

General Chiropractic Council
Annual Report and Accounts 2017

General Chiropractic Council

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For the year ended 31 December 2017

Presented to Parliament pursuant to sections 41A and 41(5) of the
Chiropractors Act 1994, as amended by The Health Care and Associated
Professions (Miscellaneous Amendments) Order 2008

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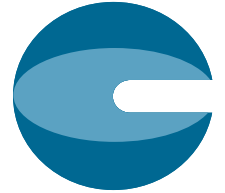
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Annual Report 2017

The General Chiropractic Council (GCC) is the independent regulator of UK chiropractors. We are accountable to Parliament and subject to scrutiny by the Professional Standards Authority (PSA). Our statutory duty is to develop and regulate the profession of chiropractic, thereby protecting patients and the public.



Chair's Foreword

Welcome to the annual report 2017 of the General Chiropractic Council.

In a year characterised by considerable change in the Council membership, there has been a clear focus on strengthening our governance at the same time as working to improve regulatory performance. This was against a backdrop of external uncertainty about the future direction of health care regulation.

The chiropractic profession grew slightly to 3220 registrants but remains the smallest of the independently regulated healthcare professions. The GCC's challenge is to ensure an effective regulatory regime which fulfils our duty to protect the public and to encourage high standards within the profession. The GCC has continued to develop its relations and work with the professional associations and the Royal College of Chiropractors, in particular around CPD, to improve the quality of CPD summaries.

Several major projects came to fruition during the year. Of particular note was the implementation of new Education Standards (which replace the former Degree Recognition Criteria), together with a revised process for the quality assurance of the UK chiropractic degree programmes that lead to GCC registration. These marked an important step in ensuring the future supply of appropriately qualified professionals. We would like to thank the UK chiropractic education institutions for their valuable input to these developments.

The Council received a higher volume of complaints about chiropractic care from patients and the public than in previous years. It is a mark of the improvement in the handling of these cases that there was a reduction in the time taken from receipt of the complaint to the final Investigating Committee decision and also that the number of cases remaining open at the end of the year was halved. A significantly lower percentage of cases compared to last year required referral to a Professional Conduct Committee.

The GCC is supported in its regulatory work by a large number of people who serve on its statutory committees and as education visitors. These teams have been strengthened during 2017 and we are very grateful for the commitment shown by both established and new members.

The Professional Standards Authority for Health and Social Care's 2016/17 report on our performance noted that we had continued to meet all, bar one, of the Standards of Good Regulation. While it was encouraging that we were recognised for having maintained our improved performance since 2016, we continue to seek ways to accelerate improvements in communication on the progress of Fitness to Practice cases.

Throughout 2017 we increased our collaboration with other regulators, with a focus on improving consistency and efficiency, in anticipation of the Department of Health's public consultation "promoting professionalism,

reforming regulation” (issued in October 2017). We also collaborated with other regulators in the production of various guidance documents, as well as on the commissioning of surveys and research. We embarked upon a joint research project with the General Osteopathic Council concerning communication, in the context of touch and manual therapy and this is due to report in 2019.

Faced with the need to relocate during 2018, the Council reviewed its accommodation options and decided to lease premises alongside the Health and Care Professions Council which we envisage may facilitate further collaborations on matters of mutual interest.

For the first seven months of the year, Roger Dunshea continued as Acting Chair. We are very grateful for his leadership during a challenging period for the GCC and delighted that he continues his contribution as a Member of Council. His experience has been a great support to me in the early months of my chairmanship. With appreciation for their contribution, the Council said goodbye to former members Julie McKay, Grahame Pope and Sophia Adams Bhatti in March 2017. In May we reported the sad news of former Council member Marie Cashley’s death. In August, four new members were appointed: Sharon Oliver as the new Chair of the statutory Education Committee, registrant member Ralph Pottie and lay member Keith Richards, as well as my own appointment as Chair of the Council.

I would like to thank the staff team, led by Rosalyn Hayles the Chief Executive and Registrar, for their commitment during a demanding year and for their achievements which are described in more detail in this report. During this period of turnover in the governance structures, Rosalyn Hayles played a vital role in ensuring the effective discharge of the GCC’s regulatory responsibilities and in developing the GCC’s thinking about how it might best fit itself for the future. It was with regret that we learnt at the end of the year of Rosalyn’s decision to leave the GCC for a role that would give her more personal flexibility. On behalf of the Council, I would like to pay tribute to her significant contribution and extend our warmest thanks and good wishes for her future success.

Mary Chapman



Chair

About the GCC

The GCC is a body corporate set up by an Act of Parliament, namely the Chiropractors Act 1994. Although set up by an Act of Parliament, we remain independent of government and the profession that we regulate.

In 2016 the Health and Care (Safety and Quality) Act 2015 implemented a new over-arching objective across the health and care professions regulators. That over-arching objective is the protection of the public, which involves the pursuit of the following objectives:

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

Strategic Aims 2015-2017

Our Strategic Aims for 2015-2017 were to:

- protect patients and the public;
- uphold and improve professional standards;
- engage effectively and have constructive dialogue with our stakeholders;
- improve our effectiveness, ensuring our systems were cost effective and fit for purpose.

Council added a further aim at its meeting in March 2017:

- We aim to collaborate effectively with other health and care profession regulators in the UK.

As at 31st December 2017 there were 3,220 chiropractors registered with the GCC.

Our work in 2017

Our job as a regulator is to protect the public. We do this by ensuring that only appropriately qualified individuals can practise as chiropractors and that they meet the standards expected of them throughout their careers.

Education, training and professionalism

One of our most important roles as a regulator is to ensure that education institutions delivering, or looking to deliver, chiropractic degree programmes provide high quality education and training for their chiropractic students.

During 2017 no new qualifications were recognised or re-recognised but we continued to engage with and support education institutions as they faced major changes, such as management restructures and the awarding of Taught Degree Awarding Powers and institutional designation.

GCC staff continued to liaise with and visit education institutions, speaking to students about their responsibilities and their future as regulated healthcare professionals. We also worked closely with an education institution as they developed a new undergraduate chiropractic programme in London.

All our education institutions are required to submit annual monitoring reports and to meet with the Education Committee annually. In 2017 we shared good practice and also discussed the potential impact of Brexit, talked about student feedback, and patient engagement in teaching and learning.

The new Education Standards and Quality Assurance Handbook, approved by the Education Committee and Council in June 2017, came into effect on 1st September 2017 and all education institutions are working to ensure they meet the new requirements. A pool of education visitors (lay and registrant) have been recruited and trained and will be deployed by the Education Committee.

This year we began our review of guidance on student fitness to practise and development of new guidance on health and disability. Guidance is planned for both students and education institutions.

