

Annual review of performance 2018/19

General Chiropractic Council



About the Professional Standards Authority

The Professional Standards Authority for Health and Social Care promotes the health, safety and wellbeing of patients, service users and the public by raising standards of regulation and voluntary registration of people working in health and care. We are an independent body, accountable to the UK Parliament.

We oversee the work of nine statutory bodies that regulate health professionals in the UK and social workers in England. We review the regulators' performance and audit and scrutinise their decisions about whether people on their registers are fit to practise.

We also set standards for organisations holding voluntary registers for people in unregulated health and care occupations and accredit those organisations that meet our standards.

To encourage improvement, we share good practice and knowledge, conduct research and introduce new ideas including our concept of right-touch regulation.¹ We monitor policy developments in the UK and internationally and provide advice to governments and others on matters relating to people working in health and care. We also undertake some international commissions to extend our understanding of regulation and to promote safety in the mobility of the health and care workforce.

We are committed to being independent, impartial, fair, accessible and consistent. More information about our work and the approach we take is available at www.professionalstandards.org.uk.

¹ *Right-touch regulation revised* (October 2015). Available at www.professionalstandards.org.uk/policy-and-research/right-touch-regulation

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About the General Chiropractic Council

The General Chiropractic Council (the GCC) regulates chiropractors in the United Kingdom. Its work includes:

- Setting and maintaining standards of practice and conduct for the chiropractic profession
- Maintaining a register of qualified professionals
- Assuring the quality of chiropractic education and training
- Acting to restrict or remove from practice registrants who are not considered to be fit to practise.

As of 31 March 2019, the GCC was responsible for a register of 3,284 chiropractors. It recognises and assures the quality of degree programmes at four education institutions.

The GCC's fee for initial registration is £750. The fee for retention is £800. The GCC offers a reduced fee of £100 for those who register as non-practising.²

² Non-practising registration is a rate of registration fee set out in the fee schedule of the Registration Rules. It is not a distinct category of registration nor is it a Register separate to that containing practising registrants. The sole distinction between practising and non-practising registration is that those registrants not intending to practise as chiropractors within the UK for an entire registration year may pay the reduced fee of £100. The GCC publishes details on its website to indicate to the public and patients which registrants are paying the lower rate and therefore not practising in the UK.



At a glance

Annual review of performance

Regulator reviewed: **General Chiropractic Council**

Standards of good regulation

Core functions

Met

Guidance and Standards

4/4

Education and Training

4/4

Registration

5/6

Fitness to Practise

9/10

1. The annual performance review

- 1.1 We oversee the nine health and care professional regulatory organisations in the UK, including the GCC.³ More information about the range of activities we undertake as part of this oversight, as well as more information about these regulators, can be found on our website.
- 1.2 An important part of our oversight of the regulators is our annual performance review, in which we report on the delivery of their key statutory functions. These reviews are part of our legal responsibility. We review each regulator on a rolling 12-month basis and vary the scope of our review depending on how well we see the regulator is performing. We report the outcome of reviews annually to the UK Parliament and the governments in Scotland, Wales and Northern Ireland.
- 1.3 These performance reviews are our check on how well the regulators have met our Standards of Good Regulation (the Standards) so that they protect the public and promote confidence in health and care professionals and themselves. Our performance review is important because:
 - it tells everyone how well the regulators are doing
 - it helps the regulators improve, as we identify strengths and weaknesses and recommend possible changes.

The Standards of Good Regulation

- 1.4 We assess the regulators' performance against the Standards. They cover the regulators' four core functions:
 - Setting and promoting guidance and standards for the profession
 - Setting standards for and quality assuring the provision of education and training
 - Maintaining a register of professionals
 - Taking action where a professional's fitness to practise may be impaired.
- 1.5 The Standards describe the outcomes we expect regulators to achieve in each of the four functions. Over 12 months, we gather evidence for each regulator to help us see if they have been met.
- 1.6 We gather this evidence from the regulator, from other interested parties, and from the information that we collect about them in other work we do. Once a year, we collate all this information and analyse it to make a recommendation to our internal panel of decision-makers about how we believe the regulator has performed against the Standards in the previous 12 months. We use this to decide the type of performance review we should carry out.

³ These are the General Chiropractic Council, the General Dental Council, the General Medical Council, the General Optical Council, the General Osteopathic Council, the General Pharmaceutical Council, the Health and Care Professions Council, the Nursing and Midwifery Council, and the Pharmaceutical Society of Northern Ireland.

- 1.7 When considering information relating to the regulator's timeliness, we consider carefully the data we see, and what it tells us about the regulator's performance over time. In addition to taking a judgement on the data itself, we look at:
 - any trends that we can identify suggesting whether performance is improving or deteriorating
 - how the performance compares with other regulators, bearing in mind the different environments and caseloads affecting the work of those regulators
 - the regulator's own key performance indicators or service standards which they set for themselves.
- 1.8 We will recommend that additional review of their performance is unnecessary if:
 - we identify no significant changes to the regulator's practices, processes or policies during the performance review period; and
 - none of the information available to us indicates any concerns about the regulator's performance that we wish to explore in more detail.
- 1.9 We will recommend that we ask the regulator for more information if:
 - there have been one or more significant changes to a regulator's practices, processes or policies during the performance review period (but none of the information we have indicates any concerns or raises any queries about the regulator's performance that we wish to explore in more detail) or;
 - we consider that the information we have indicates a concern about the regulator's performance in relation to one or more Standards.
- 1.10 This targeted review will allow us to assess the reasons for the change(s) or concern(s) and the expected or actual impact of the change(s) or concern(s) before we finalise our performance review report.
- 1.11 We have written a guide to our performance review process, which can be found on our website www.professionalstandards.org.uk

