

General Chiropractic Council Meeting Agenda

19 March 2025 at 9:30 (In-person)

Item	Action	Presenter	Time
1. Welcome, apologies and declarations of interest		Chair	9.30
2. A. Council Minutes of 5 December 2024	To approve	Chair	9.35
B. Matters Arising	To note		
3. Chair's Report	To note	Chair	9.45
4. Chief Executive & Registrar's Report	To note	CER	9.55
5. A. Regulatory Committee Appointments	To approve	Interim	10.10
B. Fitness to Practise Update	To note	D of Change	
6. Finance Update – Management Accounts to February 2025	To note	D of CS	10.30
7. 2025 Business Plan update	To note	BPO	10.40
Break (20 minutes)			11.00
8. Annual Reports on Key Operational Areas:	To note	D of	11.20
A. Fitness to Practise Report 2024		Development	
B. Registration Report 2024			
9. A. Annual Report from the Professional Conduct Committee (PCC)	To note	Chair of PCC	11.30
B. Annual Report from the Investigating Committee (IC)	To note	Chair of IC	11.45
10. A. Annual Report from the Audit and Risk Committee (ARC)	To note	Chair, ARC	12.00
B. Report from the Chair of the ARC	To note	Chair, ARC	12.10
11. Any Other Business		Chair	12.15

Close of meeting: 12.20

Date of next meeting: 18 June 2025 (MS Teams)



For approval

**[Unconfirmed] Minutes of the meeting of the General Chiropractic Council
On 5 December 2024 by videoconference**

Members present	Jonathan McShane (Chair of Council) Jennie Adams Paul Allison Elisabeth Angier Fergus Devitt Samuel Guillemard	Catherine Kelly Annie Newsam Aaron Porter Ralph Pottie Keith Richards Keith Walker
Apologies	No apologies were received as all members were present.	
In attendance	Nick Jones, Chief Executive and Registrar Penny Bance, Director of Development Joe Omorodion, Director of Corporate Services	Nirupar Uddin, Director of Fitness to Practise Mary Nguyen, Business and Project Officer Rachana Karekar, Governance Coordinator, GCC (minutes)
Observers	Kate Steele, Partner, Capsticks Solicitors Kate Paul, FtP caseworker Elizabeth Austin, Education & Standards Officer (item 9)	Siobhan Carson, Scrutiny Officer of the Professional Standards Authority Khizra Saeed, FtP caseworker Andrew Fielding, Policy and Communications Lead

1.	<p>Welcome, apologies and declarations of interest</p> <p>The Chair welcomed Council members and observers.</p> <p>No apologies were received.</p> <p>Members' interests were captured in the register, published on the GCC website and were accurate. No additional interest was notified.</p>
2.	<p>Draft minutes of the Council meeting of 25 September 2024 and matters arising</p> <p>A. Minutes Council agreed the minutes were an accurate record of the meeting.</p>

	<p>B. Matters arising The Chair confirmed that there were no matters arising from the previous meeting.</p>
<p>3.</p>	<p>Chair's report</p> <p>The Chair presented the report highlighting the significant work on the Code of Professional Practice, acknowledging the significant efforts of the team in managing the substantial workload associated with the development of the Code, a pivotal undertaking occurring once in a decade.</p> <p>The Chair discussed the appointment of two associate members and thanked Annie Newsam for her assistance in the process, noting the strong pool of applicants and the decision to appoint two candidates to, amongst other things, provide mutual support in their new roles. The Chair confirmed that both candidates had accepted the roles.</p> <p>The Executive outlined the next steps, including internal communication of the appointments through the meeting minutes, with a public announcement planned for the GCC newsletter in January 2025.</p> <p>The Chair further highlighted the appointment of an Independent Panel member to support Council recruitments and noted the upcoming recruitments of new Council members. The Chair informed that Paul Allison would join the Remuneration and HR Committee bringing it back to full membership. The Chair expressed gratitude to Council members for their cooperation during the annual appraisal process completed in November 2024.</p> <p>The Chair shared his positive experience of his visit, with Catherine Kelly, to London South Bank University (LSBU), and referenced staff and students' engagement.</p> <p>Action 1: The Executive to circulate to Council members a brief biography of the newly appointed Independent Panel member and details of the two appointed Council Associate members.</p> <p>The Council noted the report.</p>
<p>4.</p>	<p>Chief Executive and Registrar's report</p> <p>The Chief Executive and Registrar (CER) presented his report.</p> <p>The CER provided an overview of the productive autumn. The CER praised the team for maintaining high standards and highlighted their visibility both nationally and internationally. The CER reported the keynote address given by the GCC at the World Federation of Chiropractic Global Education Conference, together with participation by the GCC in the Scotland regulatory system conference held biennially.</p>

	<p>The CER noted that as to progress on regulatory reform, the focus has been on the GMC Order on the regulation of physician and anaesthesia associates.</p> <p>Ralph Pottie shared reflections from the Scottish professional health and social care regulatory event, highlighting key themes: the importance of the Duty of Candour; the potential for compassionate regulation to support workforce retention; and perceptions of overcomplex regulatory processes. Members discussed how promoting the Duty of Candour, including early apologies, might reduce formal complaints and foster trust and noted that candour was the focus for the current CPD year.</p> <p>Council noted the report.</p>
5.	<p>Fitness to Practise Report</p> <p>The Director of Fitness to Practice (FtP) presented the report.</p> <p>The Director of FtP highlighted that the team was now fully staffed following appointments made. The Director noted that additional measures had been implemented including outsourcing cases to external solicitors and securing temporary legal support with a view to addressing capacity challenges and supporting the implementation of the case management system.</p> <p>The Director presented the performance report for Q3 (July–September) highlighting progress in reducing the volume of open cases despite increased complaint volumes, with 24 cases closed during the quarter. The Director noted that timeliness targets remain impacted by staffing transitions, a focus on high-risk cases, and an overall rise in complaints, particularly in November 2024.</p> <p>Council members noted the progress on Section 32 complaints, with a temporary staff member potentially advancing this area of work and reducing the volume of open cases. The Director noted that the performance improvements as to S32 work would be evident by the next Council meeting in March 2025.</p> <p>It was queried whether all newly received Section 20 complaints were risk-assessed and categorised. The Director confirmed that all formal complaints were risk-assessed upon receipt, with the majority being moderate or high risk.</p> <p>Council members discussed the potential for exploring comparisons with other regulators regarding referral and outcome rates to address perceptions of regulatory activity. The Director noted that comparative data is included in Council papers with GCC performance comparing well on the whole.</p> <p>Members queried whether there was a risk of increased workload due to more exacting expectations under the new Code of Professional Practice. The Director noted the requirements within the new Code were reasonable expectations and that there would be a timing issue. The Director emphasised that the extant Code would be in place through 2025, with only potential</p>

	<p>misconduct occurring in 2026 assessed against the new Code of Professional Practice.</p> <p>Further to a query regarding the typical number of Professional Conduct Committee (PCC) hearings and the consequential budgetary implications. The Director explained that budgets and resourcing decisions typically assume 12 cases referred to the PCC annually and noted there were fewer in 2024, partly due to fewer considerations by the Investigating Committee.</p> <p>Council members acknowledged the team's efforts in managing the workload and catching up with cases.</p> <p>Action 2: The Director to ensure future reports take into account available comparative data from other regulators.</p> <p>Council noted the report.</p>
6.	<p>Finance Update – Management Accounts to October 2024</p> <p>The Director of Corporate Services (DCS) provided an update on the financial performance against the targets to end-October 2024.</p> <p>The Director reported a headline surplus of £238k for the period, which had exceeded the headline forecast surplus of £120k by £118k. While the overachievement of the target surplus was noted, the Director cautioned that a potential deficit of approximately £90k was expected by the end of the year due to factors such as staffing and other costs to support vacancies.</p> <p>The Director highlighted that the reserves were valued at £3.9m, including £1m in cash. The investment portfolio's value had risen by 5.1% (£233k) since January 2024.</p> <p>A member questioned the significant swing from a year-to-date surplus to a projected end-of-year deficit. The Director explained that this was due to the timing of outsourced pre-IC cases work and related invoices, which were expected to impact the final months of the year. The Director added that the forecast deficit would be realised if the profiled expenditure for the remaining two months of the year was incurred as planned.</p> <p>Council noted the report.</p>
7.	<p>Business Plan 2024 Performance Update</p> <p>The Business and Projects Officer (BPO) provided an update on the performance of the 2024 business plan, highlighting significant achievements across various projects. The BPO outlined the progress of five projects, noting that one, the review of the code of practice, was complete, subject to Council approval. Further, that the enhancement to 'iMIS' (registration system) had been removed from the plan in September 2024 after scaling back, with incremental improvements made instead. The toolkit on managing patient data</p>

	<p>had been published, with other resources under the project on fostering professionalism postponed to 2025. The case management system project had progressed, with the 'go-live' date of January 2025 remaining in place. The development of the GCC corporate strategy was ongoing.</p> <p>The BPO further provided an update on communications activities, noting that the major campaign for the year was the consultation questionnaire for the Code, which had garnered valuable feedback from both patients and registrants.</p> <p>It was queried how the RAG ratings for projects that were not yet 100% complete but were shown as 'green.' The BPO explained that these projects were on schedule and not at risk of non-delivery, despite not being fully complete at the time of the meeting.</p> <p>It was suggested including comparative information to show year-to-year changes, rather than focusing solely on the current performance year.</p> <p>Action 3: The Executive to consider the presentation of such information for future reports.</p> <p>Council noted the report.</p>
8.	<p>Strategic Risk Register November 2024</p> <p>The Chief Executive and Registrar (CER) presented this report.</p> <p>The CER provided an overview of the risk management process, highlighting the monthly reviews of strategic and operational risks by the management team and the Programme Management Board. The CER stressed the importance of identifying and responding to risks, and drew attention to the example of organisational capacity in the fitness to practice area.</p> <p>Members raised concerns about cybersecurity risks, referencing recent heightened government warnings and suggesting a review of the cybersecurity policy. The CER acknowledged the importance of the issue, highlighted existing measures such as penetration testing for the case management system, that the Audit and Risk Committee had received a report on the overall approach to cyber security by the GCC in November 2023, and proposed sharing the organisation's cybersecurity arrangements to Council meeting in March 2025.</p> <p>The Chair of the Audit and Risk Committee assured members of the arrangements in place by the Committee in its assurance of risk management including those presented by cyber security risks.</p> <p>Action 4: The Executive is to share the current GCC's cybersecurity arrangements with the Council in March 2025.</p> <p>Council approved the Strategic Risk Register.</p>

9. Code of Professional Practice

The Director of Development presented the report on the final draft of the revised Code, noting it was the culmination of a two-year review process, including a scoping review and extensive stakeholder engagement. The Director outlined the consultation process, which included 116 survey responses and feedback from registrants, patients, the PSA, and other stakeholders, analysed independently by Community Research. Council noted that the key changes focused on improving clarity and addressing gaps identified in the current Code. Legal input had been obtained in refining the Standards.

The Director noted that further to approval the Code would be subject to a year-long implementation phase that would include the updating of guidance and toolkits with reference to the new Code and orientation and support provided to registrants involving professional bodies as appropriate. The Director noted that a few minor checks were required in order to complete the Glossary, and that agreement to the Chair approving final changes subsequent to the meeting was sought.

It was queried whether the high proportion of respondents identifying as having a disability in the consultation feedback was significant. The Director noted the observation, cautiously attributing it to increasing preparedness by respondents to disclose disabilities, but also agreed to investigate further and report back to Members.

Members commended the thoroughness of the consultation process. It was suggested that a document that highlighted key changes in the new Code in communicating the outcome to the profession would be helpful. The Director confirmed the consultation feedback; a document highlighting the 'Standards of proficiency' as required in the statute; and other materials to ensure the clarity and accessibility of the Code would be published.

A member sought clarification on the one-year transition period for the new Code. The Director explained that while the Code will be published and referenced within a year, it will not be enforceable until one-year post-publication.

It was queried whether the survey response rate of 2% of chiropractors engaging reflected robust feedback. The Director reassured members, highlighting the extensive consultation efforts that included a variety of engagement events beyond the survey. The Director further noted that the response was comparable to those for consultations carried out by other bodies. The CER noted that Registrants often rely on their professional associations to act in this regard, with detailed and helpful responses received from each.

	<p>The Council noted the report from Community Research and the consultation response document and approved the new Code of Professional Practice, the equality impact assessment and Welsh language impact assessment and agreed to delegate the approval of the Glossary to the Chair.</p> <p>Action 5: The Chair to be invited to approve the final version of the Glossary to the Code prior to publication.</p> <p>Action 6: The Executive to publish the Code, and associated reports, at the start of 2025.</p> <p>Action 7: The Director of Development to investigate the proportion of respondents declaring a disability.</p>
10.	<p>Business Plan 2025</p> <p>The Business and Projects Officer (BPO) presented the proposed 2025 Business Plan, highlighting its focus on three strategic initiatives: implementing the new Code of Professional Practice, embedding the case management system into the FtP investigation process, and developing the next corporate strategy for 2025. The BPO noted the plan's balance of ambition and realism, considering available resources.</p> <p>Council noted the two annexes outlining planned activities and performance measures to be reported quarterly.</p> <p>Council approved the 2025 Business Plan.</p>
11.	<p>Proposed Budget 2025</p> <p>The Director of Corporate Services (DCS) presented the proposed budget for 2025, highlighting the challenges of balancing income and expenditure. The Director noted that while income was increasing marginally, costs were rising significantly. These were due to investments in operational capabilities like the case management system, which had added approximately £70k to the annual operating cost base.</p> <p>The Director explained that the budgeted surplus for the year was £28k, with total income expected to be £3.287m and total expenditure at £3.259 m. The Director noted that the annual retention income, which accounted for 87% of the total budgeted operating income, had been fully received at the time of the meeting.</p> <p>The Director outlined the potential risks to the realisation of the budgeted surplus for the year. These included potential additional staffing costs in the FtP team and unforeseen increases in PCC hearing costs. Council noted that if these contingencies materialised, the budgeted surplus could result in a deficit of up to £152k. However, the Director reassured the Council that the designated reserve of £1.2 million could cover any shortfalls, subject to a robust business case and its approval by Council.</p> <p>Council approved the proposed budget for 2025.</p>

<p>12.</p>	<p>Report from the Chair of the Education Committee</p> <p>The Chair of the Education Committed presented the update report to the Council, following the Committee's meeting on 21 November 2024.</p> <p>A. Recognition of proposed new programme and satellite programmes</p> <p>The Chair of the Education Committee recommended the approval of the proposed new chiropractic degree programme at Coventry University, and satellite programmes at HSU London and MCC Ulster.</p> <p>The Council approved the recognition of</p> <ul style="list-style-type: none"> • the proposed chiropractic degree programme at Coventry University with conditions as set out in the Approval panel's report. • the proposed chiropractic degree programmes at HSU London with one condition and the proposed part-time chiropractic degree programme in Bournemouth as set out in the Approval panel's report. • the proposed chiropractic degree programme at MCC Ulster with one condition as set out in the Approval panel's report. <p>B. Annual Report for 2024 from Education Committee</p> <p>The Chair of the Education Committee presented the annual report on the work that had been undertaken by the Education Committee during 2024.</p> <p>Council noted the report.</p>
<p>13.</p>	<p>Report from the Chair of the Audit and Risk Committee</p> <p>The Chair of the Audit and Risk Committee presented a brief update on the Committee's activities, noting that the committee met with investment managers at the last committee meeting.</p> <p>The Chair further presented the amendments to the committee's terms of reference for Council's approval.</p> <p>Council approved the Committee's updated Terms of Reference and noted the report from the Audit and Risk Committee.</p>
<p>14.</p>	<p>Report from the Chair of the Remuneration and HR Committee</p> <p>The Chair of the Remuneration and HR Committee provided an update from the Committee, highlighting progress on partner service contracts, which was undergoing review with legal and tax advice.</p> <p>The Committee Chair further discussed and recommended a 3% pay award for staff, as outlined in the approved budget. Additionally, proposing an increase of 1.9% for entry-level salary bands to address recruitment and retention challenges in key roles. The Executive confirmed that the additional cost for this adjustment had been incorporated into the budget.</p>