The online surveys used in 2015 to identify lapses in professional behaviour by students were repeated in 2016 and the results from the second round showed similarities to the first. The finding that stood out was the apparent tendency for students to ignore lapses in professionalism instead of reporting them. The findings have been discussed with the education providers to use as a teaching tool.

This year we commissioned research into the extent to which individuals who complete a recognised degree programme are perceived, and perceive themselves, to be prepared for practice and to meet the GCC Code and Standards. The relevant findings will be shared with the chiropractic education providers and the report will be published in early 2018.

Chiropractic education institutions offering Recognised Qualifications

AECC University College

The McTimoney College of Chiropractic
(Abingdon and Manchester sites)

Welsh Institute of Chiropractic
(University of South Wales)

London South Bank University
(from September 2018)

Protecting and promoting Registration

The title of 'chiropractor' is protected by law and anyone referring to themselves as a chiropractor, whether expressly or by implication, must be registered with us. The Register, updated daily, is available online at: www.gcc-uk.org/registration/the-chiropractic-register/registration-search.aspx.

We register new UK applicants but much of our work in registration also involves assessing applicants from overseas and those who are

returning to practice after a period when they have not been registered.

The number of chiropractors in the UK continues to grow, on average by around 78 registrants each year. In 2017, 195 new chiropractors joined the Register.

As at 31st December 2017, there were 3220 chiropractors registered with the GCC.

50.5% were female and 49.5% male.



New registrants by institution

Educational institution	Month course completed	Number of graduates	Number registered
McTimoney College of Chiropractic (MCC)	October/ December 2016	32	28
Anglo-European College of Chiropractic (AECC)	June/ July 2017	122	77
University of South Wales	June/ July 2017	53	48
Total	-	207	153

2017 new registrants by registration route

Registration route	Total new registrants
Route 1 – UK accredited course	170
Route 2 – Foreign qualified	21
Route 3 – EU General Directive	4
Total	195

We continued to seek to improve our registration processes for chiropractors and raise awareness of the importance of the Register. We have published additional guidance to aid completion of the various registration processes, including guidance on expected levels of English language skills for applicants and registrants as well as requirements for character references, what we mean by professional standing, and also a medical report pro-forma for GPs.

We further improved the Test of Competence (ToC) (the test that non-EEA overseas applicants for registration undertake before they can apply for registration) and how we assess individuals' approaches to ethical dilemmas. In 2017, a record number of candidates took the ToC. Of the 33 candidates, 14 passed on their first attempt, a further 11 went on to pass following the submission of additional evidence and 4 candidates resat the assessment and passed on their second attempt.

In November 2017 the Education Committee decided that the planned evaluation of the process after 3 years of operation was not necessary and would represent a disproportionate cost, given the reports already received from the External Examiner, the outcomes of the annual ToC review, and the absence of evidence of fitness to practise complaints arising in respect of registrants who passed the ToC.

Further information on Registration data and statistics can be found in the Annual Registrations report as presented to the Council in March 2018.

One of the activities we undertake in order to protect the integrity of the Register is taking action against individuals who appear to be practising without registration. Not all concerns raised with us require action but in 2017 we sent out 15 'cease and desist' letters.

Ensuring high standards of practice

It is important that all chiropractors remain up to date and fit to practise. At present, chiropractors are required to undertake 30 hours of continuing professional development (CPD) each year between 1st September and 31st August, of which 15 hours must include 'learning with others'.

During 2017 we published updated guidance to assist registrants to complete their annual CPD return and learning points for the profession.

During 2016 and 2017 we commenced a major project to review the quality of registrants' CPD submissions in greater depth than in previous years. The aim was to generate feedback for registrants that would assist them to improve the quality of their CPD submissions as well as to provide the GCC with information that we could use to extend or improve the guidance we produce for registrants. Prior to 2016, the GCC had never given feedback to registrants about their completed CPD submissions provided that they had complied with the CPD requirements. In future, the GCC intends to provide feedback and support to those who have completed their first full year of CPD.

In 2017 the Education Committee considered the outcome of the small scale pilot initiated in 2016 consisting of new elements that it was proposed could form part of a future continuing fitness to practise scheme. It is planned to publish a report highlighting the benefits that registrants found from these CPD activities and to encourage registrants to undertake some of the new components, such as a structured discussion with a peer. The GCC continued to discuss the potential for amending the CPD rules in order to introduce a new CPD scheme that will better assure the continuing fitness to practise of UK chiropractors.

Dealing with concerns and complaints

Throughout the year we introduced improvements to the way we work. These included a revised process for handling notifications of criminal offences by registrants and changes to the relevant website guidance.

The GCC has an online form which complainants can use to make complaints about chiropractors.

Further information on Fitness to Practise data and statistics can be found in the annual fitness to practise statistics report as presented to the Council in March 2018. Detailed information about the categorisation of the complaints received in 2017 and information on their outcomes can also be found in the report.

FTP at a glance

		2017	2016
Number of cases considered by Investigating Committee		74	51
Number of cases concluded by Investigating Committee		67	43
Number of cases concluded by Investigating Committee with the following outcome:	No Case To Answer and Withdrawn/Closed	51	28
	Referral to Fitness to Practise Committee	16	15
Number of individual cases considered by a final Fitness to Practise Committee		19	16
Number of cases concluded by Professional Conduct Committee		16	13
Time from receipt of initial complaint to the final Investigating Committee decision (in weeks):	Median	30	33
	Longest case	129	157
	Shortest case	5	4
Number of open cases (at the end of the year) which are older than:	52 weeks	3	11
	104 weeks	2	1
	156 weeks	0	0
Number of occasions a case has been referred to another investigating body/regulator:		8	2

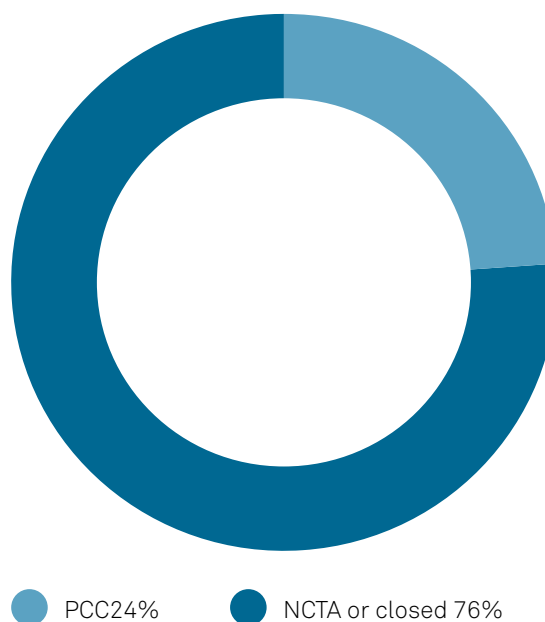
In 2017 the number of complaints we received increased to 66, a higher number than received the previous year. 79% of complaints were from patients, or a patient's relative. 67% of the complaints involved more than one allegation. 43 of the complaints involved an allegation relating to clinical care. The second most frequent type of allegation was around the relationship between the chiropractor and the patient.