2. What we found – our judgement

- 2.1 During April 2019 we carried out an initial review of the GCC's performance from 1 April 2018 to 31 March 2019. Our review included an analysis of the following:
- Council papers, including performance reports
 - Policy and guidance documents
 - Statistical performance dataset
 - Third party feedback
 - A check of the GCC register
 - Information available to us through our review of final fitness to practise decisions under the Section 29 process.⁴
- 2.2 As a result of this analysis, we carried out a targeted review of Standards 5 and 6 of the Standards of Good Regulation for Registration and Standards 3, 4 and 8 of the Standards of Good Regulation for Fitness to Practise.
- 2.3 We obtained further information from the GCC relating to these Standards through targeted written questions.
- 2.4 As a result of a detailed consideration of this further information, we determined that the GCC had not met Standard 5 for Registration and Standard 4 for Fitness to Practise. The reasons for this are set out in the following sections of the report.

Summary of the GCC's performance

- 2.5 For 2018/19 we have concluded that the GCC:
- Met all the Standards of Good Regulation for Guidance and Standards
 - Met all the Standards of Good Regulation for Education and Training
 - Met five out of the six Standards of Good Regulation for Registration –the GCC did not meet Standard 5
 - Met nine out of the ten Standards of Good Regulation for Fitness to Practise – the GCC did not meet Standard 4.
- 2.6 The GCC's performance this year represents a decline since last year, when it met all the Standards.

⁴ Each regulator we oversee has a 'fitness to practise' process for handling complaints about health and care professionals. The most serious cases are referred to formal hearings in front of fitness to practise panels. We review every final decision made by the regulators' fitness to practise panels. If we consider that a decision is insufficient to protect the public properly we can refer them to Court to be considered by a judge. Our power to do this comes from Section 29 of the [NHS Reform and Health Care Professions Act 2002 \(as amended\)](#).

3. Guidance and Standards

- 3.1 The GCC has met all the Standards of Good Regulation for Guidance and Standards during 2018/19. Examples of how it has demonstrated this are indicated below each individual Standard.

Standard 1: Standards of competence and conduct reflect up-to-date practice and legislation. They prioritise patient and service user safety and patient and service user centred care

- 3.2 The GCC's *Code: Standards of conduct, performance and ethics for chiropractors* (the Code) became effective on 30 June 2016. There have been no further significant developments over the course of this period of review in respect of this Standard, and we have not identified any concerns. We are satisfied that this Standard is met.

Standard 2: Additional guidance helps registrants apply the regulator's standards of competence and conduct to specialist or specific issues including addressing diverse needs arising from patient and service user centred care

- 3.3 We reported last year that the GCC published updated *Guidance on Advertising to the Public* in January 2018, to reflect the guidance on the use of chiropractic in relation to babies and children issued by the Advertising Standards Authority (ASA)/Committee on Advertising Practice (CAP) on 9 November 2017. A letter was sent to all GCC registrants jointly from the ASA and the GCC, providing information about the new guidance.
- 3.4 Since then, the GCC has included pointers and information about advertising in its newsletters to registrants. For example, in its July 2018 newsletter the GCC signposted registrants to a CAP webinar covering FAQs by chiropractors on how the advertising rules affect the way in which chiropractors advertise their services.
- 3.5 During this review period the GCC has reviewed its current strategic statement 2018-2020 and concluded that a full refresh of its strategy is appropriate. The GCC therefore has set out its strategic direction over the next five years in its Strategy 2019-23.
- 3.6 One of the aims and objectives of the GCC Strategy 2019-23 is to 'promote standards.' The GCC said that it aims to do this by strengthening its 'support and assurance of high quality education, professional standards and continuing professional development so that patients and the public are safe and have confidence in chiropractors.'
- 3.7 The GCC Council approved the GCC Strategy 2019-23 in December 2018 and we will continue to monitor its progress. We are satisfied that this Standard is met.

Standard 3: In development and revision of guidance and standards, the regulator takes account of stakeholders' views and experiences, external events, developments in the four UK countries, European and international regulation and learning from other areas of the regulator's work

Joint research project

- 3.8 The GCC and GOsC jointly commissioned a literature review on 'how touch is communicated in the context of manual therapy'. The research was conducted by a research team from the University of Huddersfield. The GCC said the research showed that patients report a high level of satisfaction about their care, but they reported some concerns about consent and the quality of communication from practitioners. The GCC published the report on 26 March 2019.
- 3.9 Additionally, two joint GCC/GOsC workshops on 26 and 27 March 2019 were held to explore this area further. The GCC invited patients, chiropractors, osteopaths and educators. The aim of the workshops was to share the findings of the literature review, seek feedback from participants about their response to the findings, promote discussion and generate proposals to better balance the therapeutic benefit and concerns experienced by some patients. The GCC said the next steps will be to disseminate the findings of the research and commission further research by October 2019.

Five-year strategy 2019-23

- 3.10 As part of the preparation for developing the GCC five-year Strategy 2019-23 (mentioned above) the GCC said it has listened to feedback from public, patients, registrants, professional associations and stakeholders. A programme of engagement also took place involving meetings with professional bodies, education providers, the Patients Association and registrants.
- 3.11 The GCC has explained how its approach took account of stakeholders' views and experiences. The evidence we have seen suggests it has used stakeholder feedback from around the UK to inform its five-year strategy development. We will continue to monitor how the GCC engages with all relevant stakeholders.
- 3.12 We are satisfied that this Standard is met.

