deliverables

- Review of all our physical documentation in the office and in archive and appropriate actions carried out such as scanning to our system and/or destruction.

Benefits and Measures

We expect that some of the benefits of this project will be:

- Lower risk associated with our data protection duties
- Less space required at offsite facility (if any)
- Less paper in the office and more efficient ways of working

Some of the methods we will use to measure success include:

- Cost savings – reduces annual costs of £8,665.32 to £0.
- If the archive has been cleared in line with our records retention policy the benefit will have been met.
- More office space
**Summary**

In fulfilling its statutory duties under the Act, the Council is required to formally approve the annual budget and business plan and monitor their delivery.

The Council reviewed the initial budget estimates for the 2021 financial year in September of this year. The purpose of the initial budget was to simulate various income reduction scenarios and risk-assess their implications for our operating capability considering the continued coronavirus pandemic crisis.

This paper presents the proposed budget for the financial year January – 31 December 2021.

The proposed budget is a deficit budget, of £135,023. This follows a significant underspend this year (2020) as seen in the earlier finance update paper. As such, the deficit can be funded from the expected surplus.

**Action**

To approve.

**Recommendations**

The Council is asked to:

- Review and approve the proposed budget for the financial year 1 January – 31 December 2021.

**Annexes**

Annex A – Summary Budget 2021
Budget setting process

1. At the start of the year we were in the early stages of organisational change. At the end of the first quarter, and as we now know, left the office environment for the rest of the year and our ways of working changed to virtual. Reforecasting during the year saw ‘savings’ in many cost centres (including travel and accommodation, and projects) and increased expenditure and workload (up by 33%) in fitness to practise investigations and preparatory work for hearings, a somewhat turbulent expenditure picture informing budgeting.

2. Further, and as reported to Council in September our income, unlike most years hitherto, has been unpredictable and whilst the signs are positive, the ‘tail’ of the retention period means (even at this late stage) we do not have a perfect picture and have maintained a cautious approach as indicated at the meeting of Council in September 2020.

3. As such it has been challenging in developing the proposed budget, and in its presentation; nonetheless it is informed by detailed preparation and analysis.

4. The Executive Team implements a bottom-up approach to the setting of our income and expenditure estimates which is fed into the budget model. The estimates are, in general, based on levels of demonstrable planned activities. This year, the forecasting work prepared us well, particularly as regards the ‘carry-over’ of necessary and statutory activity next year in relation to ten Professional Conduct Committee (PCC) hearings.

5. Budget holders complete templates for their cost and income centres, then reviewed by the Director of Corporate Services (DCS) for consistency and affordability. The DCS then reviews and finalises the proposed spend estimates with the CER before confirming to the Executive the final budget to be presented to Council.

Budget 2021 highlights

6. In headline terms the proposed budget for 2021 financial year is summarised below.

<table>
<thead>
<tr>
<th>£’000</th>
<th>Budget 2021</th>
<th>Full Yr Forecast 2020 (Revised)</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Income</td>
<td>2,770</td>
<td>2,793</td>
<td>-23</td>
</tr>
<tr>
<td>Expenditure</td>
<td>2,915</td>
<td>2,603</td>
<td>-312</td>
</tr>
<tr>
<td>Surplus / Deficit</td>
<td>-145</td>
<td>190</td>
<td>-335</td>
</tr>
</tbody>
</table>

7. The budget for 2021 shows a headline deficit of £145k. This includes £10,000 funded from the Department of Health’s restricted grant fund (which appears in the 2019 audited balance sheet) and which is written back to the budget, as such the indicative underlying 2021 budget deficit is £135k.
8. An outline commentary on the reasons for the variations between the 2020 reforecast and the proposed 2021 budget is presented in the Annex A, with the material changes explained below.