Nature of Complaint	Number of allegations raised
Clinical care	88
Relationships with patients	77
Probity	10
Conviction/Caution	4
Working with colleagues	1
Business/employment issues	1
Health	0
Teaching/Supervision	0
Compliance with GCC investigations	0
Other	3

During 2017 the GCC began to process 300 complaints in relation to advertising which were received from a single complainant. This extensive work will continue during 2018/19.

The number of cases the Investigating Committee (IC) determined, and the nature of those complaints, is described in the annual Fitness to Practise statistics report. The IC reached decisions on 67 complaints during 2017, with 16 of those complaints being referred to the Professional Conduct Committee (PCC). Despite an increase in the volume of complaints received, the median time taken from receipt of a complaint to its determination by the IC was reduced to 30 weeks.

Decisions of the IC 2017



Information about the PCC's work during 2017 can be found in the annual report. Sixteen complaints were determined by the PCC at hearings. By the end of the year the number of cases awaiting hearings was 9, which was an improvement on the number at the same time the previous year (12).

Below is some key statistical data set out in the report:

- More complaints were considered and concluded by the IC in 2017 than 2016, even though a greater number of complaints were received.
- Despite the increase in the number of complaints concluded, the percentage of allegations referred to the PCC was reduced compared to the previous year.
- The median time taken to deal with complaints at the IC stage was reduced.

More allegations were considered and concluded by the PCC in 2017 than in 2016. 52% of the complaints concluded by the IC during 2017 were also received in 2017, leading to a reduction in the number of open cases that were older than 52 weeks at the year end. At the end of 2016 there were 12 open cases that were older than 52 weeks, whereas in 2017 this number was reduced to 5.

During 2017 we initiated a public consultation on a revised version of the Indicative Sanctions Guidance document that the PCC (and the Health Committee) use when deciding which sanction to impose. At the same time, we consulted on a draft bank of template conditions that can be imposed by the committees. The finalised documents came into effect in 2018.

We also initiated a process to appoint an overall Chair of the Professional Conduct Committee (and the Health Committee) whose role will be to provide accountability to the GCC Council for the effective operation of panels while maintaining the independence of their decision-making. The GCC's Council made that appointment in early 2018.

In 2017, one registrant lodged an appeal against a PCC decision with the High Court. That appeal was dismissed by the High Court in early 2018.

Developing guidance and standards

In June 2017 we published a revised version of our policy about misuse of title and the chiropractic treatment of animals, following useful input from the Register of Animal Musculoskeletal Practitioners and the various chiropractic professional stakeholders. The revised policy can be found in the Publications section of our website.

We revised our guidance to registrants (Guidance on Advertising to the Public) about advertising of chiropractic services in December 2017, following the issue of new guidance on the topic from the Advertising Standards Authority (ASA). We liaised with the ASA about the contents of their guidance and our guidance, and sent a joint letter out to all GCC registrants about it.

We also published new guidance for patients and the public and a document entitled 'Seeing a chiropractor for the first time', to help the public be better-informed about what chiropractic treatment involves and to make informed choices about their treatment.

We worked with the other regulators in the sector to collaborate on a joint statement on Conflicts of Interest as well as illustrative case-scenario guidance for registrants.

We liaised with the CQC to survey GCC registrants' use of x-ray equipment and reported the outcomes of that work in our August newsletter.

International activities

The GCC continues to be engaged internationally. In 2017 we:

- Became a founding member of the International Chiropractic Regulatory Society (ICRS) as it worked towards becoming incorporated. Annual conferences and the AGM are held alongside other major conferences. The ICRS works alongside other regulators and licensure organisations on accreditation, education, examination.

- Participated in the biennial World Federation of Chiropractic Congress (held in Washington DC in March 2017) and the annual European Chiropractic Union Convention.
- Held regular discussions with the Council for Chiropractic Education International (CCEI) and worked collaboratively with the European Council on Chiropractic Education (ECCE) to trial joint working on approval of programmes.

Communicating and engaging with our stakeholders

Communication and engagement play an important role in our work, not only in explaining what we do but also in understanding patient and public needs and ensuring we provide registrants with appropriate support and information.

We continued to publish a monthly newsletter along with e-bulletin updates for registrants.

In 2017 we consulted publicly on draft Indicative Sanctions Guidance and sought the views of newly qualified chiropractors, educators/providers, final year students, the Royal College of Chiropractors, the professional associations and patients/public into perceptions of preparedness of chiropractic graduates for practice.

Promoting equality and diversity

We are committed to equality and diversity in our work with the profession, patients and public. Our aims are to:

- Ensure we conduct all our functions fairly and free from any form of unlawful discrimination, harassment and victimisation;
- Promote professional values and standards that recognise and respect the diversity of patients, the public and the profession;
- Ensure that we make judgements that are free from bias, prejudice or stereotyping;
- Ensure that the Council of the GCC is committed to equality and diversity and fosters an inclusive organisation;
- Ensure that the GCC is an inclusive workplace, where all staff are valued and respected.

Our Equality and Diversity Policy is available on our website at <https://www.gcc-uk.org/about-us/equality-and-diversity/> along with our annual reports to Council.

Oversight of our work

Our work as a regulator is subject to oversight by the Professional Standards Authority (PSA) for Health and Social Care. Each year the PSA assesses our performance against the Standards of Good Regulation across each of our regulatory functions: standards, education, registration and fitness to practise.

The PSA performance review for 2016/17 noted that we had maintained the improvement in performance achieved during 2015/16. In 2014/15, the GCC did not meet 5 of the 24 Standards and in 2015/16 and 2016/17 the GCC failed just 1 of the 24 standards. Work continues on improving our communication with registrants and complainants and our own independent audits show that we are making excellent progress in this area.

Looking forwards to 2018

Our work in 2018 will focus on three key objectives as part of our 2018-2020 strategic plan:

- Delivering effective and efficient regulation
- Enhancing professionalism
- Developing the chiropractic profession

This will be supported by important development work on key enablers including: HR support; improving our business processes; completing an IT review; completing a communications and engagement review; carrying out further work on our Council approach to appraisal; and development of a financial strategy to deliver a balanced budget.

During the summer of 2018 we will move our office and lease accommodation from the Health and Care Professions Council in Kennington.