Standard 4: The standards and guidance are published in accessible formats. Registrants, potential registrants, employers, patients, service users and members of the public are able to find the standards and guidance published by the regulator and can find out about the action that can be taken if the standards and guidance are not followed

- 3.13 The GCC's website provides information about its standards, how to complain if an individual has concerns about a registrant and what action can be taken under the GCC's fitness to practise procedures. The current version of *The Code: Standards of Performance, Conduct and Ethics for Chiropractors* is published on the GCC's website, along with its supporting guidance.
- 3.14 However, the GCC accepts that the current website is 'out-dated, not user-friendly or responsive and has poor accessibility and does not facilitate efficient

processes for registrants or for the GCC team'.⁵ The GCC's 2019 Business Plan proposes to launch a new website to address these issues.

- 3.15 It is positive that the GCC has recognised these issues and is taking action to ensure registrants and members of the public can find standards and guidance published by the regulator. We did not receive any feedback or concerns from members of the public that they have found it difficult to get the information they need from the GCC's website. We will monitor any developments and report on the GCC's progress during the next performance review.
- 3.16 We are satisfied that this Standard is met.

4. Education and Training

- 4.1 The GCC has met all the Standards of Good Regulation for Education and Training during 2018/19. Examples of how it has demonstrated this are indicated below each individual Standard.

Standard 1: Standards for education and training are linked to standards for registrants. They prioritise patient and service user safety and patient and service user centred care. The process for reviewing or developing standards for education and training should incorporate the views and experiences of key stakeholders, external events and the learning from the quality assurance process

- 4.2 In the last performance review report we mentioned that the GCC had commissioned research to find out whether graduates were as prepared as they could be to treat patients, and what could be done to help graduates be more prepared. The results of this research were published in December 2017 and a series of recommendations were made. These included:
- to increase the number of work placements, mentoring and role-playing opportunities by which graduates could further develop vital communication skills;
 - to ensure that the education course content sufficiently covered key patient centred skills including those areas identified as weakest in newly-qualified practitioners; and
 - to widen opportunities for, and encourage, greater take-up amongst newly qualified practitioners of mentoring, shadowing and other forms of development to broaden experience.
- 4.3 Since publishing that research, the GCC has said that actions have been incorporated into the GCC 2019 business plan to 'facilitate agreement on a plan to enable the profession/chiropractors to better support newly qualified chiropractors' to be completed by December 2019. We will continue to monitor the GCC's progress in this area.

⁵ GCC March 2019 Council Meeting, 2019 Business Plan update.

- 4.4 Between March and April 2018 the GCC consulted on two sets of draft revised guidance for chiropractic students and chiropractic educational institutions. In September 2018 the GCC published *Professionalism in Action*, which incorporates both guidance documents it consulted on. The consultation on these areas demonstrates that the GCC is engaging with stakeholders when developing its standards of education and training. Therefore we are satisfied that this Standard is met.

Standard 2: The process for quality assuring education programmes is proportionate and takes account of the views of patients, service users, students and trainees. It is also focused on ensuring the education providers can develop students and trainees so that they meet the regulator's standards for registration

- 4.5 In the last performance review report we mentioned that the GCC had introduced new approval and monitoring arrangements. As part of these new arrangements, a pool of 15 education visitors (nine lay and six registrants) had been recruited and trained to quality assure education programmes. The approval and monitoring processes are documented in the GCC's Quality Assurance Handbook.
- 4.6 Since then, the GCC continued to carry out its quality assurance programme during 2018/19 and there have been no significant changes to its process for quality assuring education programmes.
- 4.7 The GCC has also continued discussions with the European Council on Chiropractic Education (ECCE) regarding closer collaboration and joint working on approval of programmes. In April 2018 the GCC met with education providers to discuss issues arising from the annual monitoring returns and share good practice. The joint discussion with all providers centred on the research into the perceptions of the preparedness of chiropractic graduates for practice mentioned at 4.2 above. Broad topics such as the impact of the UK leaving the EU, student feedback and patient engagement in teaching and learning were also discussed.
- 4.8 The GCC has said that these themes will continue to be key items for further progress in 2019. It told us that it has requested annual monitoring information for the 2017/18 academic year from its education providers. The GCC has said that the information being requested from providers should provide the most relevant information as a starting point for discussions on progress and quality issues in addition to these broader themes.
- 4.9 In November 2018 the GCC also met with the Health and Care Professions Council to share areas of best practice with regard to approval and quality assurance of degrees.
- 4.10 We are satisfied that this Standard is met.

Standard 3: Action is taken if the quality assurance process identifies concerns about education and training establishments

- 4.11 The GCC continues to publish information on its website about how concerns can be raised about an education provider. We have not identified any information

during this performance review period to indicate that the GCC has had to act on any such concerns.

4.12 We are satisfied that this Standard is met.

Standard 4: Information on approved programmes and the approval process is publicly available

4.13 The GCC continues to publish reports of visits to education providers on its website, once the reports have been approved by the Privy Council. During this performance review period the GCC has published the visit and approval/re-approval reports for four programmes, three of which were subject to conditions.

4.14 We are satisfied that this Standard is met.

5. Registration

5.1 As we set out in Section 2, we considered that more information was required in relation to the GCC's performance against Standards 5 and 6 for Registration and carried out a targeted review. The reasons for this, and what we found as a result, are set out under the relevant Standards below. Following the review, we concluded that Standard 5 was not met and therefore the GCC has met five out of the six Standards of Good Regulation for Registration in 2018/19.

Standard 1: Only those who meet the regulator's requirements are registered

5.2 We have not seen any information during this performance review period which suggests that the GCC has added anyone to its register who has not met the registration requirements.