**Material changes between forecast 2020 and budget 2021**

<table>
<thead>
<tr>
<th>Cost centre</th>
<th>Amount</th>
<th>Material variations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council</td>
<td>-£53k</td>
<td>Includes a technical write-back of £29k which is the excess of the accrued amount we allowed for in the 2019 accounts for the back-dated (2014/15 to 2019/20) NI and tax liabilities for Council meetings-related travel and accommodation expenses; (2) £16k for the tax/NIC liability due on the Council members travel and accommodation expenses for 2021/22.</td>
</tr>
<tr>
<td>Corporate Services</td>
<td>-£132k</td>
<td>Re-allocated salary costs from the CER’s office and whole-year costs of two staff; project work reviewing the physical documents and external archive (as in the 2021 business plan – Annex B, point 17).</td>
</tr>
<tr>
<td>Property</td>
<td>-£15k</td>
<td>The writing back of £13k for business rates accrued in 2019 into 2020; causing 2020 cost to appear lower that it really is.</td>
</tr>
<tr>
<td>Communications</td>
<td>-£78k</td>
<td>All connected to project work identified in the 2021 business plan (activities 1, 2, 3 and 13 of the Business Plan).</td>
</tr>
<tr>
<td>Investigating Committee</td>
<td>-£38k</td>
<td>Expert fees based on the expected charges next year.</td>
</tr>
<tr>
<td>Professional Complaints Committee</td>
<td>-£97k</td>
<td>Based on a 33% increase in caseload expected to be managed next year (including cases carried forward from this year to 2021 to clear backlog), plus the known cases to be heard next year and projected referrals from IC to PCC in 2021.</td>
</tr>
<tr>
<td>Interim Suspension Hearings (ISH) and Protection of Title (PoT)</td>
<td>-£29k</td>
<td>Budgets set to reflect expected expert fee charges in 2021: ISH (£12k) – based on estimated number of hearings; and PoT (£17k) is estimated costs of investigations and legal review of files.</td>
</tr>
<tr>
<td>Development</td>
<td>-£23k</td>
<td>Movement of the credit charges for retention renewal period from the Finance cost centre.</td>
</tr>
<tr>
<td>Quality Assurance</td>
<td>-£19k</td>
<td>Costs have increased in line with the number of educational institutions and planned visits in 2021.</td>
</tr>
<tr>
<td>Test of Competence</td>
<td>-£10k</td>
<td>This project is planned to be cost-neutral as there is an excess of income over its planned costs in 2021.</td>
</tr>
</tbody>
</table>

9. The waterfall chart below shows the variations between the revised forecast surplus of £190k and (brown bar) and the proposed 2021 budgeted headline deficit of £145k (blue bar) at the end of December 2021.
Budget 2021 assumptions

10. The principal assumptions underpinning the proposed budget are as follows:

- Estimated costs of implementing the projects and activities in the 2021 business plan (£166k).
- Retention income was risk-assessed and confirmed to Council in September 2020 as likely to be £2.6m. The proposed budget assumes this income will be achieved by the end of the extended renewal period on 14 December 2020.
- Specific supplier inflationary allowances for audit and insurance support services of 6% and 2% respectively).
- Additional staff costs of c.1% (£7.6k) of the salary budget.
- Cost estimates used in the budget have been accumulated on an activity basis wherever it is the most prudent approach to be adopted.
- Meetings of Council, Education Committee, Audit and Risk Committee will be held in-person and 1/3 of Professional Conduct Committee meetings will be held in person and the balance ‘virtually’. All meetings of the Investigating Committee will be virtual.

11. The variations between the proposed 2021 budget and the 2020 forecast income statement have been subject to thorough review and outlined in the Annex.

Budget sensitivities and stress testing

12. The budget remains sensitive to uncontrollable changes in retention fees and unpredictable increases in PCC costs.

13. In September 2020, we assessed the risk of a reduction in income due to the economic effects of the pandemic as low, between 1% to 3% reduction. Following the conclusion of the retention renewals, we expect to realise that revised income target £2.6m for 2021.

14. In the period to 7 December 2020, £2.4m was received from the registrants. Based on the positive renewal response rate to-date and taking into account the response rate in 2019 during the 14-day extended period of renewal, we conservatively estimate that 60% of the outstanding fees due from 7 – 14 December 2020 could be received. If 60% of unpaid registrants (85 of 141) pay by 14/12/20 and PCC costs remain unchanged – as per the base line shown in the table at paragraph 6 – we show a deficit of £145k.

15. To further improve the control of PCC-related costs in 2021, we carried out a careful analysis of cases to be managed next year and obtained detailed estimates of legal costs from our legal advisers. There is a significant increase in the 2021 budgeted PCC costs, compared with the 2020 forecast amount, due to the significant carry-over of activity from 2020 into 2021, plus known referrals from the Investigating Committee, and projected and realistic referrals next year.
16. While we continue to actively scrutinise and monitor the PCC costs base, we typically expect the costs to vary between 5% and 20% in any given period.