The General Chiropractic Council

Financial Statements

31st December 2017



Members of the Council

The following individuals served as the members of the Council during the period 1st January 2017 to 31st December 2017. In 2017, one registrant member and three lay members (including the Chair) were appointed to Council.

Name	Type of member	Date of appointment	End of office
Mary Chapman	Lay (Chair)	1st August 2017	31st July 2021
Roger Dunshea	Lay (Acting Chair to 31 July 2017)	1st April 2013	31st March 2021
Steven Gould	Lay	1st June 2016	31st May 2020
Tom Greenway	Registrant	1st January 2014	31st December 2020
Gareth Lloyd	Registrant	1st April 2013	31st March 2021
Sharon Oliver	Lay	1st August 2017	31st July 2021
Ralph Pottie	Registrant	1st August 2017	31st July 2021
Elizabeth Qua	Lay	6th June 2011	5th June 2019
Keith Richards	Lay	1st August 2017	31st July 2021
Julia Sayers	Registrant	1st July 2012	30th June 2020
Carl Stychin	Lay	31st January 2015	30th January 2023
Gabrielle Swait	Registrant	1st April 2013	31st March 2021
Philip Yalden	Registrant	1st June 2015	31st May 2023

Leavers in 2017

Name	Type of member	Date of appointment	End of office
Grahame Pope	Lay	9th February 2009	8th February 2017
Julie McKay	Registrant	1st May 2009	30th April 2017
Sophia Adams Bhatti	Lay	1st April 2013	31st March 2017

Legal and administrative details

Chief Executive & Registrar

Tricia McGregor
(as of 1st April 2018) (Interim)
Rosalyn Hayles
(until 31st March 2018)

Principal address

44 Wicklow Street
London
WC1X 9HL

Solicitors

Field Fisher Waterhouse
35 Vine Street
London EC3N 2AA

Bankers

Santander Bank
Bridle Road
Bootle
Merseyside
L30 4GB
Allied Irish Bank GB
PO Box 52496
London
NW3 9ED

Investment Manager

Cazenove Capital Management
Schroder & Co Ltd
12 Moorgate
London
EC2R 6DA

Auditors

Haysmacintyre
10 Queen Street Place
London
EC4R 1AG

Financial statements

Status

The General Chiropractic Council is a body corporate established under the provisions of the Chiropractors Act 1994 (enacted on 5th July 1994). The Council is governed by the rules and regulations set down in the Chiropractors Act 1994 (as amended).

Report of the Council

The members of the Council submit their report and the financial statements of The General Chiropractic Council ("GCC") for the year ended 31st December 2017.

Objectives

The Council was established to develop and regulate the chiropractic profession within the United Kingdom.

Principal activities

The Council's principal activities are:

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

Financial review

The results for the year show a deficit of £163,869 (2016: £212,895 surplus) before taxation.

The Council is dependent on income from registration and retention fee income. Income from registrants has increased by £89,250 in 2017 to £2,474,700 (2016: £2,385,450).

Expenditure has increased by £335,326 in 2017 to £3,143,844 (2016: £2,808,518).

The main driver for this increase is in Regulatory costs (note 4) with an increase of £471k on Professional Conduct Committee (PCC) costs and an increase of £42k on Investigating Committee (IC) costs. PCC costs rose as a result of outsourcing cases to an external firm of solicitors and also having cases presented by external counsel. These roles were carried out by internal staff in the prior year. These increases are offset by a decrease of £292k in staffing costs which include £100k on salaries, no restructuring costs in the year (2016: £70k) and a reduction in temporary costs of £79k. The majority of these savings relate to work previously carried out by staff on PCC and IC work.

As a result of the break clause being enacted on the lease at 44 Wicklow St, accelerated depreciation of £49k has been applied to represent the shorter lease term.

The members of Council consider that the organisation is a going concern and the financial statements have been prepared on this basis. The Council has a general and revaluation reserve of £3,550,567 which is just under 14 months' running costs as at 31st December 2017.

Auditor

Statement as to disclosure of information to the Auditor

The members of the Council at the date of approval of this report of the Council confirm that, so far as each of them is aware, there is no relevant audit information of which the Council's auditor is unaware and the members of the Council have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Members' responsibilities in the preparation of financial statements

The members of the Council are responsible for preparing the Report of the Council and the Financial Statement in accordance with applicable law and regulations.

The Chiropractors Act 1994, as amended requires the members of the Council to prepare financial statements for each financial year, which give a true and fair view of the General Chiropractic Council's state of affairs at the year end and of its surplus or deficit for the financial year. In preparing those financial statements the members are required to:

- a) Select suitable accounting policies and then apply them consistently;
- b) Make judgments and estimates that are reasonable and prudent; and
- c) Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Council will continue in operation.

The members are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Council and to enable them to ensure that the financial statements comply with the requirements of the Chiropractors Act 1994, as amended. They are also responsible for safeguarding the assets of the Council, and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities. The members have sought assurance from the Chief Executive that there are no other matters which require disclosure in relation to these statements.

The members are responsible for the maintenance and integrity of the corporate and financial information on the Council's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Approved by the Council on 27 June 2018 and signed on its behalf by:

Mary Chapman



Chair

Independent auditor's report to the members of the General Chiropractic Council

Opinion

We have audited the financial statements of General Chiropractic Council for the year ended 31 December 2017 which comprise Income and Expenditure Account, the Balance Sheet, the Statement of Cash Flow and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the members, as a body, in accordance with the Chiropractors Act 1994. Our audit work has been undertaken so that we might state to the members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the General Chiropractic Council and the members as a body, for our audit work, for this report, or for the opinions we have formed.

In our opinion, the financial statements:

- give a true and fair view of the state of the General Chiropractic Council's affairs as at 31 December 2017 and of the net movement in funds, including the income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Chiropractors Act 1994.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the General Chiropractic Council in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of members of the Council for the financial statements

As explained more fully in the members' responsibilities statement, members of the Council are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the members are responsible for assessing the General Chiropractic Council's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the members either intend to liquidate the General Chiropractic Council or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the members' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the members have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the General Chiropractic Council's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The members are responsible for the other information. The other information comprises the information included in the Report of the Council. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the General Chiropractic Council and its environment obtained in the course of the audit, we have not identified material misstatements in the Report of the Council.

haysmacintyre
Statutory Auditor
27 June 2018

10 Queen Street Place
London
EC4R 1AG

haysmacintyre is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.