	<p>Council approved the 3% pay award to staff for 2025 and an additional 1.9% increase for entry-level salaries to address recruitment and retention challenges.</p> <p>The Council noted the progress made to-date on the review of the partners' service contract.</p> <p>Council approved the appointment of two Council Associate members.</p> <p>Council noted the report.</p>
15.	<p>Council Work Programme</p> <p>The Council reviewed and agreed the work programme and meeting dates for 2025.</p>
16.	<p>Any other Business</p> <p>There were no items of other business.</p> <p>The Chair thanked members for their contributions.</p>
	<p>Date of next meeting: 19 March 2025 In-person at the GCC office.</p>



For noting

Agenda Item: 02b

Subject: Matters Arising from 5 December 2024

Presenter: Jonathan McShane, Chair GCC

Date: 19 March 2025

Item	Actions	Update
3.	<p>Chair's report</p> <p>Action 1: The Executive to circulate to Council members a brief biography of the newly appointed Independent Panel member and details of the two appointed Council Associate members.</p>	Completed
5.	<p>Fitness to Practise Report</p> <p>Action 2: The Director to ensure future reports take into account available comparative data from other regulators.</p>	Ongoing
7.	<p>Business Plan 2024 Performance Update</p> <p>Action 3: The Executive to consider the presentation of such information for future reports.</p>	Ongoing
8.	<p>Strategic Risk Register November 2024</p> <p>Action 4: The Executive is to share the current GCC's cybersecurity arrangements with the Council in March 2025.</p>	Completed (commercial confidentiality – see Private session pack)
9.	<p>Code of Professional Practice</p> <p>Action 5: The Chair to be invited to approve the final version of the Glossary to the Code prior to publication.</p> <p>Action 6: The Executive to publish the Code, and associated reports, at the start of 2025.</p> <p>Action 7: The Director of Development to investigate the proportion of respondents declaring a disability.</p>	Completed Completed Completed



For noting

Chair's report

Meeting paper for Council on 19 March 2025

Agenda Item: 03

Introduction

1. In his report, the Chief Executive and Registrar sets out the background to a coroner's request to us under *Regulation 28* powers and the steps we are taking to respond. It follows the sad death of Joanna Kowalczyk in 2021. On behalf of Council, we convey our condolences to Joanna's family and friends.
2. Members are welcomed to this in-person meeting of Council, our first of the year. This meeting in the business cycle has a focus on our performance in 2024. The annual report and accounts will be considered by Council in the private session as they are subsequently laid before Parliament albeit we will hear from the Chairs of our Investigating Committee and Professional Conduct Committee and receive reports on our registration and fitness to practise performance.
3. As a matter of record, I confirm that as agreed previously the meeting cycle of Council meetings has been adjusted, with our in-person meetings now taking place in March and September, and our June and December meetings held virtually. We will evaluate the impact of this change to ensure our governance arrangements remain effective. Committee meeting arrangements are unchanged albeit Chairs keep those under review. I say more on governance effectiveness, below.
4. We welcome our two Associate Members to this their first meeting of Council – Sumaya Ahmed, and Dan Sullivan. This new role provides an opportunity for chiropractors who may not have previously considered a role on a Board or Council to experience governance in action, and a commitment by us to develop future leaders for the profession. Our hope is to provide a fresh voice at Council – challenging and enhancing our discussions, sharing their lived experience of chiropractic education and practice, and helping us as we set our next strategy. I have no doubt this will be the case.

Governance matters

5. A *Board Effectiveness Review* is important in ensuring that the Council operates with clarity, efficiency, and accountability. We know that strong governance underpins effective decision-making, strategic oversight, and the confidence that our stakeholders have in us. We embark on our third effectiveness review since 2019.
6. Members will recall that, this time we opted for a hybrid approach handled internally with some independent assessment- a structured four-stage process: a survey gathering quantitative insights from Council Members, Committees, and senior executives; qualitative discussions led by the Chair to explore individual experiences and perspectives; a document review assessing key governance frameworks; and an independent observation of a Council meeting to evaluate engagement and the dynamics of decision-making. We welcome Giles Peel, an experienced governance expert to this meeting to do so. This will provide the final part of the review following our development session yesterday.
7. The expected outcomes include a clearer understanding of the Council's strengths and areas for improvement, practical recommendations to enhance governance effectiveness, and an opportunity to refine processes, structures, and relationships. This will support the Council in fulfilling its responsibilities and ensuring that governance remains robust, responsive, and aligned with strategic objectives. A full report on findings and next steps will follow, with a summary published in my report to the June 2025 meeting of Council.
8. We consider the appointment of the overall Chair of the Investigating Committee and reappointments to the Professional Conduct Committee later in the meeting. The recruitment round for two Council vacancies arising in July 2025 – for a lay and registrant member, including a member for Scotland progresses. The closing date has passed with a good and promising response. Interviews are in April and my hope is that the successful applicants will be able to observe the June meeting of Council if available before commencing their roles formally from 1 August 2025.

Engagements

9. With members of the Executive, I am attending the World Federation of Chiropractic conference in Copenhagen 7-11 May 2025. This is an important event providing an opportunity to meet with stakeholders in a concentrated period.
10. Since the last meeting of Council I have undertaken the following:

- 29 January 2025: Attended Royal College of Chiropractor's winter conference and AGM in London with a full programme of lectures (including by Annie Newsam and Elisabeth Angier, members of Council.)
- 10 February 2025: Visited McTimoney College of Chiropractic, Abingdon and met with the principal, senior staff, and students.
- February 2025: Meetings with members of Council as part of the GCC governance effectiveness review.
- March 2025: Introductory meeting with Derek McFaull, Chair of GCC Professional Conduct Committee.

Jonathan McShane

Chair



For noting

Chief Executive & Registrar Report

Meeting paper for Council on 19 March 2025

Agenda Item: 04

Purpose

This regular report summarises key developments in the period since the Council last met, on 5 December 2024, not covered elsewhere on the agenda.

Recommendations

Council is asked to note this brief report with questions invited.

General update

1. Members are aware of the recent departure of Niru Uddin, Director of Fitness to Practise following nine years at the GCC. I place on record my gratitude for Niru's hard work, commitment and dedication during that period.
2. I have appointed an interim Director of Change, Angela Maragna, an experienced senior leader to review all aspects of the function and to support the team during a challenging transition period as we implement the new case management system. I want to complete this review before identifying a new function lead so we are clearer as to the competencies and skills required to ensure we meet all current challenges and those of the future. Angela will say more in the fitness to practise update later in the meeting.

Coroner – prevention of death report

3. An Inquest has recently concluded on the sad death by stroke of Joanna Kowalczyk in 2021. It followed treatment by a chiropractor along with other somewhat complex factors. A [news piece](#) on our website provides context.

4. The coroner wrote to the GCC, under 'regulation 28' powers, asking us to consider [our role in ensuring] that 'consideration to obtaining medical records should always be given before assessment, particularly where recent medical treatment or investigations has been undertaken.' [Regulation 28 report to prevent future deaths](#).
5. The coroner raises important considerations, and we will wish to carefully consider those. In discussion with the Chair of Council, a small expert group has been convened comprising of leaders within the profession and others from outside the profession to ensure that a broad perspective is obtained. I am grateful to Fergus Devitt and Keith Walker as Council Member representatives on the group. The draft terms of reference are appended to my paper and details membership and the timetable amongst other things.
6. The group will meet on two or three occasions over the next few months, with the first meeting determining the focus of activity and commissioning of any reports or research. It is expected that progress will be reported to the June 2025 meeting of Council with final recommendations presented to the September meeting of Council for approval.
7. I have formally responded to the coroner setting out our intended actions, appended. I would emphasise any actions taken in response to the coroner's requirement of the GCC is a matter for Council. Equally, we have set in train a robust set of arrangements to consider carefully the requirements of the coroner.

Professional Standards Authority (PSA)

a. Consultation on Standards

8. The Professional Standards Authority for health and social care (PSA) has recently launched an important consultation on its review of Standards for regulators and Accredited Registers.
9. Members will be aware that we are subject to an annual review by the PSA on our performance against a set of standards. Those standards and those the PSA establish for accredited registers are under review. The PSA say that they want to make sure the standards are focused on the right things to protect the public. For example, "Are we (the PSA) looking for the right things for the benefit of the public?" and "Does meeting the Standards mean an organisation delivers good regulation?" These are important questions and one we will wish to engage in.
10. The PSA has said that it welcomes comments on all aspects of the current standards and asks broad questions within its consultation. As such, Members are encouraged to consider those in thinking about our experiences over the last few years as recipients of the performance review process. Now is the time.

Additionally, the PSA is flagging up potential areas for change that it is considering. These include:

- Bringing the two types of standards into alignment where it is possible
- Making the standards clearer, more accessible and transparent
- Whether and how it should take an interest in organisational governance, culture and leadership given how often it emerges as a challenge in the health and social care sector, and the impact it can have on performance
- Whether measures could be introduced to remove gaps in criminal convictions checks for some health and social care practitioners
- Whether new criteria for registers applying for accreditation will support public confidence.

11. More detail on the consultation along with supporting material can be found [here](#). Members are asked to review.

12. The executive will be giving these proposals our full attention in the coming weeks with a view to drafting a response. We propose a Members' Teams meeting session on that draft response towards the end of April to meet the consultation deadline of 8 May 2025.

b. Right touch regulation

13. The Professional Standards Authority is planning to release a new version of its guidance document *Right-touch regulation* in October 2025. The first version was published in 2015.

14. The PSA has recently published a discussion document inviting views. Right-touch regulation is the approach the Authority say it uses in its work, encouraging others to do the same. This involves assessing the level of risk of harm to the public and deciding on the most proportionate and effective response. I welcome comments at the meeting or subsequently. Members may also wish to submit personal responses. The discussion document can be found [here](#).

Royal College of Chiropractors (RCC)

15. The Royal College of Chiropractors has launched a consultation on a new Chiropractic Practice Standard, which focuses on the principles and expected standards of Quality Improvement in a chiropractic care setting and aims to assist chiropractors to achieve those standards. The RCC's Chiropractic Practice Standards are evidence-based documents designed to help chiropractors meet their obligations in the provision of patient care and/or the governance of their services. For each area of practice, they:

- Highlight relevant elements of the General Chiropractic Council's Code, and relevant legislation, as *requirements*;
- Provide *expected standards* of practice informed by the evidence;

- Provide additional helpful *guidance*; and
- Provide a benchmark for good practice.

The consultation is aimed at the chiropractic profession, but the RCC is also keen to hear from other health professionals, health & care organisations, commissioners, patients and the public. The deadline for submission of comments is Friday 11 April at 5pm. You can read the draft document and participate in the consultation [here](#),

GCC Strategy 2025-30

16. I am grateful for members' involvement in the development of the draft GCC strategy and agreement that it will be subject to a full consultation exercise. On that basis I am grateful for members' continued engagement in the meeting this afternoon.

Meetings and engagements (all virtual unless stated otherwise)

December 2024

- 12 December – Institute of Regulation Workforce Special Interest Group
- 13 December – Chief Executives Steering Group

January 2025

- 22 January – Paul Rees, newly appointed interim CER, NMC, for an introductory meeting
- 24 January – Meeting of CEORB
- 29 January – The Royal College of Chiropractors annual conference (in person)

February 2025

- 5 February – Institute of Regulation - Regulators of professions roundtable (in person)
- 10 February – External auditors further to audit of accounts
- 21 February – Meeting of CEORB
- 27 February – Health and Social Care Regulators Forum

March 2025

- 5 March – Meeting of the Audit and Risk Committee of the GCC

Nick Jones

Chief Executive & Registrar

Ms Leila Benyounes
Assistant Coroner for Gateshead and South Tyneside
Coroner Office, Town Hall and Civic Offices
Westoe Road, South Shields
Tyne and Wear NE33 2RL

12 March 2024

Dear Ms Benyounes

Inquest: Joanna Daria Kowalczyk

At the conclusion of the inquest on 22 January 2025 investigating Joanna's sad death you issued a report under paragraph 7, Schedule 5, of the Coroners and Justice Act 2009 and regulations 28 and 29 of the Coroners (Investigations) Regulations 2013.

Your report was issued to, amongst others, the General Chiropractic Council (GCC) indicating that we respond by 25 April 2025. This is our response.

The GCC was an interested party at the Inquest. Our investigation into the actions of the chiropractor involved in the treatment of Joanna are ongoing.

We acknowledge the Regulation 28 report and that we consider [our role in ensuring] that 'consideration to obtaining medical records should always be given before assessment, particularly where recent medical treatment or investigations has been undertaken.'

It is our intention to carefully consider your findings and ensure that any action that can be taken to prevent a further death or harm to patients in similar circumstances will be.

To support us in doing so. we have established an expert group, comprised of experts from within and outside of the profession to undertake a review. The membership of the group together with its draft terms of reference and expected timeline is enclosed.

We expect the work to take place between now and the summer of 2025, with the final report and recommendations being considered by the General Chiropractic Council at its meeting on 1 October 2025. Progress will also be reported to Council in public at its meetings on 19 March and 18 June 2025.

I am happy to provide further information to you, colleagues or other parties.

Yours sincerely

A handwritten signature in black ink, appearing to read "Nick Jones". The signature is written in a cursive style with a small flourish at the end.

Nick Jones

Chief Executive and Registrar



Regulation 28 report following the death of Joanna Kowalczyk

Expert reference group: Terms of reference of the review (Draft)

Review summary

The review will explore the technical and clinical nature of sensitive issues identified by the coroner, and in particular her request that we address 'whether consideration to obtaining medical records should always be given before assessment, particularly where recent medical treatment or investigations have been undertaken'.

The review will need to consider the relationship between chiropractic treatment and arterial dissection.

It will consider the case for developing best practice guidance to be adopted by the profession, supporting the new Code of Professional Practice and its emphasis on a safety culture – potentially addressing areas such as high-risk patients, history taking and appropriate risk management.

The Council of the GCC will consider the recommendations of the group and determine next steps.

Functions of the Group

1. Respond to the issues raised by the coroner and determine whether any aspect of chiropractic care including diversified neck adjustments could potentially have caused or contributed to the patient's death. Consider whether access to medical records would have changed the chiropractor's approach to treatment (including not undertaking treatment) and/or referral decisions.

2. Consider whether to commission an expert to undertake an up-to-date review of the published research and evidence.

3. Make recommendations on the steps to be taken by the various stakeholders within the system of chiropractic, which is the GCC, professional associations, the RCC and registrants.

4. Members of the reference group will contribute to the success of the review by:

- informing the approach and providing support for the review as a whole
- ensuring advice is available on the key issues
- advising on the quality, limitations and appropriate use of evidence and the quality of that evidence
- highlighting relevant practice and implementation issues relevant to the review signposting to relevant information
- ensuring a focus throughout on how the findings will be used and presented

- assisting in the development of GCC's recommendations, ensuring they are realistic and based on a consensus

5. Members can expect the GCC to provide secretariat to the expert review group.

Meetings

The work of the group will largely be undertaken in (virtual) meetings. It is not expected that members will be called upon in-between meetings. Two/three meetings will be held on *MS Teams*.

The secretariat will be provided by GCC. The agenda and brief meeting papers will be circulated at least a week before the meeting. This will be developed in conjunction with Members. The first meeting will be focused on the Terms of Reference and agree the extent of revisions or amendment.

A brief note of the meeting will be produced with a focus on action points agreed. This will not be published.

Confidentiality

While the meetings are not confidential, frank discussion and the sharing of views will enhance the work. This may be inhibited if members feel comments will be publicly attributed to them and done so out of context.

There may be specific information shared that is confidential and not to be shared outside of the group and this will be made explicit.

Membership

Mark Gurden: President of the Royal College of Chiropractors (RCC). Mark registered as a chiropractor in 2001 establishing the Chiropractic Health Clinics in Essex. He is a Fellow and the current President of the RCC to end 2025. He was a member of NHS England's National Low Back Pain and Sciatica pathway.

Gabrielle Swait: Director of Research Royal College of Chiropractors. Gay registered as a chiropractor in 2000 running a busy clinic in Gloucestershire since 1992. She has been Director of Research at the RCC since 2010. Additionally on a freelance basis Gay worked with the GCC in support of the development of new Education Standards for approved programmes, and the Code of Professional Practice published in January 2025. Gay was also a co-opted member of the Guideline Development Group for the NI(H)CE Guideline for Osteoarthritis 2020-2022. She has authored research on adverse events following spinal manipulative therapy and on safety incident reporting in the chiropractic profession.

Ulrik Sandstrom: Nominee and Vice-President of the British Chiropractic Association. Ulrik registered with the General Chiropractic Council in 1999, and is a Fellow of the British Chiropractic Association, The Royal College of Chiropractors and the European Academy of Chiropractic. He has special interest in sports chiropractic, is in his 5th season at Leicester City FC and delivered treatment at the 2012 and 2016 Olympic Games. Having taken many new graduates through their

PRT training he keenly acknowledges the need for continuously keeping abreast of current research and through his multidisciplinary experience within sports teams, he has a firm focus on inter-professional collaboration and communication.