17. As such, we tested the impact of the retention income that is yet to be received in the last week of the extended retention renewal period (7 – 14 December ’20) and if there are increases in PCC costs by, say, 5% or 10%. The results are presented as follows:

<table>
<thead>
<tr>
<th>Risk events</th>
<th>Impact on 2021 surplus/-deficit</th>
</tr>
</thead>
<tbody>
<tr>
<td>• If 60% of unpaid registrants (85 of 141) pay by 14/12/20 and PCC costs remain unchanged – as per the base line shown in the table at paragraph 6 (that is. -£145k – the baseline)</td>
<td>-£145,023</td>
</tr>
<tr>
<td>• If 60% of unpaid registrants (85 of 141) pay by 14/12/20 and PCC costs increase by 5%</td>
<td>-£172,255</td>
</tr>
<tr>
<td>• If 60% of unpaid registrants (85 of 141) pay by 14/12/20 and PCC costs increase by 10%</td>
<td>-£199,486</td>
</tr>
</tbody>
</table>

18. In the same way that these additional costs might be anticipated, we could also reasonably, but cautiously, expect additional income. So, if much better outcomes are achieved (than currently assumed in the budget) regarding the number of registrants who are yet to pay their fees and in ‘new’ registrants joining the register in 2021, extra income of £66,550 will be achieved. This extra income is made up as follows:

19. Part of the registrant fee income in the budget is based on 60% of the 141 registrants yet to pay their retention fee. If all do so additional income of £44,800 is achieved.

20. We have assumed 161 new registrants join the register but based on graduation projections (in more normal times) 190 could reasonably join the Register then, achieving an extra income of £21,750.

**Implications**

21. This is a deficit budget for 2021 as we have already noted in the paper. One contributory reason for the deficit budget is the cases we have carried over from this year into 2021 to conclude next year.

22. While we expect to generate an underlying deficit of £135k in 2021, we also expect to finish this financial year with a surplus which will be in the region of £190k. Consequently, the surplus this year will balance out the proposed deficit for next year.
23. If all our operational plans and assumptions materialise in 2021, we will have a small retained surplus over the 2020 and 2021 financial years. The proposed deficit budget is, therefore, reasonably sustainable.
### Summary Budget

<table>
<thead>
<tr>
<th></th>
<th>Budget '20</th>
<th>Forecast '20</th>
<th>Budget '21</th>
<th>B20-B21 Var</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Full year</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Governance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Council</td>
<td>145,616</td>
<td>82,384</td>
<td>134,957</td>
<td>-52,573</td>
</tr>
<tr>
<td>Audit &amp; Risk Committee</td>
<td>3,240</td>
<td>1,751</td>
<td>3,209</td>
<td>-1,458</td>
</tr>
<tr>
<td>Remuneration Committee</td>
<td>990</td>
<td>300</td>
<td>1,050</td>
<td>-750</td>
</tr>
<tr>
<td>Education Committee</td>
<td>15,784</td>
<td>9,366</td>
<td>8,192</td>
<td>-1,174</td>
</tr>
<tr>
<td><strong>Governance</strong></td>
<td>165,630</td>
<td>93,801</td>
<td>147,409</td>
<td>-53,608</td>
</tr>
<tr>
<td>Central</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CER office</td>
<td>271,388</td>
<td>244,718</td>
<td>167,351</td>
<td>77,367</td>
</tr>
<tr>
<td>Technology</td>
<td>251,694</td>
<td>174,659</td>
<td>150,572</td>
<td>24,088</td>
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<tr>
<td>HR</td>
<td>94,860</td>
<td>70,696</td>
<td>53,960</td>
<td>16,735</td>
</tr>
<tr>
<td>Corporate Services</td>
<td>166,472</td>
<td>153,246</td>
<td>86,674</td>
<td>76,590</td>
</tr>
<tr>
<td>Property and office costs</td>
<td>261,400</td>
<td>220,184</td>
<td>235,067</td>
<td>-14,883</td>
</tr>
<tr>
<td>Communications</td>
<td>26,600</td>
<td>19,149</td>
<td>97,320</td>
<td>-78,171</td>
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<tr>
<td><strong>Central</strong></td>
<td>1,072,414</td>
<td>882,651</td>
<td>989,519</td>
<td>-106,868</td>
</tr>
<tr>
<td>FfP</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investigations</td>
<td>394,392</td>
<td>449,264</td>
<td>384,943</td>
<td>62,309</td>
</tr>
<tr>
<td>Investigating Committee (IC)</td>
<td>214,176</td>
<td>164,525</td>
<td>202,458</td>
<td>-37,933</td>
</tr>
<tr>
<td>Professional Conduct Committee</td>
<td>364,100</td>
<td>591,470</td>
<td>688,151</td>
<td>-96,681</td>
</tr>
<tr>
<td>Interim Suspension Hearings (IS)</td>
<td>40,308</td>
<td>29,743</td>
<td>41,936</td>
<td>-12,193</td>
</tr>
<tr>
<td>Protection of title (Section 32)</td>
<td>33,000</td>
<td>4,491</td>
<td>21,180</td>
<td>-16,690</td>
</tr>
<tr>
<td><strong>FfP</strong></td>
<td>1,045,976</td>
<td>1,239,493</td>
<td>1,338,669</td>
<td>-99,176</td>
</tr>
<tr>
<td>Development</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Development (Edu/Regn/Policy/)</td>
<td>404,124</td>
<td>344,736</td>
<td>367,900</td>
<td>-23,164</td>
</tr>
<tr>
<td>Quality Assurance</td>
<td>13,655</td>
<td>6,308</td>
<td>24,940</td>
<td>-18,632</td>
</tr>
<tr>
<td>Test of competence</td>
<td>31,480</td>
<td>35,556</td>
<td>46,036</td>
<td>-10,480</td>
</tr>
<tr>
<td><strong>Development</strong></td>
<td>449,259</td>
<td>386,600</td>
<td>438,876</td>
<td>-52,276</td>
</tr>
<tr>
<td><strong>Total Costs</strong></td>
<td>2,733,279</td>
<td>2,602,546</td>
<td>2,914,473</td>
<td>-311,928</td>
</tr>
<tr>
<td>Income</td>
<td></td>
<td></td>
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<tr>
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<td>2,616,535</td>
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<td>190,098</td>
<td>-145,023</td>
<td>-335,121</td>
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### F20-B21 Variance Comments