Income and expenditure account for the year ended 31st December 2017

	Notes	Year ended 31st December 2017	Year ended 31st December 2016
INCOME			
Registration fees – New registration		143,750	122,600
Annual retention		2,300,000	2,233,200
Other income	1	30,950	29,650
Bank interest receivable	3	4,177	7,931
Investment Income	3	138,661	133,572
Test of Competence fees		68,000	49,500
TOTAL INCOME		2,685,538	2,576,453
EXPENDITURE			
Staff costs	4	958,643	1,250,918
Staff expenses		31,711	39,620
Regulatory costs	5	1,275,569	729,410
Grant Expenditure re Revalidation	2,16	3,600	12,349
Council expenses	6,18	144,361	211,620
Professional fees	7	238,668	187,434
Publicity		1,530	4,653
Printing		13,669	9,761
Postage		18,979	18,212
Stationery		13,895	10,982
Telephone		8,950	10,213
Office costs		15,713	18,142
Accommodation costs		269,969	200,129
IT costs		36,494	38,557
Insurance		28,432	32,783
Subscriptions		-	1,367
Sundry		-	2,202
Bank charges		2,474	1,931
Depreciation	9	81,187	28,235
TOTAL EXPENDITURE		3,143,844	2,808,518
OPERATING (DEFICIT)/SURPLUS BEFORE TAXATION AND MOVEMENT ON INVESTMENTS		(458,306)	(232,065)
Realised gains /(losses) on investments	10	55,817	10,989
Unrealised gains / (losses) on investments	10	238,620	433,971
DEFICIT BEFORE TAXATION		(163,869)	212,895
Taxation	8,14	(51,149)	(53,371)
DEFICIT FOR THE PERIOD		(215,018)	159,524

The operating deficit for the period arises from the Council's continuing activities.

Balance Sheet as at 31st December 2017

	Notes	31st December 2017 £	31st December 2016 £
FIXED ASSETS			
Tangible assets	9	31,009	50,540
Leasehold premises	9	8,976	67,581
Investments	10	4,944,337	4,670,073
CURRENT ASSETS			
Debtors	12	51,759	40,046
Cash at bank		1,489,407	1,795,702
		1,541,166	1,835,748
CREDITORS			
Amounts falling due within one year	13	(2,856,050)	(2,772,337)
NET CURRENT LIABILITIES		(1,314,884)	(936,589)
TOTAL ASSETS LESS CURRENT LIABILITIES			
		3,669,438	3,851,605
CREDITORS			
Provisions and other liabilities	14	(118,871)	(86,020)
TOTAL ASSETS LESS TOTAL LIABILITIES		3,550,567	3,765,585
FUNDS OF THE COUNCIL			
General reserves	16	2,552,481	3,038,163
Revaluation Reserve	16	944,337	670,073
Department of Health Grant	2 & 16	53,749	57,349
TOTAL FUNDS		3,550,567	3,765,585

Approved and authorised for issue by the members of Council on 27 June 2018, and signed on their behalf by:

Mary Chapman



Chair

Financial statements for the year ended 31st December 2017

Statement of Cash Flows For the year ended 31 December 2017

	2017 £	2016 £
Cash flows from operating activities		
Deficit for financial year	<u>(215,018)</u>	<u>159,524</u>
Adjustments for:		
Depreciation of tangible assets	81,187	28,235
Movement on revaluation of investments	(294,437)	(444,960)
Dividends and interest receivable	(142,838)	(141,503)
Taxation charge	51,149	53,371
(Increase) / decrease in debtors	(11,713)	(7,570)
Increase / (decrease) in creditors	65,415	191,842
Net cash generated from operating activities	<u>(466,255)</u>	<u>(161,061)</u>
Cash flows from investing activities		
Purchase of tangible fixed assets	(3,051)	(32,048)
Sale of investments	313,339	264,434
Purchase of investments	(287,660)	(288,029)
(increase) in accrued investment income	(469)	(450)
Interest received	142,838	141,503
Net cash from investing activities	<u>164,997</u>	<u>85,860</u>
Net decrease in cash and cash equivalents	(301,258)	(75,201)
Cash and cash equivalents at beginning of year	1,827,070	1,902,721
Cash and cash equivalents at end of year	<u>1,525,812</u>	<u>1,827,070</u>
Cash at bank and in hand		
Balance at bank	1,489,407	1,795,702
Balance held by investment managers	36,405	31,368
Cash and cash equivalents at end of year	<u>1,525,812</u>	<u>1,827,070</u>

Accounting policies

Basis of accounting

The financial statements have been prepared under the historical cost convention and in accordance with Financial Reporting Standard 102 ("FRS 102"), the Financial Reporting Standard applicable in the United Kingdom and the Republic of Ireland.

In preparing these financial statements, management has made judgements, estimates and assumptions that affect the application of the GCC's accounting policies and the reported assets, liabilities, income and expenditure and the disclosures made in the financial statements. Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

The financial statements have been prepared on a going concern basis.

Income

Registration fees, annual retention fees, other income and letting income are recognised on an accruals basis according to the period to which it relates.

Bank deposit interest is credited on a received basis.

Financial instruments

The GCC only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

Basis for recognising liabilities

Resources expended are included on an accruals basis. All liabilities are recognised as soon as there is a legal or constructive obligation committing the organisation to that expenditure.

Provision for liabilities

Provisions are recognised when the organisation has a present legal or constructive obligation as a result of a past event. They are recognised when it is probable that a transfer of economic benefit will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation.

Tangible fixed assets

Tangible fixed assets are stated at historical cost less depreciation.

Depreciation

Depreciation is provided on all tangible fixed assets, other than freehold land, at rates calculated to write each asset down to its estimated residual value evenly over its expected useful life, as follows:

Freehold buildings	over 50 years
Computer equipment	over 3 years
Furniture & office equipment	over 5 years
Leasehold	over the period of the lease

All assets are written off a year after they have been fully depreciated.

Current and Deferred taxation

The GCC is assessed to corporation tax on its investment income including gains on disposals of securities. All other surpluses are exempt from tax under the mutual trading rules.

Deferred tax is recognised in respect of all timing differences that have originated, but not reversed at the balance sheet date, where transactions or events that result in an obligation to pay more tax in the future, or a right to pay less tax in the future, have occurred at the balance sheet date. Timing differences are differences between the GCC's taxable profits and its results as stated in the financial statements.

Deferred tax is measured at the average tax rates that are expected to apply in the periods in which timing differences are expected to reverse, based on tax rates and laws that have been enacted, or substantially enacted, by the balance sheet date. Deferred tax is measured on a non-discounted basis.

Investments

Investments are a form of basic financial instruments and are initially shown in the financial statements at fair value. Movements in the fair values of investments are shown as unrealised gains and losses in the income and expenditure account.

Employee benefits**Short term benefits**

Short term benefits including holiday pay are recognised as an expense in the period in which the service is received.

Employee termination benefits

Termination benefits are accounted for on an accrual basis and in line with FRS 102.

Pension contributions

The GCC makes payments on behalf of certain employees into defined contribution pension schemes. The assets of the schemes are held separately from those of the Council, being invested with independent insurance companies.