Marc Muncila: Nominee of the Chiropractic Alliance. Marc registered with the General Chiropractic Council in 2007, a graduate of the Anglo- European College of Chiropractic. He completed his PgCert in 2008. Marc has been an executive member of the United Chiropractic Association since 2011 in a range of roles and was appointed as President in 2021. He is a member of the Royal College of Chiropractors and was awarded UCA Chiropractor of the year in 2021. He has run his own clinic in Oxfordshire since 2012 focused on helping patients obtain optimal physical health through normal spinal postural alignment and lifestyle advice.

Dr Rosie Benneyworth: Chief Executive, Health Services Safety Investigations Body. Dr Benneyworth joined the Healthcare Safety Investigation Branch in August 2022 and is now the interim Chief Executive Officer of the Health Services Safety Investigations Body, having led the transition to the new arm's length body. Dr Benneyworth has held several senior leadership roles in health, including as Chief Inspector of Primary Medical Services and Integrated Care at the Care Quality Commission, Managing Director of the Southwest Academic Health Science Network, and as a clinical commissioner with Somerset Primary Care Trust and Clinical Commissioning Group. She is currently a non-executive director on the board of University Hospitals Bristol and Weston NHS Foundation Trust and has held roles as a non-executive director and Vice Chair of the National Institute for Health and Care Excellence and a Trustee of the Nuffield Trust. With a background in primary care, Dr Benneyworth worked as a GP in Somerset for 15 years.

Steven Bettles: Head of Policy and Education, General Osteopathic Council. Steven graduated as an osteopath in 1997 working in clinical practice and education for many years. Steven has worked at the GOsC since 2016, working in the Professional Standards team involved in the quality assurance of osteopathic education, and in the development of policy and guidance.

Fergus Devitt: Lay Member of the General Chiropractic Council. Fergus is the Council Member for Northern Ireland appointed in 2020 and is Chair of the Audit and Risk Committee of the GCC. Fergus is Managing Director of Rockpool Insights Ltd, his own business consultancy established in autumn 2018 to create stronger organisations and communities. Prior to that he had held Director level posts in the Northern Ireland Civil Service, including Director of Active Communities in the Department for Communities. He is an Associate Consultant with the Leadership Centre for Health and Social Care in Belfast and an Associate Consultant with Clarendon Executive.

Keith Walker: Registrant Member of the General Chiropractic Council and member of the GCC Education Committee. Keith graduated from the Anglo-European College of Chiropractic in 1991 registering with the GCC at its inception in 1999 and has been in private chiropractic practice for 30 years. He held teaching roles in the Peninsula Medical School for 15 years until 2019, and at the School of Health Professions, part of the Faculty of Health in the University of Plymouth. He is now a full-time lecturer in Health Sciences at the University of Plymouth where he is the

Assistant Head of School for Postgraduate Education. In the past, Keith has held council and executive roles in the British Chiropractic Association, and he currently serves on the research committee of the Royal College of Chiropractors where he is a Fellow.

Outline project plan

The expert group will regularly report progress to the GCC at its planned Council meetings in March and June with a final report and recommendations to Council in September 2025. It is anticipated that 2-3 meetings will be held.

Feb/March 2025	Set-up expert group and respond to Coroner with next steps.
March	Update to Council
April	First meeting: agree terms of reference and expected outputs; agree methodology; determine whether to commission further research or information gathering.
May – June	Commission further research, information gathering Research review as required
18 June	Progress report to Council
July	Panel meeting to consider research and agree recommendations to Council
September	Report to Council and next steps

Background information

[Regulation 28 report to prevent future deaths.](#)

12 March 2025

Fitness to Practise update

Meeting paper for Council on 19 March 2025

Agenda Item: 5A and 5B

Purpose

This Fitness to Practise report provides Council with an update on the following:

- Part A Regulatory Committee Appointments and Reappointments
- Part B Fitness to Practise Update
 - Operational update
 - Fitness to Practise performance report

Recommendations

Council is asked to:

- Part A Approve the appointment of the Chair of Investigating Committee and the re-appointment of members of Professional Conduct Committee
- Part B Council is asked to note this update

A. Regulatory Committee Appointments

1. Appointment of overall Chair of Investigating Committee

1. At its March 2024 meeting, Council approved Nilla Varsani as the overall Chair of the Investigation Committee (IC) for a term ending 31 May 2025.
2. Rule 6(2) of The General Chiropractic Council (Constitution of the Statutory Committees) Rules Order of Council 2009 makes provision for the appointment of one panel Chair from the IC to act as the overall Chair of that Committee.
3. The role of the overall Chair of the IC is an important one in providing an appropriate bridge between accountability to Council for the effective operation of panels while maintaining the independence of their decision-making. Important tasks to be undertaken include appraisal of Committee members, reappointment and recruitment of new members and training. We must fill the role at the end of Nilla Varsani's term.

4. Expressions of interest were invited from Chairs of the IC for the overall Chair role. The interview panel (consisting of Nilla Varsani, the current Chair of the IC, the Director of Development and an independent member with substantial relevant experience) saw two candidates for interview.
5. The following applicant is recommended for appointment and a biography can be viewed at Annex A:
 - Andrew Macnamara – Overall chair of the IC – (to the end of their current term as IC member: 31 August 2027)
6. Further to expression of interest, and interview, Andrew demonstrated he meets the requirements and expectations of the role and confirmed he is enthusiastic about the challenge.
7. Andrew is in his first term with the GCC and in accordance with Rule 6(4), as his IC term is due to conclude on 31 Aug 2027, his appointment to overall Chair of the IC can only run until that date (or as long as his substantive membership on the Committee continues).
8. Under *The General Chiropractic Council (Constitution of the Statutory Committees) Rules Order of Council 2009*, Rule 6(2), Council is asked to approve the appointment of Andrew as overall Chair of the IC until 31 August 2027. If approved, his appointment will commence from 1 June 2025.

2. Re-appointment of members of Professional Conduct Committee

9. There are several members of the Professional Conduct Committee (PCC) whose terms are due to expire on 31 May 2025.
10. Those whose terms are due to expire were approached for expressions of interest in being put forward for a second term. The following indicated they wish to renew their term, have completed satisfactory appraisals and are proposed to Council for reappointment. Their biographies can be found in Annex B.
 - Claire Bonnet – Lay and Chair member – 4-year term
 - Hannah Poulton – Lay and Chair member – 4-year term
 - Ann McKechin – Lay member – 4-year term
 - Suzanna Jacoby – Lay member – 4-year term
 - Yvonne Walsh – Lay member – 4-year term
 - Julie McKay – Chiropractic member – 4-year term
 - Ceri Edwards – Chiropractic member – 4-year term
11. Under *The General Chiropractic Council (Constitution of the Statutory Committees) Rules Order of Council 2009*, Rule 7(1) and 8(1), Council is asked to approve the reappointments of these members for the terms proposed. If approved, extended terms will commence from 1 June 2025 and run to 31 May

2029. Council is asked to note that appointments will be subject to acceptance of a supplier agreement between each member and the GCC, ensuring compliance with expectations around worker status.

Operational update

Staffing issues / internal resources

12. As the CER reports, Niru Uddin, the Director for Fitness to Practice, left the GCC in February with our best wishes.
13. I joined the GCC in mid-January as Interim Director of Change. My remit includes assisting the FtP team with onboarding the new Case Management System (CMS), looking at where we can optimise the reporting we can extract from the system and make efficiencies with increasing speed of throughput. I am also working with the registration team to look at the registration system we have in place and to consider if it is working optimally and whether other opportunities arise such as integrating with the CMS has advantages.
14. The ambition is that the team take all opportunities to accelerate our processes, with all decisions being taken at the lowest appropriate level and that all staff are challenged and take ownership of their remit with the aim of better staff retention and overall productivity.
15. We are recruiting to a vacant case worker role.
16. To address capacity issues within the team and to ensure the team has access to experienced support whilst all are embedding the CMS, a senior lawyer seconded to the FtP team last year from Capsticks will continue a secondment one day a week until end of March 2025 to support case progression on high-risk cases. The requirement for this additional support is being closely monitored.
17. The FtP team has adopted and adapted to the new Case Management System, completing the data migration in January. While further changes are to be implemented (such as the Section 32 work and full reporting) all S.20 activity is now carried out within the system. This is a significant milestone.
18. The deeper, more reflective review of the work of the FtP team is underway. I am working with the team to review roles and responsibilities to ensure that the full benefits of the CMS system are realised. We will use the improved reporting from the CMS system to better focus the oversight processes (through increased visibility of progress, removing the need for double checking) with the intention of enabling a faster throughput of work.
19. I am pleased to report that we will be commencing a support service for registrants subject to investigation in mid-April. The potential for harm to registrants has been raised by Council previously.

20. We are working with CiC Wellbeing to a service level that offers in-the-moment support, short-term counselling, signposting to resources, and legal advice. In recognition of the emotional toll placed on them, registrants can self-refer to a 24-hour Freephone Adviceline, ensuring they receive timely support from trained counsellors.
21. Our priority for the next few weeks is to ensure the availability of the service is communicated, primarily to defence organisations, representative bodies and our usual communication channels to raise awareness. Our hope is that it has the potential to improve the experience of registrants and support them through the process.

ii Fitness to Practise performance report

22. This section provides Council with an update on the operational performance of the FtP team in the latest completed quarter, the period September to end of December 2024 (Q4), that is covering 2024.

Performance report summary

Detail on the five key areas of performance summarised below is at Annex 1, with glossary of terms at Annex 2.

- i. *New enquiries:* There are 31 enquiries which are open, a slight increase from 30 in September. While the team have been trying to focus on opening and progressing cases, they have been focused on the Case Management System and also we held 3 substantive IC meetings during December. The new process of bi-weekly enquiry review meetings instigated in February will focus on progression.
- ii. *New complaints:* A higher-than-expected level of incoming complaints was received in Q4. In October, 11 complaints were received (against the usual circa. four per month) none in November and 16 in December. November was an anomaly due to the team prioritising ISH work and focusing on CMS and the work involved with additional IC meetings. There were 69 open complaints at the end of Q4, compared to 60 reported to Council in September for Q3 and 69 carried forward into 2024 from 2023. The IC determined 11 cases in December which reflects the substantial preparation delivered by the team.

PCC Referrals: There were four referrals to the PCC in Q4 which are scheduled to be heard in 2025. During the whole of 2024, nine cases were referred from the Investigating Committee to the Professional Conduct Committee; 2 of which were heard during the year with the other 7 planned for 2025. This was in line with the assumptions we make in the budget. There are likely to be further referrals in 2025 for hearings to be heard in 2025 – we assume the volume for budgeting purposes.

- iii. *Interim suspension hearing (ISH)*: There was 1 ISH hearing held in this period. This remains a key focus for the team and despite the staffing issues, we continue to deal with high-risk cases promptly, an important consideration in safeguarding and for the PSA in assessing how quickly we manage risk.
- iv. *PCC hearings*: Four substantive hearings were scheduled in Q4 with three concluded, but one adjournment which has been relisted to June 2025. The end-to-end median for Q4 was 123 weeks – an increase of 17 weeks from Q3. Our performance in listing cases is shown in table 8 and we see that cases referred in 2024 are being listed more quickly than previously.
- v. Our performance in managing s.32 (protection of title) complaints in this period improved significantly with 52 cases administered. There were 13 cases carried over compared to 53 cases from the previous quarter.

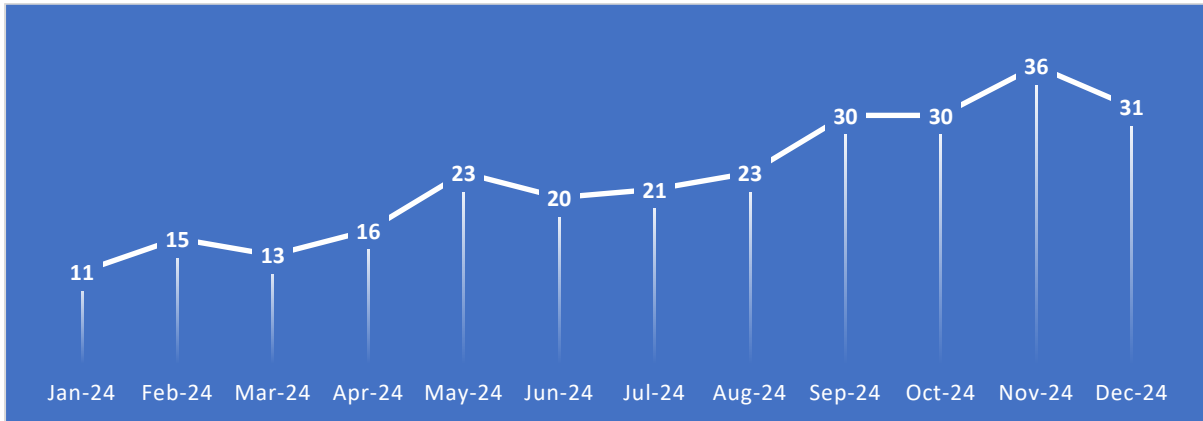
Despite the challenges in the year, we ended it with only marginally more complaints (69) than at the end of 2023 (65). The team is adapting to the CMS and following the full roll-out we expect to see changes and improvements in our processes. Additional training is needed but there is a focus on opening enquiries and moving cases through. We are in the process of designing our performance dashboard which will enable me to set out the benefits realised now, and expected over the next 12 months, to the Council meeting in June 2025.

05: Annex 1: Performance report

A. Enquiries

Open enquiries in last 12 months

Chart 1



There are 31 enquiries that are open, albeit two relating to advertising concerns. Typically, a small number of enquiries tend to be escalated to a formal complaint.

Total number of enquiries closed/promoted in 2024

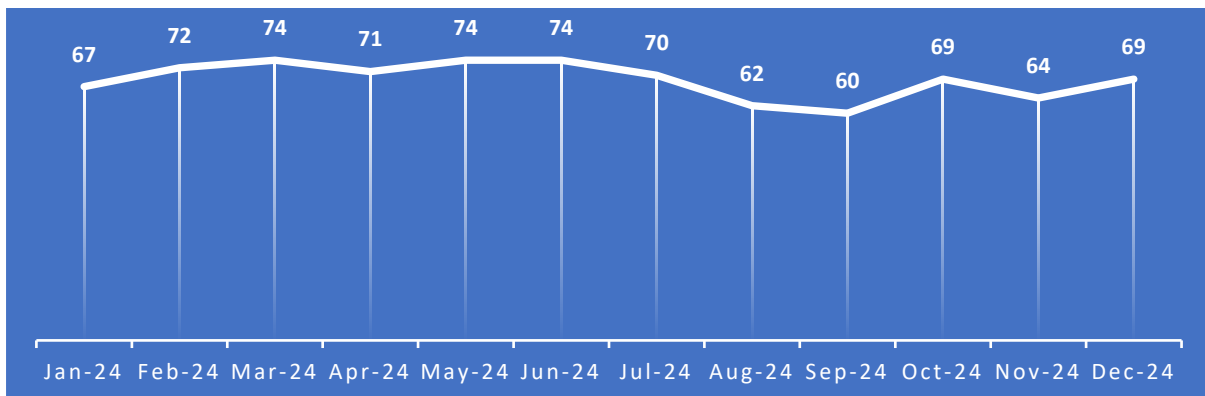
Table 1

	2024			
	Q1	Q2	Q3	Q4
Closed with no further action	6	5	5	8
Promoted to s.20	3	1	1	1
Total closed	9	6	6	9

B. S.20 (IC) Complaints in 2024

Total number of complaints carried forward and activity by month in 2024

Chart 2



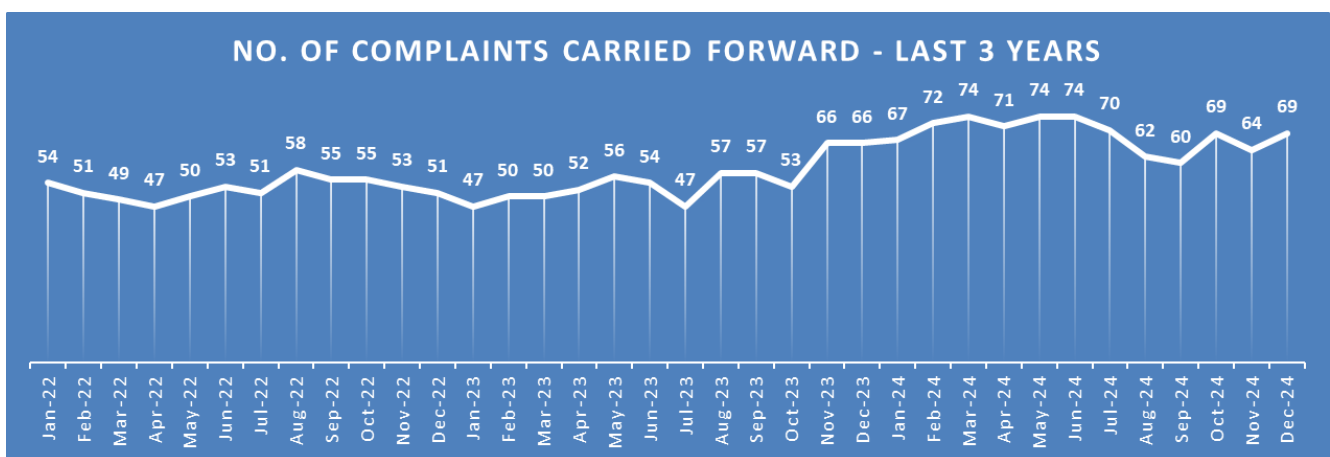
We continue to prioritise case management of higher risk complaints, which by their nature are usually long-standing complex complaints.