- All four meetings in 2021 are planned to be held in person. Includes a technical write-back of £29k which is the excess of the accrued amount we allowed for in the 2019 accounts for the back-dated (2014/15 to 2019/20) NI and tax liabilities for Council meetings-related travel and accommodation expenses; (2) £16k for the tax/NIC liability due on the Council members travel and accommodation expenses for 2021/22.

- Meetings in 2021 are planned to be held in person.

- Re-allocated two staff salaries to Corporate Services plus external conference costs moved into this cost centre.

- Reduced Zentso support cost (IMIS database system).

- Reduction in recruitment costs as staff now in post.

- (1) salaries and employer costs of two members of staff who were re-allocated from the CER’s office to the Corporate Services Division from the start of the year; (2) increased costs of two staff who joined the GCC half-way though 2020 but full salary from January 2021; and (3) cost of hiring one temporary staff to review the physical documents and external archive (as in the 2021 business plan).

- The writing back of £13k for business rates accrued in 2019 into 2020; causing 2020 cost to appear lower that it really is.

- Includes 2021 business plan projects (£58k), Welsh Translation (£10k) and communications and website support (£10k).

- Budgets set to reflect expert fee charges in 2021.

- Based on estimated legal (file review) and investigation costs.

- Movement of merchant credit card charges (Elavon) for retention renewal period from the Finance cost centre.

- Based on estimated education visitors’ costs of attendance allowances, accommodation and travel expenses.

- Budgeted cost is less than expected income of £48k in 2021.
### Agenda Item: CO201210-10a

**Subject:** Education Committee Report  
**Author(s):** Sharon Oliver, Chair, Education Committee  
**Date:** 10 December 2020

<table>
<thead>
<tr>
<th><strong>Summary</strong></th>
<th>Update from the Chair of the Education Committee following the meeting on 18th November 2020.</th>
</tr>
</thead>
</table>
| **Action**        | The report is for information.  
                    Council is asked to approve the appointment of the new Committee lay member. |
| **Recommendations** | Not applicable |
| **Annexes**       | Not applicable. |
Education Institutions

1. The Committee noted updates from all education providers on the new academic year, including arrangements for each student cohort, student recruitment, management of clinical skills training; impact of COVID-19 on both staff and students; clinic activity and COVID-19 secure clinic operation.

University of South Wales/Welsh Institute of Chiropractic

2. The Committee noted that the university has appointed a new course lead, Paul McCambridge and are also in the process of recruiting to chiropractic and clinical science posts, which will result in staff returning to pre-COVID levels.

London South Bank University

3. Education Visitors met with representatives from the London South Bank University (LSBU) virtually on 7 October 2020, the third annual approval/monitoring meeting since the course commenced in 2018.

Teesside University

4. The first cohort of students has commenced study at Teesside University (TU) on the newly recognised MChiro (Hons) degree programme as scheduled in September 2020.

Scotland College of Chiropractic Charitable Trust (SCCCT) – outline business case update

5. The Committee considered a submission from the SCCCT, which had been analysed in advance by the GCC Executive with further information requested ahead of the meeting. The Committee did not approve the proposed outline business case at Stage 2 of the approval procedure as it was not satisfied that the application fully met the published criteria.

Programme submissions from University of Central Lancashire (UCLan) and AECC University College

6. The Committee considered the analysis carried out by Education visitors in respect of the UCLan proposed MChiro programme of study and were advised that the start date had been deferred to 2022.

7. The Committee considered the analysis carried out by Education visitors in respect of the AECC University College MChiro (Hons) programme.
Meeting with students from education providers

8. The Education Committee met with some students from across all five institutions, an informal meeting, which provided a welcome opportunity for the Committee to hear about students’ experiences, particularly with regard to the challenges presented by the pandemic – all part of our student engagement strategy.