5.3 We are satisfied that this Standard is met.

Standard 2: The registration process, including the management of appeals, is fair, based on the regulator's standards, efficient, transparent, secure, and continuously improving

5.4 There were no rejected registration applications or registration appeals in 2018/19.

5.5 In relation to registration application processing times, we note that the GCC's performance has remained consistent, with the median time from receipt of completed application to approval being one day.

Test of competence (TOC)

5.6 The GCC has kept its registration requirements under review and each year it publishes its TOC External Examiner's annual report. The latest was published in March 2019 and covered the TOC process from January 2018 to January 2019. Overall, the report found that the process is satisfactory with 'standards maintained and public safety assured'. The report also made recommendations which the GCC has committed to reviewing.

- 5.7 In summer 2018, a new TOC External Examiner was appointed and inducted. The annual review meeting with TOC assessors and the External Examiner was held in November 2018. The GCC said that this year's annual review meeting included discussions focused on equality and diversity issues and training on unconscious bias.
- 5.8 We are satisfied that this Standard is met.

Standard 3: Through the regulator's registers, everyone can easily access information about registrants, except in relation to their health, including whether there are restrictions on their practice

The published register

- 5.9 An issue arose during last year's review in relation to the GCC's published register. Under the Chiropractors Act 1994 (the Act), the GCC has an obligation to publish the registered address of every registrant, including those that are 'non-practising'.⁶ Until 2006, the GCC published a hard copy of the register with this information. However, this was discontinued because of the cost and because it was out of date by the time of its publication.
- 5.10 To meet this legal requirement, the GCC now publishes annually an online document which provides a snapshot of the register based on data collected following completion of the retention cycle in January each year. However, the GCC's website advises people that the information in this document is not current, and the online search facility should be used for the most up-to-date information.
- 5.11 In last year's review, we were concerned that there would be significant discrepancies between the published register and the information on the online search function and that this could result in a lack of clarity for members of the public. We were also concerned that the published register did not appear to indicate non-practising registrations or sanctions, and as it would not be updated throughout the year, it would contain information about people who no longer continued to be registered. This raised the risk that the published register could give the false impression to members of the public that such individuals were registered or had no restrictions.
- 5.12 We sought further information from the GCC. It recognised that publishing information that would quickly become out of date had the potential to cause confusion, but noted that it had to comply with its legal requirements. We considered that the GCC was managing the risks arising from the publication of the register in this way by giving clear information on the website to direct users to the online search facility for up-to-date information.
- 5.13 During this review period the GCC confirmed that it would use the online search function to satisfy the publishing requirements in the Act. The GCC explained that this requires an amendment to be made to the online search function to include the addresses of non-practising registrants. The GCC said it has made enquiries

⁶ See footnote 2 above.

about the changes required to the online register to facilitate this and has established that its service provider is unable to complete this work at present.

- 5.14 The GCC said it is planning an upgrade to its registrations database which would resolve the register issues and be compliant with the Act. At the time of writing, this upgrade has not yet been completed but we will continue to monitor developments and comment on any changes in the next review.
- 5.15 We note that the GCC is taking steps to improve its registration database, however the timeline for delivery remains unclear. In the meantime the GCC has measures in place to direct website users to the most up-to-date information about registrants.

Accuracy of information on the online search function

- 5.16 In last year's review, we reported that we had identified irregularities in that the information on the published register did not match the results of the online search.
- 5.17 The GCC investigated the issue and told us that it had identified the source of the problem. It said that an error had been identified whereby the extracted data from its register was not being fully uploaded to the online search function. The issue had been identified and resolved, and the GCC said it was actively monitoring the data to ensure that it did not recur. To ensure that the website information contained up-to-date information, the GCC further explained it routinely checked that the most recently registered chiropractors appeared on its online search facility.
- 5.18 During this review period we conducted a check of on the GCC's register. We did not identify any errors or inaccuracies during the register check and the issues we identified in last year's review appear to be resolved.

Conclusion

- 5.19 We consider that the GCC has taken steps to ensure that it meets the requirements set out in its legislation regarding the publication of information about registrants and has an up-to-date online search facility. However, it appears the GCC has not published on its website an updated list of its register since January 2018. We note the GCC plans to update its registrations database and we will monitor any progress in our next review. We also note that the accuracy issues we found last year have not recurred this year. We are therefore satisfied that this Standard continues to be met.

Standard 4: Employers are aware of the importance of checking a health professional's registration. Patients, service users and members of the public can find and check a health professional's registration

- 5.20 As noted above under Standard 3 for Registration, the GCC's website includes an online search function as well as a published register. The online search function is clearly displayed on the front page of the GCC's website and can easily be found through online searches.
- 5.21 We are satisfied that this Standard is met.

Standard 5: Risk of harm to the public and of damage to public confidence in the profession related to non-registrants using a protected title or undertaking a protected act is managed in a proportionate and risk-based manner