Table 2

	Jan -24	Feb -24	Mar -24	Apr -24	May -24	Jun -24	Jul -24	Aug -24	Sep -24	Oct -24	Nov- 24	Dec -24
New s.20 complaints in (no.)	4	7	4	2	7	2	4	0	6	11	0	16
Cases determined (no.)	3	2	2	5	4	2	8	8	8	3	4	11

Overall, we opened a higher-than-usual number of cases in Q4 (28 cases). November was an anomaly due to the team prioritising interim suspension hearing (ISH) work, focusing on CMS, the work involved with additional IC meetings and being under resourced.

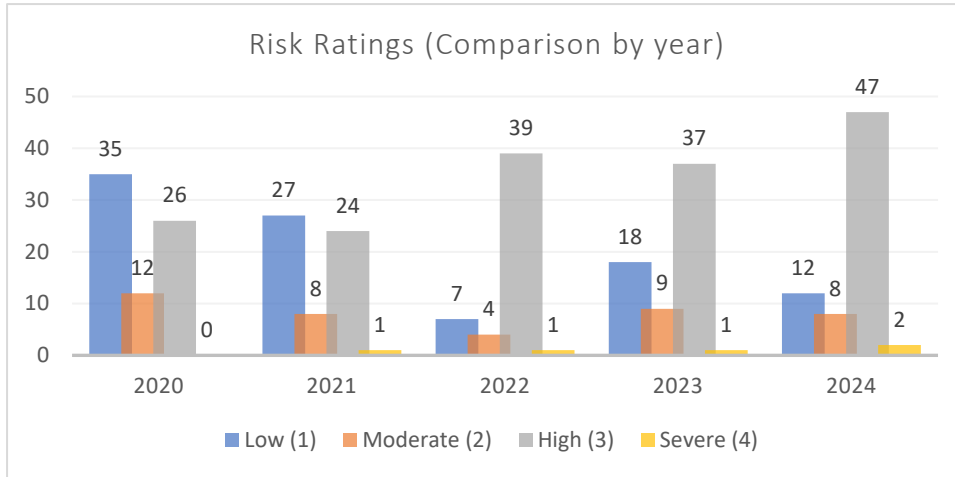
Chart 3



The number of open complaints (69) as at the end of 2024 is the highest in comparison to the previous two year. A higher than usual number of complaints were received in Q4 which will affect the next reporting period.

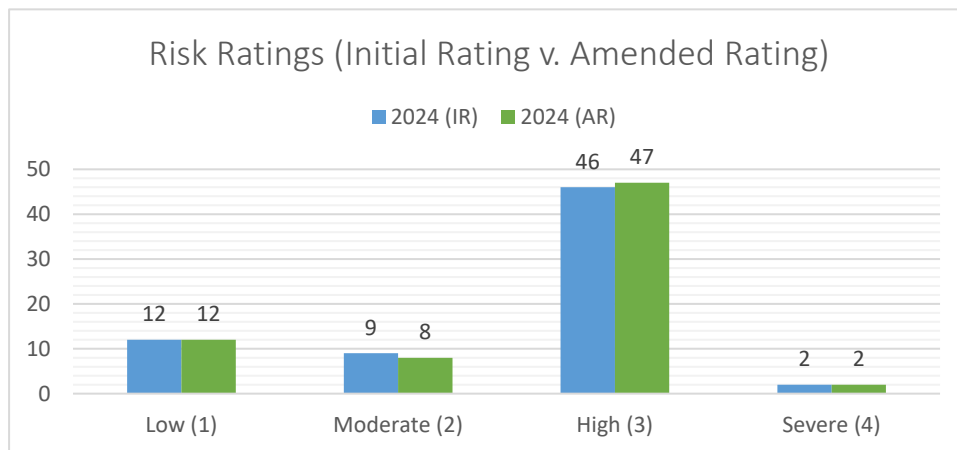
Risk rating of open IC complaints

Chart 4



When assessing and categorising risk we take the complaint at its highest (as advised by our internal auditors), resulting in more cases being categorised as *high risk* initially but allows for the rating to be amended or reduced as further evidence emerges.

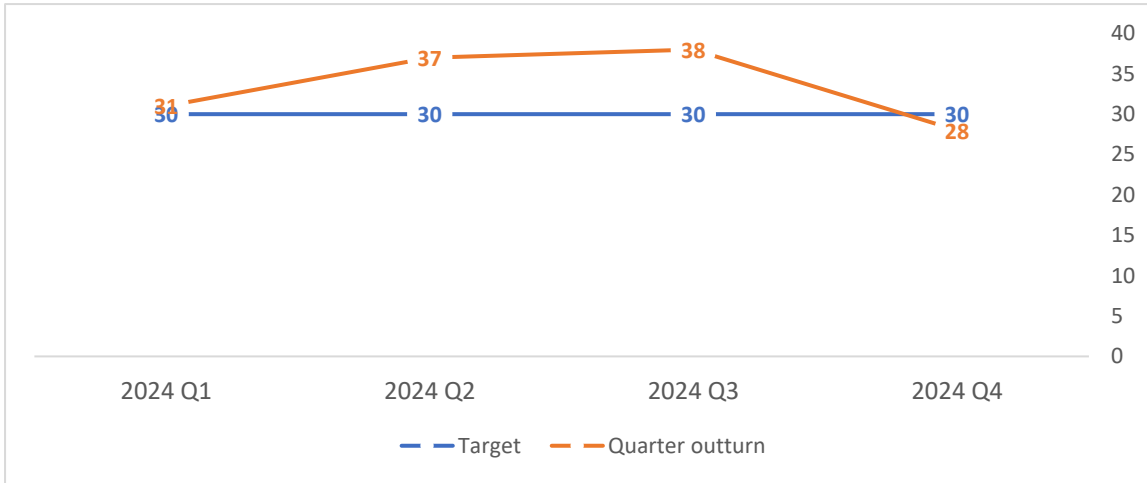
Chart 5



Even after adjustment, 71% of complaints are high or severe risk. Such complaints take longer to investigate.

Time complaints have been open: median weeks

Chart 6



The median time of open complaints decreased by 10 weeks compared to the previous quarter.

Breakdown of open current complaints

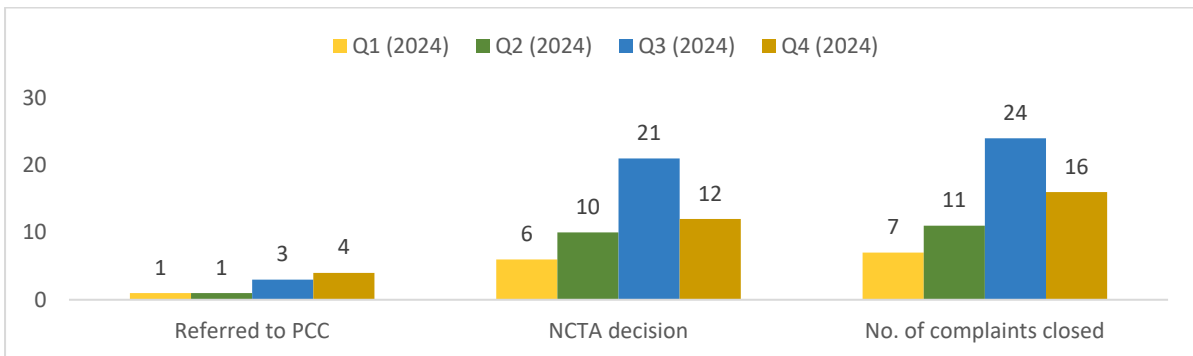
Table 3

	2024			
	Q1	Q2	Q3	Q4
Under 52 weeks	58	49	44	52
52 weeks +	15	23	13	15
104 weeks +	2	2	3	1
153 weeks +	0	0	0	1

Two cases were open of over 104 weeks, of which they are third party investigations (an Inquest and criminal matter).

Number of complaints closed by the Investigating Committee in 2024

Chart 7

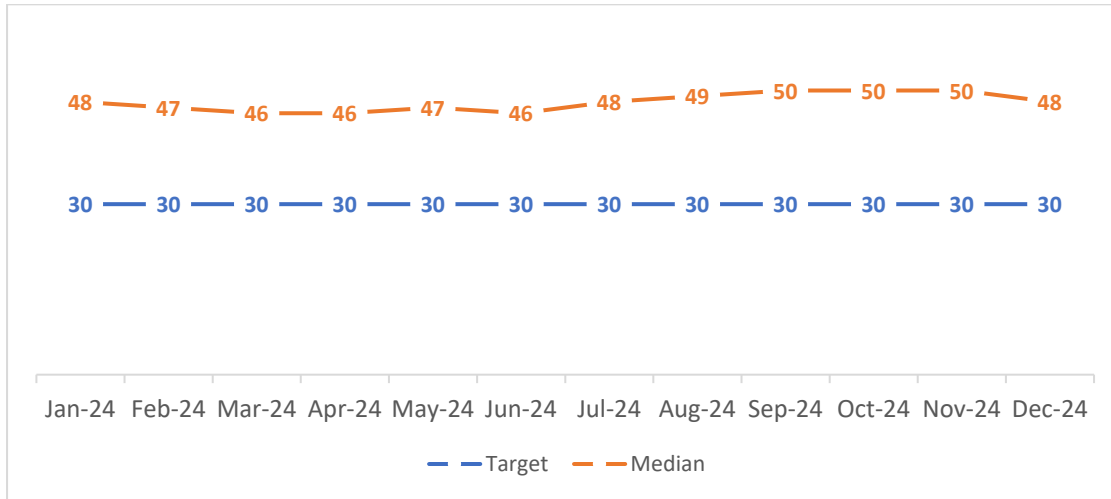


Of the 16 complaints closed in Q4, 12 were closed as 'no case to answer' and four were referred to the PCC. The volume of complaints closed is the second highest it has been since Q1 2022 where the IC closed 21 cases. In terms of referral to PCC, we estimate and budget on the basis of one referral a month from the IC.

Median time taken to close cases in last 12 months

(Time taken from the opening of a complaint to closure (either by a decision of no case to answer or referral to PCC) by the Investigating Committee)

Chart 8

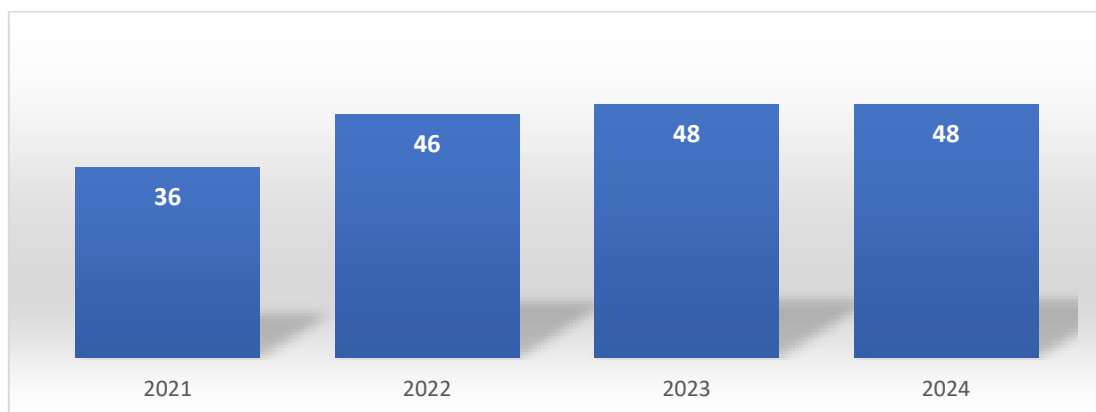


Median times have remained between 46 weeks to 50 weeks for the last 12 months. Our assessment is that the median will only start to shift if we close newer cases.

However, it is important to note we continue to prioritise the complex high-risk cases (which by the nature are likely to be older cases) and with a higher number of older cases being determined by the IC in Q4 the time to close reflects that.

Median time taken to close cases – by calendar year

Chart 9



The median at the close of 2024 ended at 48 weeks.

Complaints opening to closure by IC – Comparison with other regulators

Table 4

Median time (weeks) to close a complaint by IC	Q2 2023/24	Q3 2023/24	Q4 2023/24	Q1 2024/25
GCC	63	62	40	47
Comparative				
GOsC	40	32	30	N/A
GOC	40	45	34	51
GPhC	N/A	N/A	104	N/A
GDC	105	105	103	100
HCPC	60	59	65	N/A

Table 4 is a comparative table with other healthcare profession regulators, comparing them based on the performance and monitoring reviews published by the Professional Standards Authority.

C. Interim Suspension Hearings

Table 5

	2024											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
ISH hearings	2	2	0	0	1	0	0	0	0	0	1	0
Suspension imposed	0	0	0	0	0	0	0	0	0	0	1	0
Suspension not imposed	1	2	0	0	1	0	0	0	0	0	0	0

Consideration of matters where an interim suspension may be necessary are an unpredictable area, affecting outputs from both the FtP team and the IC. There was one IC interim suspension hearing (ISH) held in Q4, and a suspension was imposed.

In 2021, the median time (from the date there is enough information received indicating risk, to the date of the ISH) was 4 weeks. In 2022, this increased slightly to 5 weeks. In 2023, the median was 3 weeks, and this was the same up to Q4 for 2024. The median has remained the same and an important consideration in safeguarding and for the PSA in assessing how quickly we manage risk.

D. Professional Conduct Committee

Number of cases referred from the IC; and heard by PCC in 2024

Table 6

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	July-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24

No. of PCC cases b/f	10	10	8	8	8	8	7	7	7	7	6	8
No. of Referrals from the IC	1	0	0	0	0	1	1	1	1	0	2	2
PCC hearings held	2	2	1	1	0	2	1	1	2	1	0	2
Part heard	1	0	0	1	0	0	0	0	0	0	0	0
PCC Cases Closed	1	2	0	0	0	2	1	1	1	1	0	2

Decisions of PCC cases concluded in 2024

Table 7

Decision	Number
Removal from Register	1
Suspended	0
Conditions of Practice Order	1
Admonishment	3
No UPC	6

The decisions of the PCC in 2024 are in line with decisions made in previous years.

Open PCC cases: Listing progress

There were 8 open PCC cases open at the end of 2024. The target established is that on referral from the IC, the hearing should be listed before the PCC within 35 weeks. The median from IC outcome to PCC outcome is 43 weeks at the end of Q3 of 2024. That said, performance for cases referred in 2024 is encouraging and we remain optimistic that this will reduce the 'end-to-end' median.

Table 8

Case	Date referred from IC	Date listed for hearing	Weeks	Status
Case 1	21/03/2023	25/06/2025	118	Target was met when it was initially referred to PCC, hearing was held in late October 2023, this was later postponed to obtain further evidence. Hearing was then relisted from 13 – 17 Jan but did not conclude. Hearing has now been rescheduled for June 2025.
Case 2	18/09/2024	07/04/2025	28	Target for listing met.
Case 3	14/08/2024	27/05/2025	40	Target for listing not met.
Case 4	13/11/2024	10/06/2025	29	Target for listing met.
Case 5	13/11/2024	Not yet listed		
Case 6	17/07/2024	24/02/2025	31	Target for listing met.
Case 7	11/12/2024	Not yet listed		
Case 8	11/12/2024	Not yet listed		

Of the 7 cases awaiting PCC hearing none were referred prior to 2023. Three were referred in 2023 and four in 2024.