CPD Update

9. The Committee noted the changes that had been made to CPD during the year, including:
   - the addition of First Aid reflective questions to the CPD summary
   - minor changes to the CPD summary following the review by the Royal College of Chiropractors of 2018/19 submissions
   - revisions to the CPD webpage
   - amendments to the portal to improve the user experience

TOC Update

10. The Committee noted the changes that had been made to application paperwork and the question bank as well as the success in running the interviews remotely, which would continue in 2021. Recruitment for new TOC assessors is underway, with interviews scheduled for January 2021.

Committee Recruitment

11. A recruitment exercise was run in November for a new lay member. 27 applications were received. All applications and other information submitted by applicants were anonymised prior to forwarding to the selection panel and 6 were shortlisted for interview. The interview panel was Sharon Oliver (Chair of the Education Committee); Carl Stychin, (Council member of Education Committee) and Hilary Randall (independent member). Interviews were conducted remotely via MS Teams.

12. Monitoring information received is as follows:

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<th>Age</th>
<th>16-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
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<tr>
<td>Gender</td>
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<th>Christian</th>
<th>Hindu</th>
<th>Jain</th>
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<th>Muslim</th>
<th>Sikh</th>
<th>Other</th>
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<tbody>
<tr>
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<td>6</td>
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<tr>
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<th>Gay Women / Lesbian</th>
<th>Gay Man / Homosexual</th>
<th>Heterosexual / Straight</th>
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<td>at shortlist</td>
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<td></td>
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</table>

13. The panel has recommended the appointment of Clare Allen, an experienced educational researcher and practitioner in the field of veterinary medicine. Council is asked to approve this appointment.

14. The next meeting of the Education Committee will be held on 20 April 2021.
To: The General Chiropractic Council
From: The Chair of the Education Committee
Subject: The Annual Report of the Education Committee
Date: 10 December 2020

Purpose
This paper informs and updates Council on the work that has been undertaken by the Education Committee during 2020.

Background

1. The Education Committee is currently one of the four statutory advisory committees of the GCC stipulated in the Chiropractor's Act 1994. The box below shows the function of the Education Committee as stated in the Act.

The Chiropractors Act 1994 states the function of the Education Committee as:

- having the general duty of promoting high standards of education and training in chiropractic and keeping the provision made for that education and training under review. (11.1)
- providing, or arranging for the provision of, education or training where it considers it to be necessary in connection with the discharge of its general duty (11.2)
- being consulted by the Council on matters relating to education, training, examinations or tests of competence (11.3)
- giving advice to the General Council on education, training, examinations or tests of competence matters at the request of Council or proactively (11.4)
- appointing persons to visit any place / institution which is proposing a relevant course of study, holding any examination with any such course, or holding any test of competence connected with a course or for any other purpose of the Act (12)
- the Council has the power to withdraw qualifications as a result of Visitor’s report or on the basis of other information acquired by the Committee (e.g. through annual monitoring) (16).

Summary of Activities
2. The Education Committee met five times in 2020 (April x 2, July and November and additionally held a teleconference in January). Meetings were held virtually via MS Teams due to COVID-19. This report summarises the work of the Committee, decisions taken, actions recommended and progress on work overseen by the Committee. The Council has received a report at each of its meetings.

Quality Assurance of ‘recognised qualifications’

3. During 2020 new qualifications have been recognised, one at Teesside University and one at AECC University College. Both received Privy Council approval and commenced in September 2020.

4. The Education Committee has continued to liaise with its education providers and consider issues arising from substantive changes such as programme validation/governance changes, staffing changes and changes to modules.

5. The third annual monitoring visit was held virtually via MS Teams at London South Bank University (LSBU) in October 2020 and focused on areas such as staffing, student recruitment and the management of clinical placements and development of a clinic.

6. Discussions and meetings have continued regarding the proposed new programme in Scotland with The Scottish College of Chiropractic Charitable Trust and its validating partner, Buckinghamshire New University,

7. In October 2020 the University of Central Lancashire (UCLan) informed the GCC of its intention to defer its new programme until September 2022. The programme submission had been previously received and analysed and was considered by the Education Committee at its November meeting.

8. AECC University College made a programme submission for its MChiro (Hons) and the Education visitor analysis was considered by the Education Committee in November 2020.

Education provision and COVID-19

9. The COVID-19 pandemic had a major impact on the provision of chiropractic education in 2020. All chiropractic educational institutions (CEIs) ceased face to face teaching and closed all teaching clinics.