Notes to the Financial Statements for the year ended 31st December 2017

	2017 £	2016 £
1 OTHER INCOME		
Restoration fee	20,550	10,450
Non-practising to practising fee	10,400	19,200
	<u>30,950</u>	<u>29,650</u>

	2017 £	2016 £
2 DEPARTMENT OF HEALTH GRANT		
Balance brought forward	57,349	69,698
Income	-	-
Expenditure	(3,600)	(12,349)
Balance carried forward	<u>53,749</u>	<u>57,349</u>

Further information is at Note 16

3 INVESTMENT INCOME

Investment income relates to bank interest, dividends and other receivables from the investment portfolio. The initial investment of £4 million was made in 2013. The valuation as at 31st December 2017 was £4,944,337 (2016: £4,670,073).

4 STAFF COSTS

The average monthly number of persons (excluding the members) employed by the Council during the year was as follows:

	2017	2016
	£	£
Staff costs for the above persons:		
Wages and salaries	707,823	808,202
Social security costs	81,455	94,610
Pensions costs	72,048	88,128
Temporary staff costs	81,709	160,564
Staff recruitment costs	15,608	29,640
Redundancy Fees	-	69,774
	958,643	1,250,918

There was a decrease in staff costs following the restructure of some posts in 2016. Two additional posts in education and FtP were recruited in this year. Temporary staff costs were reduced by almost 50% in 2017.

The Council members delegate the day to day running of the Council to the senior management team which is made up of 3 individuals. These individuals are considered as key management and their total remuneration and benefits for the year was £350,937 (2016: £350,966), and pension contributions in the year of £28,578 (2016: £30,512).

5 REGULATORY COSTS

	2017	2016
	£	£
Registration	21,888	16,894
Education Committee	22,931	8,120
Investigating Committee	244,960	203,258
Professional Conduct Committee	911,439	440,722
Test of Competence	58,995	52,376
Committee member's Social security costs	15,356	8,040
	1,275,569	729,410

Education committee costs were higher as a result of appointment and induction costs for Education visitors. Investigating Committee (IC) costs rose in 2017 as a result of reviewing advertising cases and increased costs of additional IC meetings and an increase in expert reports for the IC at this stage. Professional Conduct Committee costs increased by £470,717 as a result of an increase in hearing days and the outsourcing of cases to external solicitors and presentation of cases by external counsel. These were carried out in the past few years by internal staff members. Test of Competence fees are costs associated with the test for those individuals who have qualified outside Europe and are wishing to register with the GCC. The fee was increased from £1,500 to £2,000 for 2017.

6	COUNCIL EXPENSES	2017	2016
		£	£
	Members' fees	91,869	101,636
	Independent Committee members	1,200	
	Social security costs	2,051	2,092
	Expenses	18,133	31,053
	Organisation development	-	1,500
	Committee and Council appointments	31,108	75,339
		144,361	211,620

Since February 2013, Council members have been remunerated by way of an annual salary of £6,650 with the Chair of Council being remunerated at £23,000 per annum. The reductions in fees in 2017 are as a result of vacancies that existed in the year. The fees in relation to Council and Committee appointments are as a result of the appointment process for 4 members of Council including the Chair and also recruiting 12 members of the Investigating Committee.

7	PROFESSIONAL FEES	2017	2016
		£	£
	Legal fees	49,316	77,423
	Auditors' remuneration:		
	Audit fees (excluding VAT)	14,280	11,150
	Accountancy services	-	5,230
	Other advisory services	4,574	6,531
	Database design, development, and support	32,991	7,205
	Human resources and job evaluation	4,514	2,043
	Website design and development	2,790	-
	Project costs	98,281	53,062
	Investment Manager fees	22,770	17,539
	Professional Standards Authority (PSA) levy	7,936	7,216
	Data protection and FOIA advice	1,216	35
		238,668	187,434

Notes to the Financial Statements for the year ended 31st December 2017

There was a decrease in legal fees of £28,107 in 2017 following the prior year's increase. The project costs are specific additional activities agreed by Council in achieving the business plan. There was a slight increase in the levy to the Professional Standards Authority (PSA) as the oversight regulator.

TAXATION

It is the understanding of the members that the Council is only subject to UK Corporation Tax on its investment income, which includes bank interest receivable.

	Year ended 31 December 2017	Year ended 31 December 2016
Current year tax:		
UK corporation tax (current tax charge 19.25%)	16,476	13,196
Deferred tax – origination and reversal of timing differences	34,673	42,190
Effect of tax rate change on opening balance	-	(2,015)
Tax charge per the income and expenditure account	51,149	53,371
Factors affecting the tax charge for the year:		
Operating surplus/(deficit) before taxation	(163,869)	212,895
Tax on loss on ordinary activities at the relevant rate of UK corporation tax of 19.25% (2016: 20%)	(31,545)	42,579
Effects of:		
Fixed Asset differences	15,626	5,647
Elements of the operating surplus/(deficit) that are not taxable		
Income not taxable for tax purposes	596,538	553,891
Dividend and distribution income	(555,446)	(568,574)
Chargeable gains/(losses)	(19,896)	(20,347)
Adjustments to tax charge in respect of previous periods	49,257	49,635
Adjust opening deferred tax to average rate of 19.25%	-	-
Movement in deferred tax not recognised	(3,385)	-
Current tax charge	-	(9,460)
	51,149	53,371

9	FIXED ASSETS			
	Leasehold	Computer equipment	Furniture & office equipment	Total
Cost:				
1st January 2017	107,717	100,379	40,575	248,671
Additions		3,051		3,051
Disposals and write offs	-	-	-	-
31st December 2017	<u>107,717</u>	<u>103,430</u>	<u>40,575</u>	<u>251,722</u>
Depreciation:				
1st January 2017	40,136	67,913	22,501	130,550
Charge for the period	58,605	14,467	8,115	81,187
Disposals and write offs	-	-	-	-
31st December 2017	<u>98,741</u>	<u>82,380</u>	<u>30,616</u>	<u>211,737</u>
Net book value:				
31st December 2017	<u>8,976</u>	<u>21,050</u>	<u>9,959</u>	<u>39,985</u>
31st December 2016	<u>67,581</u>	<u>32,466</u>	<u>18,074</u>	<u>118,121</u>

As a result of the landlords enacting the break clause on the lease, the depreciation on the leasehold has been accelerated in 2017 to take this into account. The additional depreciation charged in 2017 is £47,834. Please also see note 11.