Our ability to meet targets of cases shown above is affected by:

- availability of the parties and or witnesses
- parties not ready / requiring further time to prepare case for hearing
- adjournments outside of the control of the GCC

Referral from IC to the final PCC decision - Comparison with other regulators

Table 9

Median time (weeks) from IC decision to final PCC decision	Q2 2023/24	Q3 2023/24	Q4 2023/24	Q1 2024/25
GCC	50	43	42	49.5
Comparative				
GOsC	40	N/A	N/A	N/A
GOC	41	50	66	50
GPhC	N/A	N/A	42.1	N/A
GDC	45	45	45	48
HCPC	90	90	90	N/A

Where the IC determine that there is a case to answer to be heard by the PCC our performance is comparable to others. The GCC's median appear to be somewhat similar to the other regulators, or better in some of the reported quarters.

Receipt of complaint to final PCC decision (end to end) – Comparison with other regulators

Table 10

Median time (weeks) from referral of complaint to final PCC Decision (end-to-end)	Q2 2023/24	Q3 2023/24	Q4 2023/24	Q1 2024/25
GCC	109	123	147	108.5
Comparative				
GOsC	95	N/A	N/A	N/A
GOC	42	90	100	69
GPhC	N/A	N/A	149	N/A
GDC	142	120	138	140
HCPC	155	165	158	N/A

Looking at the median time from end to end, the performance of the GCC steadily increased before significantly reducing based on Q1 2024/25. The GCC's median appear to be higher than the other regulators who are similar sized.

E. Section 32 cases

Our target this year is to continue to close a section 32 complaint within 16 Weeks of opening.

The median time taken to close section 32 cases in 2024 was 39 weeks.

As noted above in the summary, a dedicated additional resource was obtained for section 32 cases to investigate and close as many cases as possible before end of the year. The additional resource was successful in closing a total of 51 cases within two months.

Table 11

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Number of cases (at beginning of the month)	24	31	37	38	40	43	45	49	55	53	59	44
Number of new cases in a month	7	6	3	2	3	2	4	6	2	7	4	1
Number of cases closed in period	0	0	2	0	0	0	0	0	2	1	19	32

05: Annex 2

Glossary

CA 1994	The Chiropractors 1994
Complaint / S.20 (IC) Complaint	<p>An allegation (complaint) under Section 20 of the CA 1994, made against a chiropractor, to the effect that:</p> <ul style="list-style-type: none">a) he has been guilty of unacceptable professional conduct;b) he has been guilty of professional incompetence;c) he has been convicted of a criminal offence; ord) his ability to practise is seriously impaired due to a physical or mental condition. <p>S.20 complaints are formal complaints. The GCC's target to refer a matter to the IC is 30 weeks.</p>
CTA	Case to answer decision by the IC (which are referred for hearings before the PCC). The GCC's target to list the matter for a hearing once referred by the IC is 35 weeks.
Enquiries	<p>Under section 20 of the CA 1994, the GCC can only deal with an allegation (complaint) against a registered chiropractor where the complaint relates to fitness to practise matters.</p> <p>The GCC uses the term 'Enquiry' to describe any professional conduct communication containing information which <u>may</u> amount to an 'allegation' or 'complaint' under the Act however there is insufficient information to open as a s.20 complaint. As such, these are pre formal complaint communications.</p>
IC	Investigating Committee
ISH	Interim Suspension Hearing
ISO	Interim Suspension Order
NCTA	No case to answer decision by the IC
PCC	Professional Conduct Committee
Promoted enquiries	The GCC will assess the information received initially as an enquiry to determine whether sufficient information has now been received to open as a s.20 complaint. Where it is opened as a s.20 complaint, the date promoted relates to the date this changed from an enquiry to a s.20 complaint

Quarter 1	Jan – March
Quarter 2	April – June
Quarter 3	July – Sept
Quarter 4	October – December
Risk Rating	<p>A risk assessment is carried out on receipt of a complaint by the by the GCC and given a risk rating to capture the seriousness of the case.</p> <ul style="list-style-type: none"> ▫ Risk Rating 1: <u>Low risk:</u> (No unwarranted risk of harm and or issues have been addressed) ▫ Risk Rating 2: <u>Moderate risk:</u> (Treatment resulted in injury, conduct was not persistent and/or deliberate, issues have been addressed) ▫ Risk Rating 3: <u>High risk:</u> (Unwarranted risk of serious harm including inappropriate clinical care, inappropriate conduct, incompetence or abuse of trust including sexual misconduct or power imbalance concerning vulnerable patients (including those with mental health issues). Issues complained of remain in place, there is an ongoing risk to patients / public from the chiropractor's clinical practice / behaviour, conduct is persistent and / or deliberate) ▫ Risk Rating 4: <u>Severe risk:</u> (Sexual misconduct. Life may be in danger, risk of major injury or serious physical or mental ill health. The conduct is increasing in frequency and/or severity) <p>The risk rating above of complaints might lead to a referral for a hearing to consider interim suspension of a registrant's registration.</p>
S.32 Complaint	<p>Section 32 of the CA 1994 creates a criminal offence for a person who is not registered with the GCC describing themselves as a Chiropractor (also known in other regulatory bodies as protection of title or illegal practise cases). Our target for timeliness from receipt to closure or next steps decision point (16 weeks).</p>

Annex A

Andrew Macnamara - Biography

Andrew Macnamara is an accomplished senior operations manager, with more than 30 years' experience in the financial services industry and nearly 15 years in dispute resolution. He has significant experience leading, developing and mentoring large cross-functional management teams, successfully delivering high-profile change management and turnaround projects.

Andrew is an Ombudsman at the Financial Ombudsman Service managing, coaching and developing a large team of investigators, in addition to drafting and issuing final decisions for cases within his responsibility. His specialisms include Consumer Credit and Finance; Banking & Credit; and Jurisdiction.

In his current roles, Andrew sits as a lay panellist with two other regulatory bodies (including a professional health and care regulator since 2018) as well as the GCC Investigating Committee (since 2023). In these roles, he undertakes risk assessments, questions witnesses, and weighs conflicting evidence and testimony, before issuing evidence-based determinations that protect the public. As Chair, he oversees case management with responsibility for facilitating the panel discussions, effectively managing the hearing process, and issuing the panel's written determination and, where appropriate, handing it down orally.

Although Andrew works in London, he's lived in Yorkshire all his life. This set-up allows him to appreciate London's arts, theatres and restaurants, but at the same time enjoy the great, outdoors that Yorkshire has to offer, and which provides limitless opportunities for mountain biking, walking and gardening. Andrew loves travelling and meeting people and learning about different foods, cultures, and their heritage. He's currently planning the next big trip for 2026 – the honeymoon.

Annex B

Claire Bonnet – Biography

Claire Bonnet is a solicitor by profession having specialised in criminal defence legal aid work. She has now retired from this role.

She has undertaken regulatory roles at various health care regulators as an independent Lay Chair and Member on Fitness to Practise Committees (FTP) from 2008 and currently sits as an independent Lay Chair on FTP at the General Chiropractic Council (GCC), NISCC, BACP and CIMA.

She was appointed by the GCC in 2021 as a Lay Chair on FTP and served as Overall Chair on FTP 2022 - 2024.

She has recently been appointed as an independent Reserve Deputy Chair at the GPhC on their Investigating Committee.

She completed her eight-year term in 2024 as an independent Lay Committee member on FTP at the GPhC and has formerly chaired at the HCPC and the GSCC and sat as a lay panellist and interim chair at the NMC.

Hannah Poulton – Biography

Hannah spent more than 20 years working in the highly regulated financial services industry and held a number of senior marketing roles, also developing an interest in corporate governance and human resources investigation work. She now works with a range of businesses in different sectors as a Portfolio Marketing Director. She is an experienced people manager and enjoys coaching and mentoring.

In addition to her role with the GCC, Hannah sits as a Lay Member for the General Pharmaceutical Council on the Accreditation and Recognition Panel, and as a Lay Chair on the Fitness to Practice Committee. She is a Lay Member for the Intellectual Property Regulation Board on the Joint Disciplinary Panel and Independent Panel Member for Hampshire and Isle of Wight Police and Crime Commissioner on the Police Misconduct Panel. She is also a Justice of the Peace.

In her spare time Hannah enjoys dog walking, running, cold water swimming, cooking and anything creative. She lived in South Wales for the ten years but has recently returned to the South Coast of England where she grew up.

Ann McKechin – Biography

Ann graduated in law from the University of Strathclyde and is a qualified solicitor. After a substantial career in private legal practice including ten years as a partner in Pacitti Jones, Solicitors, Glasgow she was elected in 2001 as Member of Parliament for Glasgow Maryhill and from 2005 to 2015 represented the Glasgow North seat. Between 2008 and 2010 she was appointed as a Parliamentary Under Secretary of State in the Scotland Office and from 2010 to 2011 was Shadow Secretary of State for Scotland in the Labour Shadow Cabinet. From 2012 to 2015 she was the Vice Chair of the Westminster Foundation for Democracy, a non-departmental public body.

Her recent experience includes being Executive Director of the ScottishPower Foundation as well as Head of Corporate Social Responsibility at Scottish Power which she left in 2019 and the former chair of the Scottish Grantmakers Association. She is currently a member of the General Optical Council Hearings Panel, Vice Chair of Public Health Scotland, Chair of the Scottish Prison Advisory Board and a non-executive Director of Smart Energy UK which operates the national smart meter campaign as well as acting as trustee and vice chair of EMMS International which is a medical development charity.

Suzanna Jacoby – Biography

Suzanna Jacoby has over 15 years' worth of experience in social work and expert witness work and over 14 years' experience in the field of regulation and adjudication, as well as being a former founding CEO of an award-winning charity and social enterprise, Community Foster Care.

Suzanna is a Judicial Office Holder and Specialist Member and adjudicates on Judiciary hearings for the Upper Tribunal, First Tier Care Standards Tribunal and the Special Educational Needs & Disabilities Tribunal.

Suzanna holds a BSc (Hons) Psychology degree and is a qualified social worker and has adjudicated on fitness to practise and other hearings as the Registrant Panel Member, formally for the General Social Care Council and Health & Care Professions Tribunal Service, as well as currently for Social Work England, as a Registrant Adjudicator.

Suzanna holds a number of Fitness to Practise Lay Member roles for regulators, for which she adjudicates, including the Nursing & Midwifery Council, Farriers Registration Council (just appointed as overall Deputy Chair), Social Care Wales and the British Acupuncture Council.

Yvonne Walsh – Biography

Yvonne is a Fellow of the Chartered Institute of Personnel and Development (CIPD) and has over 35 years' experience in the field of HR. During that time, she has held a number of management roles up to Director level within a range of organisations including the charity sector, education, local government and the Health Service. Her experience has encompassed managing a wide spectrum of strategic and operational HR activities including change management, employee relations, leadership development, coaching, and mentoring. She also has Board level experience. Yvonne has a strong commitment to equality and inclusion and has played a pivotal role in assisting several of her former employers gain organisation wide equality accreditations.

As an Independent Consultant, Yvonne's current portfolio includes assignments in both the public and commercial sectors. She has valuable experience in fitness to practice regulation sitting as a Lay Panellist with ACCA Global, Social Work England and the Health and Care Professions Council, where she sits as both Chair and Lay Panellist. She also holds a Lay Panel roles within the Judiciary and Mayor's Office for Policing and Crime.

Her professional memberships include the CIPD, the Tribunal Members Association and the Civil Mediation Council.

Yvonne is a qualified workplace mediator and has successfully completed assignments concerning conflict resolution in the workplace. She has experience as a part time Visiting Lecturer teaching HR professional practice and is committed to raising the profile and standards in both the HR profession and professional regulation.

Julie McKay – Biography

Julie has been a practising chiropractor for over 20 years both in the private and public sectors, her experience includes establishing and directing a social enterprise providing funded chiropractic care on referrals, winning a NHS Acorn award for innovative and high standard health care provision and achieving research clinic status with the Royal College of Chiropractors.

She has served as Chair of the Health Policy Unit at the RCoC and was a member of the General Chiropractic Council for eight years, representing the G.C.C. and the profession at events such as the National Back Care Show at the N.E.C, receptions at the House of Lords and meetings with the Professional Standards Authority. During this time, she also chaired the G.C.C.'s Audit Committee.

Julie has always been a keen advocate of the chiropractic profession, lecturing on integrated working both within and outside of the profession at both national and international events including the European Chiropractic Union Convention, House of

Commons parliamentary debates, NHS Live events, BCA conferences and many more. She has also lectured at the University of Westminster on NHS integration, clinical governance, safety and self audit.

Julie resides in the East Midlands, is a keen rugby fan, still occasionally hacks out her old horse and rambles extensively around the countryside with her dog.

Ceri Edwards – Biography

Ceri Edwards graduated from the University of Surrey in 2000 and has been in private practice since. She currently lives in South Wales, where she runs a multidisciplinary clinic with her husband.

Alongside private practice, Ceri also works within the Welsh Institute of Chiropractic, University of South Wales, as a clinical tutor, drawing on her experiences in practice to promote a patient centred, evidence informed approach to support students in their final year within the University Clinic. She also supports other modules within the course, including Neuroanatomy and Clinical Management. She is a member of the Royal College of Chiropractors and a Post Registration Training tutor for the graduate programme. Recently Ceri has been appointed to the Royal College of Chiropractors Council.

Ceri is an accreditation assessor for the NHS Personalised Care Institute, an organisation convened by the Royal College of GPs and NHS England, accountable for setting the standards for evidence based training in Personalised Care within NHS England, in conjunction with the 'NHS Long Term Plan'.

For the last 5 years, Ceri has enjoyed working with the General Chiropractic Council as a Test of Competence panel Chair/Assessor and as a Registrant member of the Professional Conduct and Health Committee.

Finance Update - Management Accounts to February 2025

Meeting Paper for the Council Meeting on 19 March 2025

Agenda Item: 06

Purpose

This report provides an update on financial performance for the period to date, comparing actual figures to the budget set by the Council. The aim is to support the Council and Executive to maintain effective oversight of the GCC's finances, scrutinise its income and costs, and ensure strong financial controls are maintained.

The Executive reviews the management accounts monthly and takes corrective actions to address significant deviations from financial targets. The Council reviews the report during its quarterly meetings.

Recommendations

The Council is asked to review and note this report.

Overview

1. This report consists of the income and expenditure account and balance sheet for the period ending February 2025.

Income and expenditure account

2. The income and expenditure account includes a breakdown of the income and costs for the period to date, along with commentary on material variances (**Annexes 1a & 1b**).
3. The table on the next page presents year-to-date (YTD) actual and budgeted figures:
 - Column A: Actual YTD figures
 - Column B: Budgeted YTD figures
 - Column C: Variance (Actual compared to Budget)
 - Column D: Full-year Budget (approved by Council in December 2024)

4. For the period, the actual headline surplus is **£112k**, which exceeds the budgeted YTD headline surplus of £99k by **£13k**.
5. The total net income variance (favourable) is £1k, while total expenditure also shows a favourable variance of £12k.

	A	B	C	D
	YTD Actual	YTD Budget	YTD Variance	Full Year Budget 2025
£'000s				
	£	£	£	£
Income	594	593	✓ 1	3,287
Expenditure	482	494	✓ 12	3,259
Headline Surplus /-Deficit	112	99	✓ 13	28
Underlying Surplus /-Deficit	117	105		33

Balance sheet

6. The balance sheet (**Annex 2**) reflects total net assets of £3.808m (December 2024: £3.621m). These assets comprise general, designated, restricted, and revaluation reserves.
7. The cash at bank as of 28 February 2025 stands at £2.042m (December 2024: £2.378m). This equates to a headline cash ratio of £0.68, meaning there is 68 pence in cash for every £1 of short-term liabilities. However, this does not indicate a solvency issue, as the adjusted cash ratio – after accounting for fees paid in advance – is £3.03 per £1 of liabilities.
8. The value of investments has increased by £69k (1.4%), rising from £4.802m on 31 December 2024 to £4.871m on 28 February 2025. The unrealised investment gain for the period is £75k (compared to £289k in December 2024).

Recommendations





The Council is asked to review and note this report.