- 5.22 During this performance review it came to our attention that there had been a high number of section 32 (illegal practice) cases which the GCC has recently dealt with, and, in the absence of any previous information regarding this work, we carried out a targeted review of this Standard.
- 5.23 The GCC told us that, due to senior staff changes, an office move and dealing with a large number of advertising complaints, the GCC was receiving more illegal practice cases than it was able to deal with, which led to a backlog. This backlog of cases grew over time from 2015. The GCC identified the backlog as a risk in June 2018.
- 5.24 Whilst we are looking specifically at the GCC performance during this performance review period (April 2018-March 2019) we note that this issue dates back to 2015. However, the GCC only disclosed the backlog of section 32 cases in public papers at its December 2018 Council meeting once it had identified the risk and had taken action. It is a concern that the GCC did not identify and report its illegal practice backlog earlier.
- 5.25 The GCC explained that in June 2018 it took steps to manage the backlog using temporary staff recruited for its work on advertising cases.⁷ By October 2018, it identified that this was not achieving the required outcome, and recruited additional temporary staff to work specifically on the illegal practice cases. Thereafter it made progress in reviewing and acting on cases to reduce the backlog.
- 5.26 The GCC told us that, as part of dealing with the backlog, it took a risk-based approach and prioritised all patient-related complaints and older matters first, with some of these complaints dating back to 2015/16. Thereafter, the GCC said that resources continued to be deployed to deal with the remaining cases. According to Council papers in March 2019, by the end of this performance review period all but one of the section 32 cases had been reviewed out of a revised total of 107 cases and 59 cases remained active amid ongoing review and investigation.
- 5.27 Although outside this review period, the GCC's Council meeting in September 2019 noted that two members of staff have been tasked to clear the backlog. We will continue to monitor the GCC's performance in this area to be assured that it continues to reduce its backlog further.
- 5.28 It is a concern that the GCC had a historic caseload of illegal practice complaints dating back to 2015 which it did not fully begin to address until October 2018. Cases of illegal practice have the potential to put the public at risk of harm and damage public confidence in the profession. Although the GCC put efforts in place to reduce this backlog it was not able to make any significant progress in

⁷ See paragraphs 6.8 to 6.16 below.

addressing this until most of the way through the review period. Taking the GCC's performance against this Standard into account over the whole performance review period, we conclude that this Standard is not met this year.

Standard 6: Through the regulator's continuing professional development/revalidation systems, registrants maintain the standards required to stay fit to practise

- 5.29 We carried out a targeted review of this Standard to obtain further information on the GCC's redevelopment of its continuing professional development (CPD) systems.
- 5.30 The GCC has been working to develop a revised CPD process since 2015. The drivers for change followed detailed checks the GCC undertook on all registrants' CPD summaries since 2015, which found that much of the information registrants completed annually was neither proportionate nor right-touch. The GCC also found that some registrants were not completing the CPD form correctly and some were struggling to articulate their learning needs early on in the learning cycle or link it to their actual learning activity.
- 5.31 The GCC has experienced a number of delays which has meant that it has not been able to make the substantive changes to the CPD process as it would like. For example, the GCC piloted aspects of a redeveloped CPD scheme with registrant volunteers in December 2016, and it was intended that the pilots would continue throughout 2017. However, in June 2017 the GCC said that it would need to re-evaluate the plans for the pilot because of a lack of participation from registrants.
- 5.32 Additionally, as we reported in the last performance review report, the GCC had initially planned to consult on a proposed new CPD scheme in 2018 with a view to implementation in 2019. However, the GCC later said this was not possible as its legislation does not allow for the proposed CPD scheme to become a statutory requirement unless it is able to make changes to its CPD rules.
- 5.33 As a result, in 2018 the GCC's Education Committee agreed that, in the absence of the necessary legislative change, the proposed scheme would be put on hold, and instead learning points from the 2016/17 piloted CPD scheme would be communicated to registrants. This meant that elements of the proposed CPD scheme would be brought forward and, according to the GCC, registrants would be encouraged to adopt these as part of their ongoing CPD.
- 5.34 During this performance review period, the GCC has published *CPD guidance 2018/19* (the guidance) which sets out its current CPD requirements. The guidance also includes the GCC's current thinking on how it might develop the CPD scheme in the future, such as asking registrants to undertake a small number of CPD hours in an area that the GCC identifies as of importance to the profession as a whole. The GCC said that such an approach will help the profession address common issues (such as ongoing issues that arise in fitness to practise cases or the introduction of new legislation) by encouraging registrants to have a structured discussion about their CPD with someone else to support them in reflecting on their learning and development and applying it to their practice.

- 5.35 Following the above guidance, the GCC is developing its CPD scheme further and recently launched a CPD consultation. The consultation ran from 1 May-12 June 2019 to which we provided a response. This however is outside the reporting period and we will report on this in more detail at the next performance review period. However, we can see that, despite the delays in developing a new CPD process, the GCC is taking proactive steps to develop the process further and this recent consultation is evidence of this taking place.
- 5.36 Moving forward, the GCC said that a report on the consultation will be considered at a meeting of the Education Committee in July 2019 with a view to implementing a new CPD process by September/October 2019, subject to the new GCC website and database being implemented. The GCC said that it will also be producing guidance for registrants on the new process.

Conclusion

- 5.37 It is clear that the GCC has been taking steps to develop a revised CPD scheme. Despite delays the GCC has faced, notably those surrounding legislative issues which are out of its control, it has been proactive in making any changes it can and sign-posting to future thinking in its 2018/19 CPD guidance document. In addition, we have not identified any significant risks to public protection in this performance review period as a result of the GCC's approach or delay in progress.
- 5.38 Given the information provided and the steps the GCC is taking, we are satisfied that this Standard is met. We will continue to monitor the next steps in the GCC's plans to develop its CPD scheme.

6. Fitness to Practise

- 6.1 As we set out in Section 2, we considered that more information was required in relation to the GCC's performance against Standards 3, 4 and 8 and carried out a targeted review. The reasons for this, and what we found as a result, are set out under the relevant Standard below. Following the review, we concluded that Standard 4 was not met and therefore the GCC has met nine out of the 10 Standards of Good Regulation for Fitness to Practise in 2018/19.