10 **FIXED ASSET INVESTMENT**

	2017	2016
	£	£
Investments		
Market Value: 1st January 2017	4,633,774	4,165,219
Additions at cost	287,660	288,029
Disposal proceeds	(313,339)	(264,434)
Unrealised Gains/(losses)	238,620	433,971
Realised Gains/(losses)	55,817	10,989
	<u>4,902,532</u>	<u>4,633,774</u>
Cash	36,405	31,368
Accrued Income	5,400	4,931
Market Value: 31st December 2017	<u>4,944,337</u>	<u>4,670,073</u>

The net gain on the portfolio for 2017 is £274,264 and the initial investment in the portfolio was £4M. The historic cost of investments was £3,877,714 (excluding cash and accrued income) as at 31st December 2017.

11 **OPERATING LEASE COMMITMENTS**

At 31st December 2017, the Council had a single non-cancellable operating lease in respect of a leasehold premise for office accommodation. This lease was granted in April 2013 with an annual rental value of £100,800. The landlord enacted a break clause and the lease was due to end in April 2018. The organisation has agreed to a further 6-month lease until October 2018. The GCC is currently negotiating on new premises with a leasehold of 6 years and a rental of £175,000 per annum. The future minimum lease payments are as follows:

	2017	2016
	Building	Building
Expiring:		
Under 1 year	160,008	100,800
Between 2-5 years	700,000	403,200
Over 5 years	269,792	126,000
	<u>1,129,800</u>	<u>630,000</u>

12	DEBTORS:		
		2017	2016
		£	£
	Due within one year:		
	Trade debtors	1,512	3,400
	Other debtors	6,556	11,596
	Prepayments and accrued income	43,691	25,050
	Corporation Tax		
		51,759	40,046

13	CREDITORS:		
		2017	2016
		£	£
	Amounts falling due within one year:		
	Trade creditors	155,405	73,460
	Retention fees in advance	2,383,550	2,329,950
	Other taxes and social security	31,334	43,595
	Other creditors	98,874	122,251
	Accruals	169,767	193,068
	Defined benefit pension liability	1,822	1,822
	Corporation tax payable	15,298	8,191
		2,856,050	2,772,337

14	PROVISIONS AND OTHER LIABILITIES		
		2017	2016
		£	£
	Deferred tax liability	111,127	76,454
	Defined benefit pension liability	7,744	9,566
		118,871	86,020

The deferred tax liability comprises potential capital gains tax on investments.

15 FINANCIAL INSTRUMENTS – ASSETS & LIABILITIES

	2017	2016
	£	£
Financial assets measured at amortised cost (a)	6,441,696	6,481,403
Financial liabilities measured at amortised cost (b)	(2,824,715)	(2,738,308)
Net financial liabilities measured at amortised cost	<u>3,616,981</u>	<u>3,743,095</u>

Financial assets include investments, cash, trade debtors, other debtors and accrued income.

Financial liabilities include trade creditors, retention fees in advance, other creditors, accruals, pension liability and corporation tax payable.

16 FUNDS

	B/B/F	Income	Expenditure	Gains, losses and Transfers	B/C/F
General Reserves	3,038,163	2,685,538	(3,191,393)	20,173	2,552,481
Revaluation Reserve	670,073	-	-	274,264	944,337
Department of Health Grant	57,349	-	(3,600)		53,749
Total Funds	<u>3,765,585</u>	<u>2,685,538</u>	<u>(3,194,993)</u>	<u>294,437</u>	<u>3,550,567</u>

General Reserves – The Council has no restrictions on the use of these funds for the carrying out its statutory duties. General Funds comprise all of the assets and liabilities of the Council except for those that are held in cash and form the assets of the Department of Health Grant Fund as explained below.

Revaluation Reserve – The investments are shown at market value in the balance sheet and the revaluation reserve identifies the difference between the book value and market value on the last day of the financial year.

Department of Health Grant - The General Chiropractic Council received a grant from the Department of Health to enable the Council to develop a risk proportionate system of Continuous Fitness to Practice (revalidation) for chiropractors.

17 PENSION COMMITMENTS

The Council makes payments on behalf of employees into defined contribution pension schemes. The assets of the schemes are held separately from those of the Council, being invested with independent insurance companies. The pension charge for the period is shown in note 4 to the financial statements.

18 COUNCIL MEMBERS' FEES AND EXPENSES

	2017		2016	
	Salary (1)	Expenses paid (2)	Salary (1)	Expenses paid (2)
Sophia Adams Bhatti	1,662	-	6,650	-
Marie Cashley	-	-	6,650	1,439
Roger Creedon	-	-	707	-
Roger Dunshea	16,187	3,193	23,000	5,097
Tom Greenway	6,650	59	6,650	152
Gareth Lloyd	6,650	1,327	6,650	1,193
Julie McKay	2,217	697	6,650	1,700
Steven Gould	6,650	-	3,879	-
Grahame Pope	708	-	6,650	186
Elizabeth Qua	6,650	2,550	6,650	3,995
Julia Sayers	6,650	209	6,650	454
Gabrielle Swait	6,650	861	6,650	1,281
Carl Stychin	6,650	274	6,650	102
Philip Yalden	6,650	1,065	6,650	1,699
Mary Chapman	9,583	235	-	-
Keith Richards	2,771	-	-	-
Sharon Oliver	2,771	687	-	-
Ralph Pottie	2,771	633	-	-

The table above shows the fees payable for work done in the year and actual reimbursed expenses only. There was a total of £760 paid in 2018 for Council member's expenses relating to 2017. Roger Dunshea was Acting Chair until 31 July 2017. Mary Chapman was appointed as Chair of Council effective from 1 August 2017.

(1) Salary

Members of Council are remunerated on a salary of £6,650 per annum. The Chair's remuneration is £23,000 per annum. These payments are subject to tax and National Insurance. These payments are subject to tax and National Insurance as required.

(2) Expenses

Expenses were claimed by members for travel, accommodation and subsistence, and reimbursed by the GCC. With regard to accommodation, some members book and pay for accommodation requirements directly and these expenses are reimbursed by the GCC in line with the expenses policy. For most members, the GCC will book accommodation requirements and make payments directly to the hotel for the accommodation.

Council meeting attendance

The Council met on four occasions in 2017. Some of these were two-day meetings.

How we are run

Council

In 2017 the GCC Council consisted of 13 members - 6 registrant and 7 lay - responsible for ensuring that the GCC is meeting its statutory duties under the Chiropractors Act 1994 and other legislation.

The Council is responsible for ensuring that the GCC carries out its core functions and sets the longer term strategy to fulfil its statutory duties as defined within the Act. The annual business planning process identifies the activities that will be undertaken in order to meet the Council's strategic aims, over and above the daily operational activities, as well as the resources that will be required.

The Chief Executive and Registrar is appointed by the Council and accountable to it for the delivery of the strategy and the business plan.