Joe Omorodion

Director of Corporate Services

Annex 1a – Income and expenditure variance commentary

Variance analysis policy

1. The Audit and Risk Committee (ARC) established a **£10k variance analysis threshold** in January 2021. In November 2024, the Committee reaffirmed this threshold, and the format of the management accounts report as it remains effective for financial oversight without excessive detail.
2. We provide commentary on income or expenditure variances of £10k or more. Items below this threshold are reviewed based on risk and materiality and are considered immaterial for control and monitoring purposes.
3. In the Variance column of the report, this icon  shows that the variance amount is positive. That is, the actual income variance is more than the target level of income in the period and expenditure is under the expected level. This icon  is the reverse.
4. This directional symbol  shows a downward movement on key items on the balance sheet page of the report; the upward icon  indicates an improved position.
5. Applying the £10k variance analysis threshold, we provide the following comments on the income and expenditure variances in the period.

Commentary on YTD income variance of £10k or more

6. The detailed breakdown of the income variances is available in the “Report by Income & Cost Centre” section (**Annex 1b**).
7. For the period, actual income exceeded expectations by £1k, this falls below the variance threshold. Therefore, no additional commentary is required.

Commentary on YTD expenditure variance of £10k or more

8. The expenditure variance breakdown is detailed in **Annex 1b**.
9. Total expenditure reflects an underspend of £12k, and this is due mainly due to timing differences rather than substantial deviations from the target costs limit for the period.
10. However, as no individual cost centre has a variance of £10k or more, we have not provided any further commentary on the individual variances.

Overview - Statement of Income and Expenditure Account



	MONTH				YEAR-TO-DATE (YTD)				Full Year BUDGET 2025
	February				February 2025				
INCOME	Actual	Budget	Variance	Var %	Actual	Budget	Variance	Var %	£
	£	£	£		£	£	£		£
Registrant fees	269,654	269,129	525	0	546,208	544,358	✓ 1,850	0%	3,060,665
Investments	10,000	10,000	0	0	20,000	20,000	✓ 0	0%	120,000
Test of Competence (ToC)	0	0	0	0	16,000	16,000	✓ 0	0%	70,000
Other Income	5,434	6,200	-766	-0	12,001	12,400	✗ -399	-3%	36,400
TOTAL INCOME	285,088	285,329	-241		594,209	592,758	✓ 1,451		3,287,065
EXPENDITURE									
Governance costs ¹	13,021	13,778	757	0	23,861	23,956	✓ 95	0%	158,182
Shared Central costs ²	87,913	87,929	16	0	177,858	178,809	✓ 951	1%	1,036,378
Fitness to Practise (FtP) ³	100,411	92,430	-7,981	-0	189,660	196,920	✓ 7,260	4%	1,261,558
Development costs ⁴	45,082	46,887	1,805	0	90,298	93,899	✓ 3,601	4%	802,614
TOTAL EXPENDITURE	246,427	241,024	-5,403		481,677	493,584	✓ 11,907		3,258,732
Underlying Operating Surplus / -Deficit					117,531	104,174	-		33,333
HEADLINE OPERATING SURPLUS / -DEFICIT	38,661	44,305	-5,644		✓ 112,532	✓ 99,174	✓ 13,358		28,333
<i>Percentage</i>	<i>14%</i>	<i>16%</i>	<i>-2%</i>		<i>19%</i>	<i>17%</i>	<i>2%</i>		
GAINS/-LOSSES ON INVESTMENTS					74,841				
SURPLUS / -DEFICIT BEFORE TAXATION					187,372				

NOTES ON EXPENDITURE CATEGORIES

1. Council, ARC and RemCo
2. CER, Technology, HR, Finance and Property
3. Investigations, IC, PCC, ISH and Protection of Title
4. Policy, QA, Test of Competence (ToC), Communications and Education Committee
7. Budget 2024 – as agreed by Council in Dec-23
5. Fixed Forecast 2024 – will be received by Council in Jun-24
6. Dynamic Budget / Forecast 2024 – tracks performance against the Budget or Forecast

General Chiropractic Council
 February 2025 Management Accounts
 Report by Income & Cost Centre

Annex 1b

		MONTH				YEAR-TO-DATE (YTD)				Full Year	
		February				February 2025				BUDGET 2025	
Detailed Income Statement Dept		Actual	Budget	Variance	Var %	Actual	Budget	Variance	Variance	£	
		£	£	£	%	£	£	£	%	£	
Income	72	Initial Regn Fees - Practising	16,500	15,000	1,500	10%	41,250	39,000	2,250	6%	161,528
	72	Initial Regn Fees - Non-practising	0	100	-100	-100%	-	200	-200	-100%	800
	72	Retention Fee- Practising	242,104	242,904	-800	0%	485,808	485,808	0	0%	2,839,687
	72	Retention Fee- Non Practising	1,900	2,125	-225	-11%	3,900	4,250	-350	-8%	25,500
	72	Non- Practising to Practising	800	0	800	100%	800	1,600	-800	-50%	14,400
	72	Restorations	8,350	9,000	-650	-7%	14,450	13,500	950	7%	18,750
		Total Registrant Fees	269,654	269,129	525		546,208	544,358	1,850		3,060,665
	74	ToC Income	0	0	0	0%	16,000	16,000	0	0%	70,000
	33	Investments	10,000	10,000	0	0%	20,000	20,000	0	0%	120,000
	33	Other	5,434	6,200	-766	-12%	12,001	12,400	-399	-3%	36,400
		Total Investments & Other	15,434	16,200	-766	-5%	48,001	48,400	-399		226,400
		TOTAL INCOME	285,088	285,329	-241	-0%	594,209	592,758	1,451	0%	3,287,065
Governance Costs	10	Council	12,845	13,678	833	6%	23,605	23,856	251	1%	152,032
	11	Audit & Risk Committee	176	100	-76	-76%	256	100	-156	-156%	4,420
	12	Remuneration Committee	0	0	0	0%	-	-	0	0%	1,730
		Total Governance	13,021	13,778	757		23,861	23,956	95		158,182
CER Office Costs	30	CER's Office	25,475	23,776	-1,699	-7%	48,968	49,752	-784	2%	209,815
Shared Central Costs	31	Technology	20,032	18,213	-1,819	-10%	40,158	36,426	3,732	-10%	240,892
	32	Human Resources	5,913	5,947	34	1%	8,125	10,044	1,919	19%	77,770
	33	Corporate Services	25,521	28,994	3,473	12%	57,834	60,589	2,755	5%	375,905
	34	Property	10,972	10,999	27	0%	22,773	21,998	-775	-4%	131,996
		Total Shared Central Costs	87,913	87,929	16		177,858	178,809	951		1,036,378
Fitness to Practise Costs (FTP)	50	FTP Team	39,005	35,381	-3,624	-10%	81,153	81,173	20	0%	435,481
	51	Investigating Committee	13,678	10,784	-2,894	-27%	24,148	25,068	920	4%	198,017
	52	Professional Conduct Committee	45,978	41,983	-3,995	-10%	78,997	81,185	2,188	3%	571,096
	53	Interim Suspension Hearing	1,750	2,982	1,232	41%	1,750	5,964	4,214	71%	35,784
	54	Protection of Title	0	1,300	1,300	-100%	3,613	3,530	-83	-2%	21,180
		Total FTP	100,411	92,430	-7,981		189,660	196,920	7,260		1,261,558
Development Costs	70	Development Team	25,648	27,737	2,089	8%	56,282	58,176	1,894	3%	477,647
	73	Quality Assurance	15,150	15,430	280	2%	15,170	15,430	260	2%	94,247
	74	Test of Competence	539	1,497	959	64%	9,389	10,347	959	9%	66,987
	75	Policy and Development	3,453	2,223	-1,230	-55%	8,865	9,946	1,082	11%	150,948
	13	Education Committee	293	0	-293	100%	593	-	-593	100%	12,784
		Total Development	45,082	46,887	1,805		90,298	93,899	3,601		802,614
		TOTAL OPERATING COSTS	246,427	241,024	-5,403	-2%	481,677	493,584	11,907	2%	3,258,732
		Underlying Operating Surplus / -Deficit					117,531	104,174			33,333
		HEADLINE OPERATING SURPLUS / -DEFICIT	38,661	44,305	-5,644		112,531	99,174	13,357		28,333
		Percentage	14%	16%	2%		19%	17%	2%		1%
		GAINS/-LOSSES ON INVESTMENTS	74,841				74,841				
		SURPLUS / -DEFICIT BEFORE TAXATION	113,502				187,372				

GCC Balance Sheet
As at 28 February 2025

Annex 2

	31 December 2024		28 February 2025		Movement	% Change
	£	£	£	£		
Fixed Assets						
Tangible Assets	111,881		107,396			
Investments	<u>4,802,226</u>		<u>4,871,228</u>			
		4,914,107		4,978,624	↑ 64,517	▲ 1%
Current Assets						
Debtors	57,913		83,575			
Bank	<u>2,378,490</u>		<u>2,042,218</u>			
Total Current Assets		2,436,403		2,125,793	↓ -310,611	▼ -13%
Current Liabilities						
HMRC and pensions	40,264		43,500			
Payments in advance	2,937,650		2,448,042			
Trade creditors	78,844		62,346			
Corporation tax payable	74,563		74,563			
Other creditors	<u>425,164</u>		<u>494,568</u>			
Total Current Liabilities		3,556,484		3,123,018	↓ -433,466	▼ -12%
Current Assets less Current Liabilities		<u>-1,120,081</u>		<u>-997,226</u>		
Total Assets less Current Liabilities:		<u>3,794,026</u>		<u>3,981,399</u>	↑ 187,372	▲ 5%
Long Term Liabilities		173,081		173,081	0	▲ 0%
Total Assets less Total Liabilities (Net Assets)		<u>3,620,946</u>		<u>3,808,318</u>		
Funds of The Council						
General Reserve	1,629,429		1,629,429			
Designated Reserve	1,347,322		1,347,322			
Restricted Reserve	22,573		22,573			
Revaluation Reserve	621,621		621,621			
Gains/(Losses) on Investments	0		74,841			
Surplus/(Deficit) on Operating Activities	0		112,531			
Total Funds/Reserves		<u>3,620,946</u>		<u>3,808,318</u>	↑ 187,372	▲ 5%
			112,531			
				0.71		



For noting

Business Plan 2025 Update

Meeting paper for Council on 19 March 2025

Agenda Item: 07

Purpose

The Council sets the GCC strategic priorities and ensures the necessary resources are available for their delivery.

This paper updates the Council on our performance against the 2025 Business Plan so that Council can scrutinise progress and that ensure strategic objectives are met while managing delivery risks and project budget constraints.

Recommendations

Council is asked to **note** the report.

Background

1. Last year, Council met in June 2024 for their development day and began the initial discussions to develop the next corporate strategy. Members concluded that, given the ongoing large-scale activities and their positive impact, it would be acceptable to have a strategy 'gap' until spring 2025.
2. As such, the development of the 2025 Business Plan was envisaged to act as a strategic bridge – linking the achievements made over the last three years, to the future direction that will be outlined in the new strategy.

Business Plan Performance Summary

3. Council agreed to the 2025 Business Plan at its December 2024 meeting, along with the three projects to be delivered this year. They are:
 - Developing the Corporate Strategy 2025 – 30
 - Implementing the Code of Professional Practice
 - Embedding the case management system (CMS) to Fitness to Practise (FtP) to provide resilience in the function

4. As reported in the CER update paper earlier, the coroner wrote to us in January 2025, under 'regulation 28' powers, asking us to consider [our role in ensuring] that 'consideration to obtaining medical records should always be given before assessment, particularly where recent medical treatment or investigations has been undertaken.' [Regulation 28 report to prevent future deaths.](#)
5. We wish to carefully consider these matters and, with a small expert group formed, have developed a plan. Progress will be reported to Council at its June 2025 and September 2025 meetings, with updates included in this performance update report. While not one of the original Business Plan projects (as it emerged as an issue this year), it has been included in Annex A and B to provide a platform for reporting back to Council.
6. This is the first performance report on the 2025 Business Plan to Council this year, covering the period to 10 March 2025.
7. There are five annexes to this report:
 - **Annex A** displays summary information on progress made in delivering the projects in the 2025 business plan.
 - Of the four projects in the 2025 business plan:
 - **Corporate Strategy 2025 – 30** has started and is progressing to plan. The draft strategy is for agreement later in this meeting.
 - **Implementing the Code of Professional Practice** has started and is progressing to plan.
 - **Embedding the CMS to FtP** is underway with much activity to ensure that the benefits of adopting a CMS is realised.
 - **Regulation 28: Responding to the coroner's requirement** has started and is progressing to plan.
 - **Annex B** provides a more detailed commentary on the status or progress of each of the projects. The status of each project is assessed against the agreed measures (e.g. Key Performance Indicators, KPIs, Project Schedule Variance, PSV, and Milestones) in the business plan.
8. A summary of communications activity is at **Annex C**.
9. An update on the activities relating to equality, diversity and inclusion is at **Annex D**.

Mary Nguyen

Business and Projects Officer

Annex A: Business Plan 2025 Dashboard

This dashboard presents BP 2025 projects' progress, priority level, external impact and risk of not delivering them in the current financial year. The order in which the projects are listed is according to their project number.

Annex A: Business Plan Dashboard				
No.	Project	Status and % Completion	RAG Rating GAW[1]	External Impact
1	Development of the GCC Corporate Strategy	Started	Green	High
	Key milestones: Q1, Q2, Q3 2025	10%		
2	Implement the new Code of Professional Practice	Started	Green	High
	Key milestones: Q1 and Q4 2025	15%		
3	Embedding the case management system for Fitness to Practise	In progress	Yellow	High
	Key milestones: Q1, Q2 and Q4 2025	25%		
4	Regulation 28: Responding to the coroner's requirement	Started	Green	High
	Key milestones: Q1, Q2 and Q3 2025	5%		

Annex B – Business Plan 2025 Projects

No.	Project	Measures (KPIs, PSVs, milestones)	Progress Update (March 2025)
1	Development of the GCC Corporate Strategy	<p>2025 Deliverables and Milestones</p> <ol style="list-style-type: none"> Outline and early Strategy, and consultation plan, presented to Council for approval Q4 2024 Public consultation on draft Strategy with key stakeholders including patients, public and registrants Q1 2025 Final version presented for approval. Q2 2025 Publish new Corporate Strategy Q3 2025 <p>Project Targets</p> <ol style="list-style-type: none"> Corporate Strategy is approved by Council Q2 2025 Corporate Strategy is published on the website Q3 2025 	<p>Status: Started</p> <p>Project Update:</p> <p>The initial planning to develop the GCC Corporate Strategy is underway, with key internal GCC staff members selected to support in progressing the project.</p>
2	Implement the new Code of Professional Practice	<p>2025 Deliverables and Milestones</p> <ol style="list-style-type: none"> Design and publish the document Q1 2025 Implement across GCC Q4 2025 <p>Project Targets</p> <ol style="list-style-type: none"> By the end of 2025, all GCC resources will be updated to reflect the new Code of Professional Practice including guidance, toolkits and Fitness to Practise processes 	<p>Status: Started</p> <p>Project Update:</p> <p>The new Code of Professional Practice was published on the GCC website and is available to all viewers.</p> <p>We have begun to identify and map out resources (guidance, policies, toolkits etc) across registration, education and Fitness to Practise that</p>

No.	Project	Measures (KPIs, PSVs, milestones)	Progress Update (March 2025)
			<p>will require updating and/or review by the end of the year.</p> <p>A high-level plan is being developed to manage the coordination of the implementation and allow us to prioritise.</p> <p>We have also begun conversations with the RCC and Professional Associations about how the GCC can support them to support their members with the implementation.</p> <p>Work has commenced on new guidance on Professional Boundaries, building on the current Maintaining Sexual Boundaries guidance. Draft guidance will come to Council in June for approval to move ahead with a consultation.</p>
3	<p>Embedding the case management system (CMS) for Fitness to Practise</p>	<p>2025 Deliverables and Milestones</p> <ol style="list-style-type: none"> 1. Complete data take-on January 2025 2. Go-live January 2025 3. Custom reporting with wider data intelligence Q2 2025 4. Update against the new Code of Professional Practice Q4 2025 <p>Project Targets</p> <p>In January 2025, a case management system is integrated into the Fitness to Practise process</p>	<p>Status: In progress</p> <p>Project Update:</p> <p>The CMS completed the data migration from 14 – 17 January 2025, uploading cases that were open as of 1 January 2025.</p> <p>A penetration testing exercise to ensure that the system was clear of any potential high/critical vulnerabilities was conducted the W/C 6 January 2025. The go-live date was set on confirmation that no high or critical vulnerabilities were found.</p>

No.	Project	Measures (KPIs, PSVs, milestones)	Progress Update (March 2025)
			<p>The CMS went live on 29 January 2025, with some identified work processes being completed in the live environment. We expect this phase to be completed in Q2 2025.</p> <p>Since going live, we have recognised opportunities for improvements which we are currently exploring. This covers technical as well as operational processes. An interim Director of Change joined mid-Jan to lead this, so that the benefits of the CMS are maximised and realised.</p> <p>The FtP team has benefited from several training sessions as they adjust to using the CMS. The first training session for the Investigating Committee is being planned for early April 2025.</p>
4	<p>Regulation 28: Responding to the coroner's requirement</p>	<p>2025 Deliverables and Milestones</p> <ol style="list-style-type: none"> 1. Form an expert group Q1 2025 2. First meeting to agree terms of reference and expected outputs; agree methodology; determine whether to commission further research or information gathering. April 2025 3. Commission further research if agreed Q2 2025 4. Progress report to Council June 2025 5. Second meeting to consider research and agree recommendations to Council July 2025 	<p>Status: Started</p> <p>Project Update:</p> <p>An expert group has been formed, comprising of a mix of leaders within the profession and outside to ensure that there is a broad perspective of the matter.</p> <p>Two lay members of Council are part of the expert group.</p> <p>The first meeting is planned to take place in April 2025.</p>

No.	Project	Measures (KPIs, PSVs, milestones)	Progress Update (March 2025)
		6. Report to Council and approve next steps September 2025	

07: Annex C – Communications Update

This is a summary of communications activity and performance between 1 December 2024 and 1 March 2025.