10. The GCC issued a statement to all education providers on 4 May 2020 on our website, about requirements in the COVID-19 context. The statement was consistent in terms of the standards continuing but being flexible in terms of how they were met. The statement reflected discussions by the GCC Education Committee and the Committee had been particularly pleased to note that all education providers had been able to work together to find common solutions and provide some consistency for all students who were in a similar situation, especially those coming to the end of their final year.
11. AECC University College along with the Welsh Institute of Chiropractic and McTimoney College of Chiropractic agreed a common set of expectations for final year students on their courses as a result of the Covid19 lockdown restrictions. In order to be satisfied that students had had sufficient patient contact and clinical experience in the time available, the proposal from institutions was that 30 new patient contact visits and 250 treatment encounters were deemed suitable, this was agreed by the Education Committee. A common assessment strategy for practical assessment in final year students was also agreed. Pass rates have been monitored and do not appear to have been affected as a result of COVID when compared with previous years.

12. Students had expressed some concern that as they had not had as much hands-on experience as a result of COVID prospective employers may view them as not being as experienced as graduates from previous years. The GCC was assured that this was absolutely not the case and that students will all have had to passed written and practical exams and meet the same standards.

13. The GCC remained in regular contact with the education providers during the pandemic regarding their plans and risk assessments to ensure the protection of patients, students, staff and the wider community.

14. In July 2020 the Committee received a presentation from the Deputy CEO at the Quality Assurance Agency, who had outlined the support and guidance the Agency had provided and continued to provide to HEI’s given the impact of COVID-19, what the academic year for 20-21 might look like and how the sector was working collectively to communicate this to students and the wider public.

15. The Education Committee asked all providers to submit reports on last year’s final year patient contacts and initiatives to support graduates’ transition to practice as well as a report on the ‘New Normal’ arrangements for students.

Annual Monitoring

16. The Education Committee had been unable to meet with institution representatives and students in April 2020 as a result of lockdown challenges, however students met remotely with the Committee at their November 2020 meeting. In terms of Equality, Diversity and Inclusion the GCC has increased dialogue with students with regard to support available from institutions and representation and would be looking at exploring ways of enhancing monitoring in this area.

17. The Committee agreed a refresh of the annual monitoring form for 2019/20, which would help steer institutions to include information on quality improvement activities. In addition to amendments to the paperwork a change to the process was proposed whereby the Executive and a member of the
Committee would meet with each institution and report back to the Education Committee.

**Work of the GCC Education Committee 2020**

18. The Education Committee has been responsible for the following areas and projects:
   - Overseeing the Test of Competence (TOC)
   - The on-going review of the GCC’s Continuing Professional Development (CPD) Scheme and audit
   - A joint research project with the General Osteopathic Council into patient involvement in education
   - Implementation of Student Engagement Strategy

**The Test of Competence (TOC)**

19. During 2020 the Committee has continued to oversee the implementation of the TOC and considered the External Examiner’s report. The report concluded that, overall, the process was operating smoothly, standards were maintained, and public safety assured.

20. The report and the GCC’s response are available on the GCC website.

21. Due to the pandemic the GCC moved to holding TOC interviews remotely and accommodated all those whose interviews had been cancelled in March as well as opened up new dates to meet demand.

22. The annual review meeting with TOC assessors was held in November 2020.

23. A recruitment exercise began in November to attract further assessors and chairs.

**CPD**

24. Following the introduction in 2019 of a revised CPD summary form with structured questions on reflection a review was undertaken of the resulting CPD summaries in order to:
   - Determine the extent to which the returns demonstrated completion of a learning cycle
   - Explore the nature of those learning activities on which registrants decided to reflect
   - Determine the extent to which registrants (a) answered questions that prompted reflective answers and, (b) thereby demonstrated a reflective approach to their professional development.

25. The Royal College of Chiropractors carried out an audit and information and learning points from the report were published for the profession.
Student Engagement

26. The GCC has developed a Student Engagement Strategy and Plan in order to establish a base level of core activities that can be repeated annually with each new cohort of students including induction talks, talks to those about to graduate and as part of monitoring visits.

Research: Thematic Review into the role of Patients in Osteopathic and Chiropractic Education

27. In collaboration with General Osteopathic Council, the GCC has been carrying out a thematic review into the role of patients in osteopathic and chiropractic education, so as to support our educational institutions in the further development of patient involvement in education and training e.g. curriculum, assessment and governance as well as patient feedback.