Standard 1: Anybody can raise a concern, including the regulator, about the fitness to practise of a registrant

- 6.2 The GCC's website continues to explain how concerns can be raised about registrants and how the GCC investigates complaints. The website provides details about the types of concerns the GCC can deal with, how it investigates concerns, and contains a link to an online form to submit a complaint as well as alternative contact details.
- 6.3 We are satisfied that this Standard is met.

Standard 2: Information about fitness to practise concerns is shared by the regulator with employers/local arbitrators, system and other professional regulators within the relevant legal frameworks

- 6.4 In last year's review we mentioned that in August 2017 the Care Quality Commission (CQC) shared a revised draft information-sharing agreement with the GCC after the latter had fed back comments on the draft to the CQC. A final version of the agreement was said to be pending.
- 6.5 We understand that the revised agreement was due to be finalised by March 2019. At the time of writing no agreement is publicly available. Although we note the delay to finalising the agreement, we have not seen any evidence of a risk to public protection arising from the delay.
- 6.6 We are satisfied that this Standard is met.

Standard 3: Where necessary, the regulator will determine if there is a case to answer and if so, whether the registrant's fitness to practise is impaired or, where appropriate, direct the person to another relevant organisation

- 6.7 We carried out a targeted review of this Standard to learn how the GCC is managing complaints about registrant advertising. We reported on this in last year's report and we said that we would monitor developments during this performance review period.
- 6.8 Last year we reported that the GCC received a total of 339 advertising complaints. This year, the GCC explained that 306 of these complaints came from one complainant and as such these were all dealt with as part of its advertising caseload.
- 6.9 As part of our targeted review, the GCC explained that it received the majority of advertising complaints from the one complainant in 2016, with the last batch received in December 2016, and began to deal with these in line with an internal policy. The GCC told us that during 2016 it had to commission and consider legal advice as to how to proceed with the complaints. This caused a delay in dealing with further cases until May 2017 when the GCC applied its advertising claims policy so complaints would be categorised and dealt with as follows:
- referral to the ASA in the first instance, before the concern is then considered by the GCC's Investigating Committee (IC); or
 - progression for consideration by the IC directly; or
 - closure without further action (closure being possible only in very limited circumstances).
- 6.10 The GCC explained that the decision to investigate a complaint took several months and due to the volume of complaints received and complexity of the issues raised, a detailed project plan was developed to manage all the remaining complaints.
- 6.11 The project plan initially estimated that complaints could be progressed in batches of 50, whereby the IC would consider 50 complaints per week in week-long meetings. The GCC projected that the IC would need seven weeks to consider all advertising cases. However, following the first week's IC meeting, it

- became apparent that the IC would only be able to consider 25 complaints at each week-long meeting. The GCC said that it promptly therefore scheduled a further eight weeks of IC meetings. As a small regulator we understand that these cases put the GCC under significant pressure – listing so many IC meetings would have needed a large resource.
- 6.12 The IC meetings were scheduled from October 2018. According to the GCC a total of 290 cases have been considered within the review period, with the last three cases due to have been considered in August 2019.
- 6.13 The GCC also said that it prioritised certain cases over others. For instance, cases were put into three categories, with Category 1 being prioritised as they involved website claims which raised serious issues of unprofessional conduct which were investigated by the GCC's Fitness to Practise Team with a view to referring those matters to the IC first. As a result, the first eight weeks of IC meetings consisted of cases identified as Category 1 cases. Notwithstanding the large number of Category 1 cases, the GCC told us that of 290 cases considered, there was a 'no case to answer' decision on all 290 individual cases and no cases have yet been referred to the GCC's Professional Conduct Committee (PCC).
- 6.14 As part of our targeted review, the GCC told us that the fact that all complaints so far resulted in a decision of 'no case to answer,' should not be equated with the complainant not raising valid concerns. Rather, in many cases the IC found that matters which may have been a concern at the time of the original complaint (in 2016/17) had subsequently been fully remedied at the point of consideration by the IC in 2018 and 2019.
- 6.15 The GCC also explained that, as part of its wider 'Fitness to Practise Review', it will be completing a lessons learned review in order to consider how such cases would be managed in the future. This is a positive step and we will comment on this in more detail when the review has been completed and published.
- 6.16 It is clear from the information provided that the GCC has taken a robust and focused approach in dealing with such a large volume of complaints, the majority of which it received within a short space of time. As a result, it put measures in place to deal with these complaints. We note the length of time it took for the GCC to deal with the complaints, however, given the size of the GCC and its resources along with the relatively small number of cases it usually deals with coupled with the time taken to get legal advice (mentioned above) we can understand this timeframe. In addition, whilst progress was slow, the GCC fitness to practise process does not allow for the closure of such cases at an early stage. This contributed to the length of time taken to deal with the cases. We are assured that the GCC is taking steps to learn from the way it handled these complaints.
- 6.17 We are therefore satisfied that this Standard is met.

Standard 4: All fitness to practise complaints are reviewed on receipt and serious cases are prioritised and where appropriate referred to an interim orders panel

6.18 We have carried out a targeted review of this Standard following the concerns we raised last year about GCC’s risk assessment processes and interim order timeliness.

Risk assessments

6.19 During our audit last year, we identified some concerns about risk assessments. The GCC said that, following our last report it has incorporated a risk rating process on all cases which came into effect from January 2019 and has provided relevant guidance from its revised Fitness to Practise Manual (the manual) published in January 2019. The GCC says this will assist in identifying those cases where risk may still be present and require prioritisation even though the case may not meet the high threshold for referral for an interim order hearing. It is positive that the GCC has taken on board our concerns and says it now carries out a risk rating on all cases.

6.20 The risk assessment guidance in the manual states that a risk assessment should be carried out on receipt of a complaint. The GCC confirmed that on receipt of new information (such as records, observations, comments, expert reports) a further risk assessment is carried out when completing a ‘file review document’.