General Channel Overview

Following a seasonal dip in engagement in December, the email newsletter and website performed strongly in January and February.

Newsletter

February's newsletter included the GCC's response to [the concerns raised by the Gateshead and South Tyneside Coroner](#). This one story was clicked on 800 times (by 600 registrants - 15% of recipients), making it the most read news story since 1 January 2023 (only the March 2024 [blog](#) entry was more read, though this was driven by an external campaign not the newsletter).

Website

The register continues to be the most used page of the website:

Month	Register Searches
December	9144
January	11380
February	11925

Around 10% of searches were followed by a click to the website, email address or phone number of the registrant. As a result of concerns around the accuracy of some of the clinic and contact data, the March newsletter included a video on how registrants can update their details.

Pulse Survey

The Pulse Survey is an ongoing measure of issues and challenges within the profession, to understand the trust the profession has in the GCC's role, and to be able to rapidly spot and respond to emerging trends. It consists of a short questionnaire sent to approximately 10% of the registrant base each month at the top of the monthly newsletter. [Preview the survey questions.](#)

The scores below are for the December, January and February cohorts (101 responses in total).

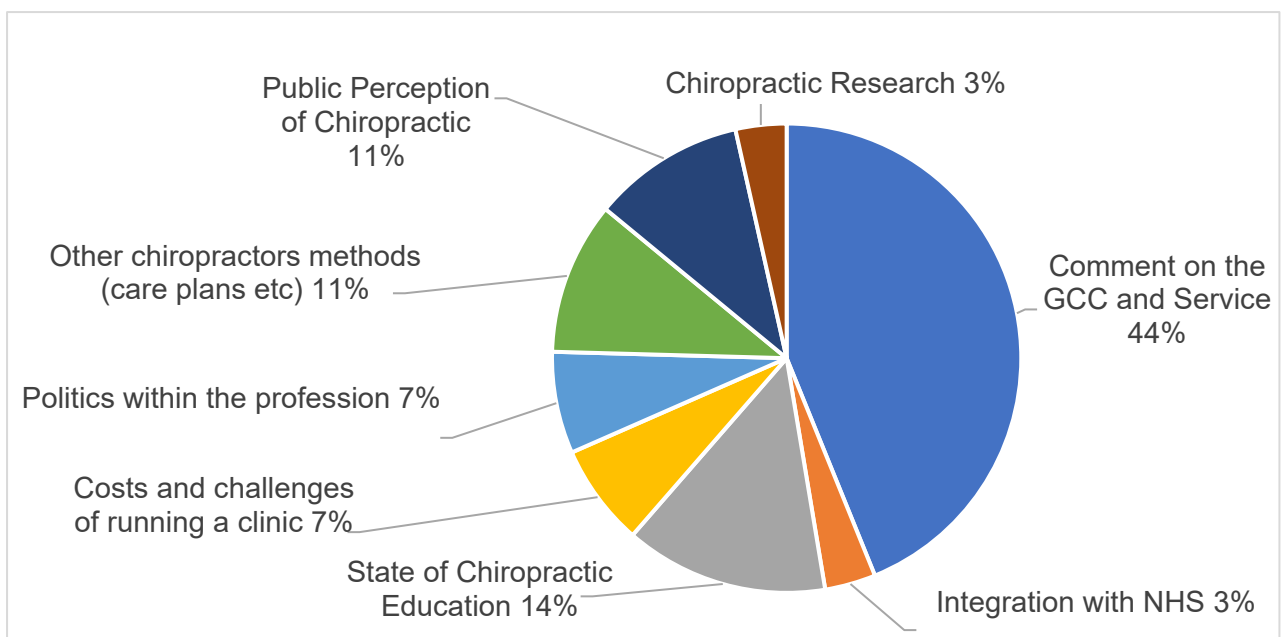
Question 1 uses a 1 to 5 Likert scale to measure the respondent’s confidence that the GCC:

	Overall average score (out of 5)	Percentage responding “4” or “5”
protects the health and safety of the public.	3.9	68%
ensures high standards of practice in the chiropractic profession.	3.7	58%
ensures all chiropractors are properly qualified and are fit to practise.	4.2	77%
will take action if a chiropractor fails to meet the standards expected.	4.2	75%
does a good job of approving and monitoring the education providers that train chiropractors in the UK.	3.7	61%
is approachable.	3	40%
is easy to contact when you need to.	3.2	49%

This second round of the Pulse survey has separated “approachable” from “easy to contact” and it is reassuring to see that the measure is more precise (in that the two figures are independent of each other). Nevertheless, we will continue to focus on improving both of these perceptions of the GCC.

The GCC performance management board considers the comments made in response to the Pulse survey each month, looking at both short term improvements to service and longer-term trends that can inform policy and development work.

Across the December, January and February the 48 comments received have been categorised as:



Campaign Impact in January/February 2025

The priority campaign for the first two months of the year has been to raise awareness that the new Code of Professional Practice will come into effect on 1 January 2026.

Output	<ul style="list-style-type: none"> • The Code of Professional Practice was launched in an email to all registrants on 31 December 2024 • This was followed by an article in the January Email Newsletter (Wednesday 8 January) and a follow up to non-openers on Sunday 12 January. • The open rate for the Code of Practice launch email was notably high (80% compared with around 70% for the newsletter). • There has also been some social media activity and a stand at the RCC winter conference.
Engagement	<ul style="list-style-type: none"> • Across all three mailings: 424 registrants clicked to the Code landing page, 166 clicked directly to the Code PDF, and 197 clicked directly to the document showing the changes we'd made in response to the consultation. • In total 658 individuals opened at least one of the three links. • From website analytics data we can see the Code of Professional Practice has been downloaded a further 287 times.
Target Action	<ul style="list-style-type: none"> • The above figures are encouraging with regards to awareness that there is change coming, but do not measure registrant awareness of the impact of the changes.
Outcome	Not yet measured

We recognise that there is more work to be done to illustrate to registrants

- what the changes are, and
- how they will need to apply the new Code to their practice.

This will be a focus for the rest of the year but will follow from the work reviewing and updating GCC policies, guidance and toolkits.

Annex D – Equality, Diversity and Inclusion (EDI)

The GCC developed and delivered on a three-year 15-point EDI action plan (2022-2024). Annual EDI reports have been produced and published, and plans are underway to produce an overall final report.

A new Corporate Strategy is being developed, and consideration is being given to how to build on all the work from the Action plan and support the delivery of a new Strategy. For this new strategy we intend to embed consideration of EDI deeply into each objective and action, rather than potentially creating a new EDI Action Plan or separate EDI strategy.

The GCC EDI Working Group has continued to provide support and input into our plans, notably consulting on the internal and external surveys, the results of the Professional Conduct Committee thematic review, and the recruitment for EDI Champions. The group comprises volunteer registrants who can bring their own experiences, personal and professional, relating to different protected characteristics.

Creation of EDI Champions These were initially going to be recruited from within the chiropractic profession, however the Working Group has determined that these should instead be from lay individuals with an interest in EDI, in order to share their lived experiences and provide critical feedback on EDI initiatives. Student members are also going to be added to the working group.

Mandatory EDI training has been put in place for all, which incorporates specific training for staff, managers, Council, committee, decision makers and partners, with a mix of face to face and online learning:

- PCC and IC members received a full day in person training and the IC and PCC chairs had an additional half day remote training.
- Partners were mandated to complete 3 EDI related online courses Promoting Diversity and Respect through Language; Bridging the Generational Gap: Navigating Diversity in the Modern Workplace; Unconscious Bias.
- All GCC Staff were mandated 2 EDI related online courses: Promoting Diversity and Respect through Language; Unconscious Bias.
- GCC Managers were mandated an additional online course: Cultivating Inclusive Leadership within the Workplace.

CPD: For the 2023/24 CPD year, all registrants were asked to complete a focused reflection on equality, diversity and inclusion (EDI) relating to Standard A4 in [The Code](#) which requires chiropractors to “treat patients fairly and without discrimination and recognise diversity and individual choice’ and Standard D2 in the Code, which requires chiropractors to ‘...treat all patients with equal respect and dignity’.

To help registrants reflect on EDI and how it could affect their clinical practice, we prepared real-life scenarios for them to consider as well as sharing the findings from

the 2 surveys above. The scenarios have been shared in the monthly newsletter, [on our website](#) and on LinkedIn, and we asked Philippa Oakley - a chiropractor and consultant on Equality, Diversity and Inclusion and members of the EDI Working group for scenarios and suggestions of what to consider.

An EDI thematic report was commissioned for the Education Committee to consider in April. We plan to feed back the findings of the 2023/24 focused reflection in CPD (on EDI), to the profession. We will also compare the findings of this review to the findings of the 2023 registrant survey to understand where the profession has moved forward in attitudes and understanding, and where there are still concerns.

**For noting**

Annual Reports

Meeting paper for Council on 19 March 2025

Agenda Item: 08

Purpose

The purpose of the reports on Registration and Fitness to Practise is to update Council on activity during 2024 fulfilling our accountability objectives. They are summarised in the Council's annual report.

Recommendations

The Committee is invited to **note** these reports.

Key points

The key points of note in the Registration report are:

- **Overall Growth:**
The register increased by 3.3% in 2024, reaching a total of 3,875 registrants - an overall growth of 123 registrants compared to 2023.
- **Increased Removals:**
Removals in 2024 rose by 31.6%, with 187 registrants leaving, including a 47% increase in lapsed registrations (119 cases). This is predominantly due to efforts to reduce the number of registrants paying the non-practising fee.
- **Overseas Qualifications:**
Forty new registrants with overseas qualifications joined in 2024 (an increase of 9 from the previous year), with the USA (12) and South Africa (9) being the most common country of nationality.
- **UK Graduate Registration Rates:**
Out of 359 UK chiropractic graduates, 247 have registered by 1 March 2025. Notably, the University of Teesside had the highest registration rate (10 out of 11 graduates), while the Health Sciences University and the University of South Wales contributed the largest numbers.

- **Gender Imbalance in Removals:**
Among those removed, females accounted for 56% compared to 44% for males, indicating a higher rate of removal among female registrants.
- **Demographic Trends:**
The largest age group on the register is 25–29 (580 registrants), demonstrating strong early-career participation. Overall, gender distribution is nearly balanced (49.5% female, 50.5% male), although older cohorts show a shift toward male dominance.

These points highlight key trends and challenges in registration and retention that the committee may want to consider.

Last year's Registration Report can be found [here](#) for reference.

The key points of note in the Fitness to Practise report are:

- **Number of complaints received down:**
In 2024, the number of complaints received about chiropractors' fitness to practise decreased by 4.55% compared to 2023.
- **Investigating Committee activity:**
A higher number of cases were concluded by the Investigating Committee in 2024 compared to 2023. Of the cases concluded by the Investigating Committee, nine of these were referred to a Professional Conduct Committee hearing.
- **Source of complaints:**
Of the 63 complaints made, they were made about 59 chiropractors. Most complaints were received from patients or relatives of patients.
- **Type of complaints:**
Most complaints related to clinical care and communication.
- **Professional Conduct Committee activity:**
Five chiropractors were found guilty of unacceptable professional conduct by the Professional Conduct Committee, mostly not concerning clinical care.

Last year's report can be found [here](#) for reference.

Penny Bance
Director of Development

Fitness to Practise Annual Report 2024



General Chiropractic Council **Fitness to Practise Annual Report 2024**

Contents

Introduction	3
About Fitness to Practise (FtP)	3
Fitness to Practise in 2024 - summary	6
Performance summary	7
Complaints received	8
Investigating Committee	15
Professional Conduct Committee	17
Health Committee	18
Interim Suspension hearings	20
Section 32 complaints	21

Introduction

This report published annually sets out information relating to the various stages in the fitness to practise process, the volume and type of complaints received and our performance in managing those complaints.

About Fitness to Practise (FtP)

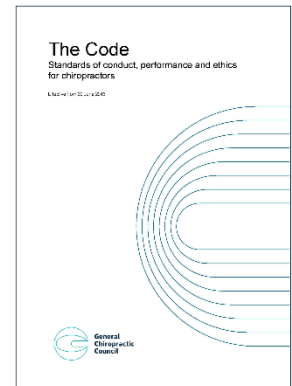
The Code

The Code represents the benchmark of conduct and practice against which chiropractors are measured.

The Code became effective from 30 June 2016 replacing the Code of Practice and Standard of Proficiency (2010).

The Code is arranged around eight principles that require chiropractors to:

- Put the health interests of patients first
- Act with honesty and integrity and maintain the highest standards of professional and personal conduct
- Provide a good standard of clinical care and practice
- Establish and maintain a clear professional relationship with patients
- Obtain informed consent for all aspects of patient care
- Communicate properly and effectively with patients, colleagues and other healthcare professionals
- Maintain, develop and work within professional knowledge and skills
- Maintain and protect patient information



Investigating complaints

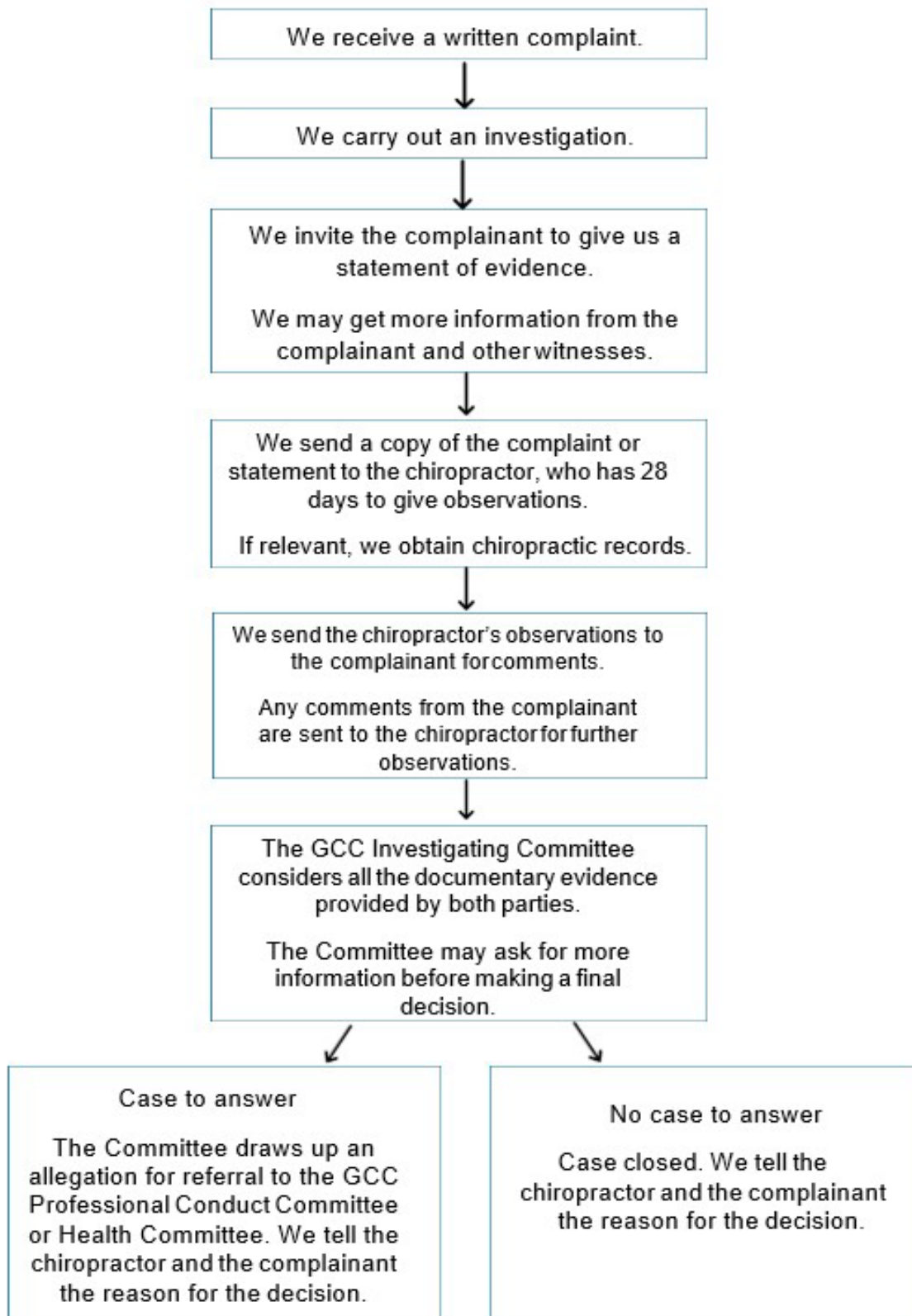
The GCC must investigate any complaint made about a registrant. The types of complaint it can investigate are:

- Treatment, care or advice given by a chiropractor
- The professional or personal behaviour of a chiropractor
- Serious impairment of fitness to practise due to the physical or mental health of a chiropractor

What complaints are the GCC unable to investigate?