Council met four times during the year.

Brief biographies of all current Council members are available on the GCC website at <https://www.gcc-uk.org/about-us/council/council-members.aspx>

Committees of Council

Council is supported in the delivery of its objectives by a number of statutory and non-statutory committees.

There are three non-statutory committees of Council: The Audit Committee, Remuneration Committee and the Reappointments Committee.

Each non-statutory committee includes members of Council and in some cases have appointed external members. External members are appointed by Council. Non-statutory Committee membership is agreed by the Chair of Council.

The members of all statutory committees are appointed by Council. The statutory committees are: Education Committee; Investigating Committee; Professional Conduct Committee; Health Committee; Health Appeals Tribunal; and the Registration Appeals Committee.

The Audit Committee

The Audit Committee's role is set out in its Terms of Reference, which can be found in the Governance Manual and the Chair of the Committee provides reports at each Council meeting.

The Audit Committee has been delegated, by Council, some of its powers in respect of the appointment of the GCC's external auditors. The Audit Committee, in addition to reviewing the strategic risk register, advises the Council about internal controls and risk management systems within the GCC.

Members of the Audit Committee 2017

Elizabeth Qua (Chair)	lay
Gareth Lloyd	registrant
Philip Yalden	registrant
Marie Li Mow Ching (Independent external member)	lay

The Committee met three times in 2017.

Remuneration Committee

The Remuneration Committee oversees the remuneration, benefits, and terms of service for the Chief Executive, Deputy Chief Executive and any GCC Director and sets the overall remuneration framework for the rest of the GCC staff.

The Committee also advises Council on remuneration policy for the Chair and members of the Council and members of our statutory and non statutory committees.

The Committee met twice in 2017 and the Chair of the Committee provided its annual report to Council on the Committee's activities.

Members of the Remuneration Committee 2017

Steven Gould (Chair)	lay
Tom Greenway	registrant
Julia Sayers	registrant
Sylvia Doyle (Independent external member)	lay

The Reappointments Committee

The primary role of the Reappointments 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 reappointment should be recommended for reappointment to the Privy Council.

The Reappointments Committee was convened on one occasion in 2017, in order to consider the reappointment of one lay Council member.

Statutory Committees

Education Committee

The Education Committee's general duty as set out in the legislation is to promote high standards of education and training in chiropractic and to keep that provision made for that education and training under review.

The Committee approves (or "recognises") UK based chiropractic degree courses and advises the Council on matters relating to education, training, CPD, examinations or tests of competence.

The Committee met three times in 2017 and reported into each Council meeting.

Members of the Education Committee 2017

Liz Qua	lay
Sharon Oliver (Chair)	lay
Carl Stychin	lay
Gay Swait	registrant

External members

Mike Barber	registrant
Phil Bunnell	lay (until June 2017)
Donald Cameron	lay (from July 2017)
Philip Dewhurst	registrant (from July 2017)
Barry Mitchell	lay (until June 2017)
Aaron Porter	lay
Carol Ward	lay (from July 2017)
Mark Webster	registrant (until June 2017)

Co-opted member

Cliff Hancock	lay (until June 2017)
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The Registration Appeals Committee

The function of the Registration Appeals Committee is to determine Appeals from registration decisions by the Registrar. No registration appeals were lodged during 2017 and therefore the Committee was not convened.

Investigating Committee

It is the Investigating Committee (IC)'s statutory role to decide whether or not there is a "case to answer" in respect of any complaint made to the GCC about a registered chiropractor. If the IC decides that there is a case to answer it will refer the complaint for a formal hearing before either the Professional Conduct Committee or the Health Committee (depending on the nature of the complaint).

If a chiropractor represents a particular danger to the public, then the IC can issue an Interim Suspension Order which prevents the chiropractor from practising while the complaint against them is investigated.

At least one registrant and two lay members are present at each IC meeting. The panel chairs are lay members. A legal assessor also attends each meeting in order to provide advice to the IC on points of law and assist with the drafting of allegations for consideration by the Professional Conduct or Health Committees. All meetings are held in private.

IC members are appointed by the Council, following the recommendations made by an arm's length panel as the result of a public recruitment process. During 2017 a number of new lay and registrant members of the IC were recruited, appointed and inducted, following an open recruitment campaign.

Members of the Investigating Committee 2017

Chairs

Christine Forde (Legally Qualified Chair)
Valerie Paterson (Legally Qualified Chair)
Eileen Carr (Lay Chair)
Jill Crawford (Lay Chair)
Lubna Shuja (Lay Chair)

Lay members

Rebecca Channon
Fran Gillon
Asmita Naik
Nilla Varsani
Lynne Vernon
Miranda Winram

Registrant members

Michael Barber
Jonathan Cairns
Robert Fish
Sara Glithro
Edward Groenhardt
Daniel Heritage
Clive Maynard
Annie Newsam
Daniel Ruby

Professional Conduct Committee

The Professional Conduct Committee (PCC) adjudicates on complaints against chiropractors that are referred to it by the IC. If it decides that a complaint against a chiropractor is well founded, the PCC may take one of the following steps:

- admonish the chiropractor
- impose a conditions of practice order
- suspend the chiropractor's registration for a specified period
- remove the chiropractor's name from the register

Each PCC panel is made up of one registrant and two lay members and is chaired by one of the lay members who have been appointed by the GCC as panel chairs. A legal assessor is present to advise the PCC on points of law and a transcript of the case is recorded by a stenographer. PCC members are appointed by the Council, following the recommendations made by an arm's length panel as the result of a public recruitment process.

Health Committee

The Health Committee (HC) considers any allegation referred to it by the IC that a chiropractor's fitness to practise is seriously impaired because of their physical or mental condition.

If the HC decides that such an allegation is well founded, the Committee will take one of the following steps:

- impose a conditions of practice order
- suspend the chiropractor's registration for a specified period

HC members are appointed by the Council, following the recommendations made by an arm's length panel as the result of a public recruitment process.

The Health Committee was not required to sit during 2017.

The following are members of the Professional Conduct Committee and Health Committee 2017

Chairs

David Clark (Legally Qualified Chair)

Gelaga King (Legally Qualified Chair)

Neil Mercer (Legally Qualified Chair)

Anne Shamash (Legally Qualified Chair)

Miran Uddin (Legally Qualified Chair)

Lay members

Geoffrey Baines

Philip Geering

Gillian Hawken

Debbie Hill

Gail Mortimer

Helen Potts

Registrant members

Paul Allison

James Gaiger

Samuel Guillemard

Stuart Smellie

Health Appeals Tribunal

A registrant may appeal against a decision of the Health Committee to the Health Appeals Tribunal. No such appeals were made during 2017.

**General
Chiropractic
Council**