Interim order timeliness

6.21 We ask the regulators to provide us with the median time from receipt of a complaint to an interim order decision, and the median time from receipt of information indicating the need for an interim order and the decision. The former is an indicator of how well the regulator’s initial risk assessment process is working; whether it is risk assessing cases promptly on receipt, identifying potential risks and prioritising higher risk cases so that further information can be obtained quickly. The latter indicates whether the regulator is acting as quickly as possible once the need for an interim order application is identified.

6.22 During the targeted review the GCC provided us with revised data regarding interim order timeliness. It revised its annual figures from 2016/17 and 2017/18, as the figures it had previously provided were incorrect. The table below shows the correct figures.

Median time to IO decision from:	2015/16	2016/17	2017/18	2018/19
Receipt of complaint	6	11	10	21
Receipt of information indicating need for IO	4	5	5	6

6.23 We can see from the revised figures above that the median time from receipt of complaint to interim order committee decision remained relatively stable from 11 weeks in 2016/17 to 10 weeks in 2017/18. However in 2018/19 this figure has increased to 21 weeks.

- 6.24 We note that the increase in time taken may be because, as a small regulator, the GCC deals with a small caseload⁸ and therefore it is likely that the medians will fluctuate from one year to the next.
- 6.25 However, whilst we reported last year that the annual median time from the point that information is received indicating the need for an interim order to the decision itself being taken had remained stable, the revised figures show that this has not been the case. From the revised data we can see that since 2015/16, the annual median has increased year on year, from four weeks to six weeks. It is concerning that the median time from receipt of information indicating a need for an interim order has increased steadily over a number of years. This is less likely to be explained by a small caseload with one or two longer cases given this has occurred over a sustained period of time.
- 6.26 Overall, the increase in the time taken to make an interim order decision following receipt of information indicating a need for one is a serious concern. By definition, an interim order is meant to address a serious and immediate risk. Any avoidable delay in this process has the potential to pose a serious risk to public protection.

Conclusion

- 6.27 It is positive to see that the GCC has taken on board our concerns regarding risk assessments and we will monitor work in this area following any further developments. However, it is a concern that the GCC's performance regarding interim order timeliness has declined, as these are cases that by definition involve a public protection risk. The information provided, including the revised dataset figures, demonstrates that although the GCC appears to review on receipt serious cases, its processes are such that not all cases are put before an interim order committee in a timely manner. The dataset figures since 2015/16 evidence that this has been an ongoing issue which has slowly deteriorated over time and therefore the GCC's performance is such that we have concluded that this Standard is not met.

Standard 5: The fitness to practise process is transparent, fair, and proportionate and focused on public protection

- 6.28 In the last performance review, we mentioned that the GCC was seeking comments via a public consultation on suggested changes to its *Indicative Sanctions Guidance (ISG)*.
- 6.29 The consultation ran until March 2018. In our response to the consultation, we were supportive of the guidance, but suggested that the GCC could offer further explanation of the importance of professionals adhering to the duty of candour,⁹ and that it might be useful for the guidance to refer to the GCC's guidance for registrants on candour¹⁰ and the regulators' joint statement on candour.¹¹ The GCC considered our comments and the published version of the Conditions Bank and ISG, which came into force in May 2018, referred to the GCC guidance on candour and the joint regulatory guidance on candour.

⁸ The GCC's interim order data this year was based on a total of five interim order cases.

⁹ www.professionalstandards.org.uk/what-we-do/improving-regulation/find-research/duty-of-candour

¹⁰ www.gcc-uk.org/UserFiles/Docs/Guidance/GCC-Guidance-Candour-FINAL.pdf

¹¹ www.gcc-uk.org/good-practice/duty-of-candour/

- 6.30 We have not identified any concerns from the publicly available information to suggest that the process being operated by the GCC is not transparent, fair, proportionate or focused on public protection.
- 6.31 We are satisfied that this Standard is met.

Standard 6: Fitness to practise cases are dealt with as quickly as possible taking into account the complexity and type of case and the conduct of both sides. Delays do not result in harm or potential harm to patients and service users. Where necessary the regulator protects the public by means of interim orders

- 6.32 In our audit last year we identified significant delays in the four advertising cases we reviewed that were closed by the IC. The GCC did not progress these cases in a timely manner. However, we were aware that most of that caseload was still open and the GCC had a clear plan to deal with the remaining cases. As discussed above in relation to Fitness to Practise Standard 3, the GCC has made good progress during this performance review period in dealing with its advertising complaints.

The dataset and performance

- 6.33 We collect a set of annual and quarterly performance data from each regulator. The table below compares the GCC’s performance against the dataset measures of timeliness this year and the previous four years.
- 6.34 Last year we reported that the data demonstrated a mixed performance. Although median time from receipt of initial complaint to an IC decision decreased from 35 weeks in 2016/17 to 26 weeks in 2017/18, the median time from IC decision to final Fitness to Practise Committee decision slightly increased over the same period from 31 weeks to 33 weeks. Meanwhile, the median time from receipt of initial complaint to final Fitness to Practise Committee decision significantly increased from 64 weeks in 2016/17 to 86 weeks in 2017/18.
- 6.35 During this reporting period the data shows the GCC has made progress in reducing the median time taken from final IC decision to final Fitness to Practise Committee decision and time taken from time from receipt of initial complaint to final Fitness to Practise Committee decision. The figures below suggest an overall improvement in the GCC’s performance during this reporting period:

Median time taken (weeks):	2014/15	2015/16	2016/17	2017/18	2018/19
From receipt of initial complaint to the final IC decision	18	21	35	26	30
From final IC decision to final Fitness to Practise Committee decision	43	44	31	33	25
From receipt of initial complaint to final Fitness to Practise Committee decision	72	61	64	86	53

- 6.36 The dataset also captures the number of open cases which are older than 52 weeks. As the following table demonstrates, the total number of open cases over

52 weeks has fluctuated over recent years. This is to be expected given the numbers are relatively small.