28. Headline findings include:

- Patients contribute to clinical education in a variety of ways across both the osteopathic and chiropractic professions.
- Most of the institutions have a functioning patient panel.
- Largely, patients do not contribute to the development of resources used in clinical education.
- Patients are involved in chiropractic curriculum developments, but not osteopathic.
- There are mixed views as to whether patients are involved in governance structures amongst the chiropractic providers.
- Largely, patients were not involved in the recruitment of applicants, where this did occur, it was more likely to be chiropractic providers.
- Slightly more osteopathic providers involved patients in assessment or assessment design.
- Chiropractic providers were less likely to have plans to enhance patient involvement, largely feeling content with their current practices and provision.
- Osteopathic providers were more likely to have plans to enhance their current patient involvement practices, identifying that more could be done.
- Osteopathic and chiropractic providers are at slightly different baseline levels of patient involvement.

Membership

29. During 2020 the Education Committee membership comprised:
<table>
<thead>
<tr>
<th>Name</th>
<th>Member details</th>
<th>Dates of membership</th>
<th>Meetings attended 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharon Oliver</td>
<td>Council lay member and Chair</td>
<td>All year</td>
<td>5 of 5</td>
</tr>
<tr>
<td>Mike Barber</td>
<td>External registrant member</td>
<td>All year</td>
<td>4 of 5</td>
</tr>
<tr>
<td>Donald Cameron</td>
<td>External lay member</td>
<td>All year</td>
<td>5 of 5</td>
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<tr>
<td>Philip Dewhurst</td>
<td>External registrant member</td>
<td>All year</td>
<td>5 of 5</td>
</tr>
<tr>
<td>Aaron Porter</td>
<td>External lay member</td>
<td>All year</td>
<td>5 of 5</td>
</tr>
<tr>
<td>Ralph Pottie</td>
<td>Council registrant member</td>
<td>All year</td>
<td>3 of 5</td>
</tr>
<tr>
<td>Carl Stychin</td>
<td>Council lay member</td>
<td>All year</td>
<td>5 of 5</td>
</tr>
<tr>
<td>Gay Swait</td>
<td>Council registrant member</td>
<td>All year</td>
<td>5 of 5</td>
</tr>
<tr>
<td>Carol Ward</td>
<td>External lay member</td>
<td>All year</td>
<td>4 of 5</td>
</tr>
</tbody>
</table>

30. Two non-Council members were reappointed for a further three years.

31. A recruitment exercise was held for a non-Council lay member.
**Agenda Item:** CO201210-11  
**Subject:** Update Report from Audit and Risk Committee (ARC)  
**Author(s):** Roger Dunshea, Chair of ARC  
**Date:** 10 December 2020

<table>
<thead>
<tr>
<th><strong>Summary</strong></th>
<th>This report provides an update from the Chair of the Audit and Risk Committee following the Committee’s meeting on 9 November 2020.</th>
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<td><strong>Action</strong></td>
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<td><strong>Recommendations</strong></td>
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</tr>
<tr>
<td><strong>Annexes</strong></td>
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</tr>
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</table>
Committee Meetings

1. The Committee has met once since last Council meeting. The meeting was held on 9 November 2020.

2. The Investment Portfolio Review group met on 20 November 2020 to discuss and review the proposed tender process.

Strategic Risk Register

3. The Committee reviewed the updated register and noted the modifications added to the register.

4. The revisions to the register included risk category, mitigation response, source of assurance, residual risk value this period, risk definitions and risk appetite level for each strategic risk in the register.

5. With staff working remotely, increasing the risk of a cyber-attack, the Committee acknowledged a business continuity plan was being developed and would be completed by 30 November 2020.

Information Governance

6. During the period June – October 2020, in relation to information governance matters, there was a report of:
   - Six data breaches
   - Nine Freedom of Information (DOI) requests
   - Three data subject access requests

7. To mitigate the risk of further data breaches, an all-staff mandatory cyber training had been organised to take place by end of this year. The training would be held on 8 and 9 December 2020.

8. Additionally, there were reminders about the General Chiropractic Council (GCC) data handling procedures sent to staff on a quarterly basis.

Management Accounts for the Period to 31 October 2020

9. The Committee noted the management accounts report presented to the Committee.

10. Members enquired how the variance would be managed by the end of the financial year. Executive confirmed that much of the under-spent budget was likely to be utilised by the end of the year.
11. Following discussions on the investment portfolio, Committee suggested that the balance sheet should reflect the movements of the value of the investments going forward.

12. Additionally, the Executive to prepare a paper for the meeting of Council in December 2020 on the cash withdrawals from the investment portfolio in 2018 and early 2020.

**External Audit Plan 2020**

13. Committee noted the external audit plan and look forward to receiving the audited 2020 financial statements.

**GCC’s Risk Management Framework and Assurance Map**

14. The proposed risk management framework and updated assurance map were welcomed by the Committee.

15. Committee noted the framework and the four lines of assurance model (Management first and second lines roles, ARC third line role and Council fourth line role) presented.

16. Committee requested the Executive to prepare a report for the March 2021 meeting on the GCC contracts that were currently in place (with the length of each contract and its effective date).

17. Regarding internal audit provision, the Committee noted that a service level agreement with another healthcare regulator to compare and conduct deep analysis of practices would be useful. Executive agreed with the suggested arrangement.

**Audit and Risk Effectiveness Review Process**

18. It was proposed that haysmacintyre, GCC’s external auditors, conduct a review of the effectiveness of the Committee. A questionnaire would be used for the survey. Haysmacintyre would process the responses to the survey questions.

19. The findings from the survey would be presented to the Committee at the meeting in March 2021.
Management arrangements of the GCC Investments Portfolio

20. Members of the Committee noted the report presented was for information only and the review exercise would be conducted by Roger Dunshea, Shelagh Kirkland and Joe Omorodion.

21. It was highlighted Roger Dunshea, Chair of the Committee, would be retiring from Council in March 2021 and proposed it would be beneficial for an additional member from Council to join the review group. The additional member would need to have about three years remaining in their term to ensure continuity throughout the current and future review processes. Since the ARC meeting, Phil Yalden has confirmed his availability to support the review work.

22. Members were reminded the purpose of the review was to rebalance the portfolio and maximise its returns after a period of seven years with the existing advisers. The review would also ensure the GCC remained vigilant with the investment management services on the market.

23. Committee noted that a report would be presented to Council on the review exercise in its meeting in March 2021.

Withdrawal from the Closed Defined Benefit Pension Scheme Update

24. Committee was informed by Executive that the closed defined benefit pension scheme was in deficit and that the estimated buy-out of GCC’s liability was £97,476 (as at September 2019).

25. The September 2020 valuation would be confirmed by TPT Retirement Solutions in about June 2021. A professional pensions adviser would be sought once the report was received.

26. After discussion, members of the Committee agreed to postpone any decision on the closed defined benefit pension scheme until March 2021. However, Members emphasised the matter be considered as soon as possible, and professional advice should be obtained without delay.

The next meeting of the Committee will be held on 1 March 2021 at 11:00.
Summary
This report provides a report from the Chair of the Remuneration and HR Committee following the Committee’s meeting on 25 November 2020.

Action
This report is for information.

Recommendations
Not applicable

Annexes
Not applicable.
Operational matters

1. The Committee received a report on from the CER. In particular it was noted
   - the prospect of a staff return to the office was not likely until well into the new year. In addition, the executive plan to carry out work that reviews the GCC working model in the light of the previous 9 months of working from home. Among other matters this will explore the interplay between the advantages of working from home, the importance of workplace collaboration and the utilization of the office environment. The CEO informed the Committee that HCPC were planning a similar exercise which could have relevance to the way ahead for GCC.
   - The annual staff engagement survey was completed in November 2020. This provided a very good result, particularly give the unusual circumstances of 2020, and contrasted positively with surveys undertaken over the last few years The Committee welcomed the results of the survey. There were a couple of areas of concern and, in particular, levels of workload were highlighted. The Committee noted that further work will be undertaken within the team to identify the reasons for workload concerns and seek solutions. The survey also provides signposts for potential improvements in other areas which will be pursued.
   - The Committee was pleased to see the Learning and Development strategy and plan for 2020 – 2021 and noted how this had been met positively by staff.
   - The Committee also noted the GCC had procured an Employee Assistance Programme.

2. The Committee thanked the leadership team and all staff for their work on organisational culture over the last two years and expressed their satisfaction at the distance the GCC has travelled over this time.

Annual Pay Award

3. The CER presented information on cost of living indexes, comparative pay awards made within the health regulation sector and a more general range of sectors.

4. The Committee agreed that affordability, as always, was a key factor in any consideration of the pay award, this year more than ever and that it should return to the issue at year end after registrant renewal figures were more certain and we have a better view of the end of year overall expenditure picture.
5. The Committee agreed that it had been an exceptional year and that staff had continued to carry out their work effectively in difficult circumstance. They should therefore all receive a one-off, unconsolidated payment of £300 by way of recognition.

**Council Chair/Member Remuneration**

6. As part of a wider look at remuneration, The CER presented information on the remuneration of Chair and Members – the level of which has not changed since 2013. The Committee agreed that this was a matter that should be subject to regular review as a matter of policy but that non-executive roles should not be subject to the same annual remuneration considerations as those of staff. The Committee agreed that it would be inappropriate to increase non-executive fees at this time given the external environment, that is not the same as rejecting an external benchmarking approach given the length of time that fees have been fixed. The Committee agreed that the CER should seek an external comparative review of Council fees, including those of the Chair and the Chair of the statutory Committees.

**Council Appointments**

7. The Committee noted Member succession planning, as covered in today’s agenda.