Number of open cases	2014/15	2015/16	2016/17	2017/18	2018/19
52-103 weeks old	5	3	13	3	11
104-155 weeks old	1	1	1	1	0
More than 156 weeks old	1	0	0	0	0
Total over 52 weeks old	7	4	14	4	11

- 6.37 Based on the information we reviewed, we do not have concerns about the GCC's performance and are satisfied that this Standard is met.

Standard 7: All parties to a fitness to practise case are kept updated on the progress of their case and supported to participate effectively in the process

- 6.38 Last year, we audited the GCC and found a reduction in the number of customer service concerns identified when compared with the previous audit in 2015/16. We did not identify any serious customer service concerns and considered that there was evidence that the GCC took into account the needs of parties, as well as provided a generally good level of customer service in its communications. We considered that there was therefore evidence of an improvement in the customer service provided by the GCC, and determined that this Standard was met.
- 6.39 The GCC has said that it continues to provide three-weekly updates to parties involved in a fitness to practise matter to ensure that they are kept informed of the progress of their complaint. The GCC also said that an external audit report dated August 2018 identified no concerns.
- 6.40 During this review we have not seen any further evidence to suggest that this Standard is not met. For example, we have not received any concerns about the adequacy of updates or customer service in fitness to practise cases. Therefore we are satisfied that this Standard is met.

Standard 8: All fitness to practise decisions made at the initial and final stages of the process are well reasoned, consistent, protect the public and maintain confidence in the profession

- 6.41 We carried out a targeted review of this Standard following concerns we noted in our last report in relation to the GCC's handling of some conviction cases, and a gap in its powers to impose interim orders to cover appeal periods.

Conviction cases

- 6.42 Last year we reported on the GCC's response to an issue identified in its handling of some conviction cases. The Act states that anyone with a criminal conviction must be referred through fitness to practise procedures. However, previous Registrars of the GCC had decided some conviction cases themselves (as is permissible for cautions) rather than refer them to the IC under the fitness to practise process. Last year the GCC said that it had identified 27 such cases which dated back to when the register opened in 1999.

- 6.43 The GCC undertook a project to identify any further conviction cases not dealt with correctly and referred these to the IC. The GCC explained that the project identified eight further conviction cases, which brought the total to 35 cases. The GCC explained that this increase followed further investigation as the GCC found that its information about criminal offences declared by registered chiropractors did not distinguish whether or not the individual had been convicted.
- 6.44 The GCC has confirmed that it has taken further action so that all 35 cases have now been dealt with in accordance with its powers. It has also explained that it has changed its processes to ensure that all conviction cases it receives are dealt with appropriately. While it was concerning that the GCC was not previously complying with a requirement of the Act, we have not seen any evidence of a significant risk to the public as a result.

Interim orders to cover appeal period for substantive sanctions

- 6.45 In our last performance review we raised a concern that the GCC's legislation does not allow for a final Fitness to Practise Committee to impose an interim order of conditions. This means that a registrant subject to a substantive sanction of conditions can practise without restriction until the end of the 28-day appeal window, or, if an appeal is made, until that appeal is resolved. Last year we noted that the GCC did not impose any conditions of practice orders, therefore there was no risk to the public. This year, the GCC said that it has imposed two conditions of practice orders on registrants at final hearings. Given the GCC's inability to impose interim conditions during the appeal period, a risk to public protection exists. However, we recognise that the GCC is currently powerless to intervene.
- 6.46 The GCC explained that following our last performance report and comments regarding this issue, it wrote to the Department of Health and Social Care (DHSC) and flagged this risk. The GCC said that DHSC responded stating that it would not take the matter forward at present but rather, this would be picked up in a wider reform package. Since the GCC provided its written response to this Standard, the Government has published its response to its consultation on regulatory reform, which sets out its proposals for changes to the regulation of healthcare professionals.¹² We understand the GCC is not able to tackle this risk until wider changes are made to its legal framework. We will comment on any reform in this area in the next performance review.

Conclusion

- 6.47 The GCC has changed its processes for dealing with conviction cases and has identified and dealt with all the cases which it did not previously manage correctly. It has also taken appropriate steps to highlight to DHSC the risks associated with its legislative restraints regarding interim orders. We will comment on any developments in this area in the next review.
- 6.48 We are satisfied that this Standard is met.

¹²https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/816914/Promoting_professionalism_reforming_regulation_consultation_reponse.pdf.

Standard 9: All fitness to practise decisions, apart from matters relating to the health of a professional, are published and communicated to relevant stakeholders

- 6.49 The GCC continues to publish fitness to practise decisions on its website, with the exception of those that relate to the registrant's health. We have seen no evidence to suggest that the GCC has failed to publish or communicate any fitness to practise decisions. No concerns have been identified through our check of the register, and we are satisfied that this Standard is met.

Standard 10: Information about fitness to practise cases is securely retained

- 6.50 During the period of this performance review, the GCC reported no data breaches to the Information Commissioner's Office.¹³ We have not identified any other concerns or developments and are therefore satisfied that this Standard is met.

¹³ The Information Commissioner's Office is the UK's independent authority set up to uphold information rights in the public interest, promoting openness by public bodies and data privacy for individuals.

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