- The GCC can only investigate registered chiropractors
- The GCC regulates individual chiropractors and does not accept complaints against clinics
- The GCC cannot resolve matters that relate solely to payment
- The GCC has no power in relation to compensation whatsoever

The investigating process followed by the GCC fitness to practise team is as follows:



Fitness to Practise in 2024 - summary

Our focus in 2024 was to continue to improve and streamline our regulatory processes, further protecting patients, working towards swifter resolution for the benefit of complainants and registrants alike.

Having undertaken a scoping review in 2022 as to how investigations of fitness to practise could be sped up as well as reduce costs by the introduction of clinical advisers, we concluded there were many potential advantages in the introduction of clinical advisers. The new model went live from August 2023 and in 2024, the GCC routinely instructed clinical advisers to provide clinical input into fitness to practise investigations.

In 2024, we worked on developing a new Case Management System (CMS) for the Investigation team. The introduction of an improved CMS aims to enhance efficiency, accuracy and reduce administrative burdens within the team leading to quicker complaint resolution. The CMS went live in January 2025.

The meetings of the Investigating Committee (IC) proceeded to be held virtually as agreed in 2021.

There were 63 fitness to practise concerns requiring investigation in the year. This was a 4.55% decrease in the number received compared to 2023. The reasons are difficult to discern, albeit the number received in 2021 were similar to this year, indicating that 2022 was somewhat unusual.

However, we received slightly higher referrals this year (five) requiring urgent consideration for interim suspension due to the nature of the concerns. A suspension order was made against one of the five registrants. Despite the small number of suspensions granted, we must remain vigilant where concerns identified represent a potential risk to patients.

In 2024, nine cases were referred for hearings before the Professional Conduct Committee. Two of the hearings were listed and determined in 2024 with the remaining seven hearings carried forward into 2025 for completion. The median number of weeks taken from the receipt of the complaint to consideration by the PCC was 123 weeks.

Whilst the volume of complaints received in 2024 compared to 2023 are similar, with some of these complaints raising serious concerns, they represent a small proportion of the number of treatments carried out by chiropractors.

Performance summary

		2024	2023	2022	2021
Number of cases concluded by Investigating Committee		58	52	60	82
Number of cases concluded by Investigating Committee with the following outcome:	No Case to Answer	49	42	48	73
	Referral to Professional Conduct Committee	9	10	12	9
Number of cases concluded by Professional Conduct Committee		11	11	10	11
Number of registrants removed ('erased') from the register		1	1	1	2
Number of registrants suspended from the register		0	1	1	1
Number of registrants receiving a conditions of practice order		1	2	0	0
Number of registrants receiving an admonishment		3	1	3	2
Time from receipt of initial complaint to the final Investigating Committee decision (in weeks):	Median	57	58	48	36
	Longest case	133	111	163	123
	Shortest case	15	9	11	8
Time from receipt of initial complaint to the final PCC decision (in weeks):	Median	123	102	94	122
Number of open cases (at the end of the year) which are older than:	52 weeks	15	7	10	13
	104 weeks	1	1	0	4
	156 weeks	1	0	0	0

Key points

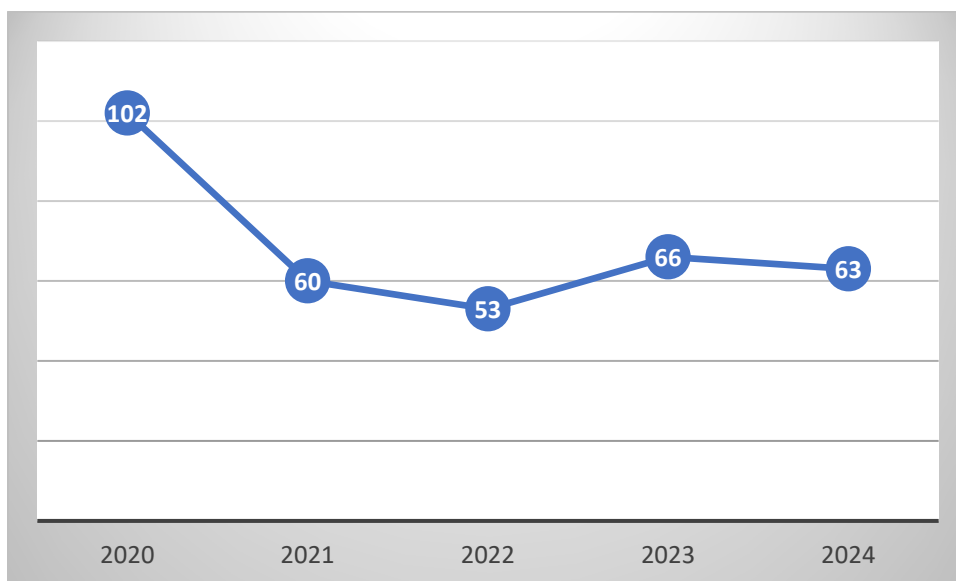
- In 2024, the number of complaints received about chiropractors' fitness to practise decreased by 4.55% compared to 2023.
- A higher number of cases were concluded by the Investigating Committee in 2024 compared to 2023.
- Of the 63 complaints made, they were made about 59 chiropractors.
- Most complaints were received from patients or relatives of patients.

- Most complaints related to clinical care and communication.
- Of the cases concluded by the Investigating Committee, 9 of these were referred to a Professional Conduct Committee hearing.
- Five chiropractors were found guilty of unacceptable professional conduct by the Professional Conduct Committee.

Complaints received

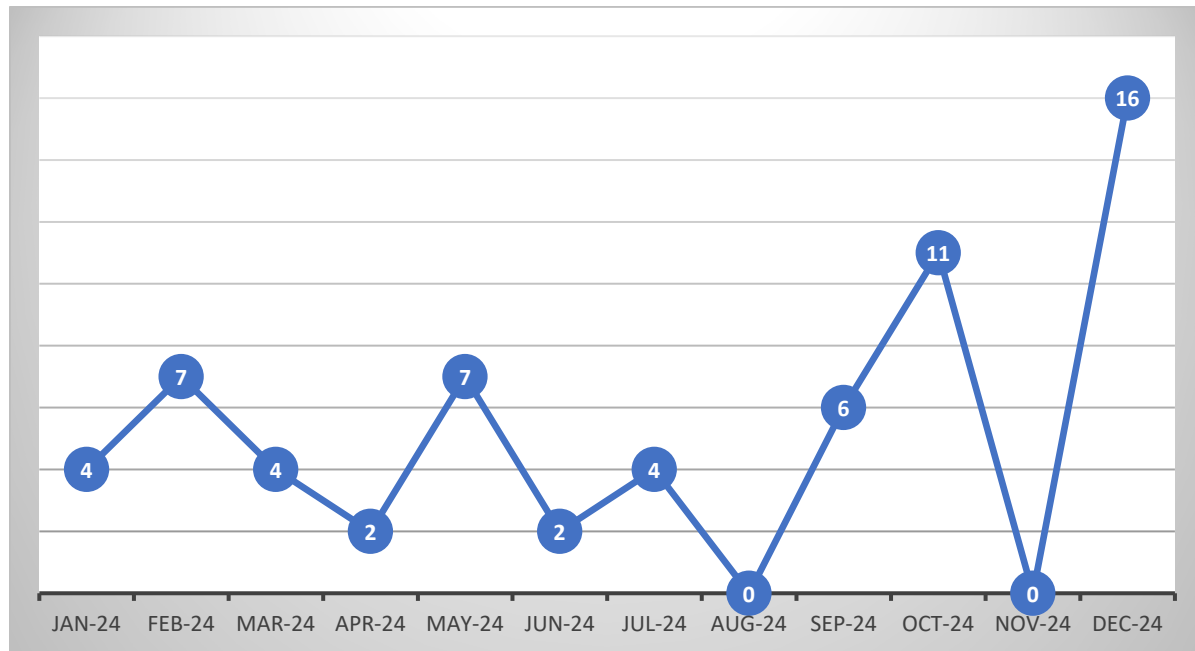
In 2024, the GCC received 63 complaints about chiropractors, a 4.55% decrease in complaints compared to 2023. Over the last five years, the GCC has, on average, received 68 complaints per year.

The complaints related to 59 registered chiropractors.



Complaints received by month

Like the previous year, on average we received 5 complaints per month with a peak of 16 complaints received in December.



Source of complaints

Most complaints are made by a patient or a relative of a patient, accounting for 63 of the complaints received in 2024.

Source of complaint	Number
Patient/Relative of	38
Other Chiropractor/Clinic where worked	3
Public Sector Org (e.g. Police)	3
Member of public/private org. – Ensure not the Patient	8
Registrar	0
Self-Referral	1
Anonymous	6
Referrer Unknown	0
GCC Research	0
Other Healthcare Professional	3
Professional Association	1
Total	63

Nature of complaints

Understanding the nature and volumes of complaints contributes to the development of the profession. We want to support the profession by being transparent about complaints and where necessary provide guidance where there are common themes or trends – so that the learning shared informs practice.

Importantly, allegations raised are just that, *allegations*. Whether or not these are proven is not a consideration in this section of the report, and in highlighting serves to aid understanding where complaints have been made.

Our approach

A complaint received by the GCC is reviewed by a member of the fitness to practise team, who completes an initial case report recording the allegation and issues raised by the complainant. This case report records all allegations made, including where more than one allegation is made by a complainant. This explains why the number of allegations (185) is greater than the number of complaints received in the year (63)

Cases are assigned a category and broken down into type and, in some cases, subtype. For example, a complaint concerning injury from treatment is categorised as *clinical care*, the type would be *substandard treatment* and the subtype *rough or aggressive treatment causing injury/pain*.

Category	Type	Subtype
Clinical care	e.g. substandard treatment/inadequate record keeping etc.	e.g. Rough/aggressive treatment causing injury/pain

Nature of complaint by category

Most complaints contain more than two allegations about the chiropractor. The highest number of allegations made in a complaint was 8.

Of the 63 complaints received, there were 120 allegations of a failing relating to *clinical care*.

In 40 separate complaints there was an allegation of a failing in *communication/consent or professional relationships*.

In 12 cases there was an allegation made about a chiropractor’s *probity*.

All allegations made are listed in the table below.

Base: 63 cases (received in 2024)

Nature of Complaint	Number of allegations raised
Clinical care	120
Communication/Consent/Professional Relationships	40
Probity	12
Working with colleagues	6
Health	4
Conviction/Criminality	2
Racism/Discrimination	1
Other	0
Teaching/Supervision	0
Business/employment issues	0
Promoting anti-vaccination	0
Compliance with GCC investigations	0
Total	185

Clinical care allegations - by type and subtype

The most commonly occurring allegation relating to clinical care was the concern about treatment technique/approach/dissatisfied with treatment.

Type	Number of allegations raised
Substandard treatment	117
Inadequate record keeping	2
Poor hygiene practice	0
Clinic facilities/premises	0
Breach of patient confidentiality	1

Substandard treatment

This covers a wide variety of concerns raised, the most common examples being concerns about the treatment technique/approach or the patient was injured.

Subtype (Substandard treatment)	Number of allegations identified
Concern about treatment techniques/approach/dissatisfied with treatment	28
Inappropriate/contraindicated/excessive treatment/lack of clinical justification	24
Rough/aggressive treatment causing injury/pain	16
Misdiagnosis/No diagnosis	11
Failure to work within limits of knowledge, skills and competence	11
Failure to cease treatment	7
Failure to refer, when appropriate	5
Inadequate assessment/case history	5
Lack of further investigation/follow up/review	3
Lack of clinical justification for investigations/x-rays	3
Failure to adhere to x-ray guidelines	3
Failure to examine/inadequate examination	1

Communication/Consent/Professional Relationships by type and subtype

The second largest category of complaint is Communication/Sexual Boundaries and Consent.

Type	Number of allegations raised
Sexual boundaries	14
Communication	12
Consent	6
Intimidation of patient/pressure/undue influence to undergo treatment	3
Financial impropriety with patients	3
Failure to preserve patient's privacy and dignity/not providing chaperone	2
Failure/delays in providing access to records	0

Communication

Poor communication between patient and chiropractor or inappropriate language/comments forms an element of or reason for a referral.

Subtype (Communication)	Number of allegations raised
Rudeness to patient/lack of respect or sympathy/empathy	4
Inappropriate comments/language	3
Failure to explain or agree diagnosis/treatment or treatment plan/results	2
Failure to explain fees adequately/mechanisms for payment	1
Failure to explain refusal to treat	1
Bullying/Harassment/discrimination	1
Failure to respond to communication from complainant/comply with patient request	0
Failure to provide adequate information about complaints procedure/poor complaint handling	0

The most commonly occurring complaint received related to the chiropractor’s rudeness to a patient / lack of respect or sympathy / empathy.

Sexual boundaries

There were 14 separate complaints alleging sexual behaviour by a chiropractor. This is a slight decrease from the previous year where there was 15.

Subtype (Sexual boundaries)	Number of allegations raised
Inappropriate contact with patient's body/intimate areas	5
Indecent/sexualised behaviour	4
Inappropriate personal/sexual relationship with patient	3
Use of sexualised language/comments	2

Probity

In this category, the largest number of allegations related to misleading advertising/claims made on website and false representation of skills/experience/registration/use of doctor title

Subtype (Probity)	Number of allegations raised
Misleading advertising/claims made on website	4
False representation of skills/experience/registration/use of doctor title	4
Financial deception/fraud/improper charging	3
Improper use of patient database/soliciting patients	1
Improper alteration of records/clinic diary	0
Practising while not registered/Practising on non-practising register/ Practising without indemnity insurance	0
Removal of patient records/data from clinic	0
Dishonesty/Failure to fulfil duty of candour to be open and honest with all patients	0

Commonly occurring allegations in 2024

The most commonly occurring allegations in 2024, in no particular order, were:

1. Concern about treatment techniques/approach/dissatisfied with treatment
2. Inappropriate/contraindicated/excessive treatment/lack of clinical justification
3. Rough or aggressive treatment causing injury or pain to the patient
4. Misdiagnosis/No diagnosis
5. Failure to work within limits of knowledge, skills and competence
6. Failure to cease treatment
7. Failure to refer, when appropriate
8. Inadequate assessment/case history
9. Sexual boundaries - inappropriate contact with patient's body/intimate areas

It is of note that whilst the most common occurring allegation may relate to clinical care, substandard treatment, if appropriate or clear communication between chiropractor and patient had taken place, this may have avoided this type of allegation being referred to the GCC.

There are more allegations relating to clinical care (1-8) and are the most commonly occurring in 2024.

Misdiagnosis (4) increased slightly in comparison to 2023.

Investigating Committee

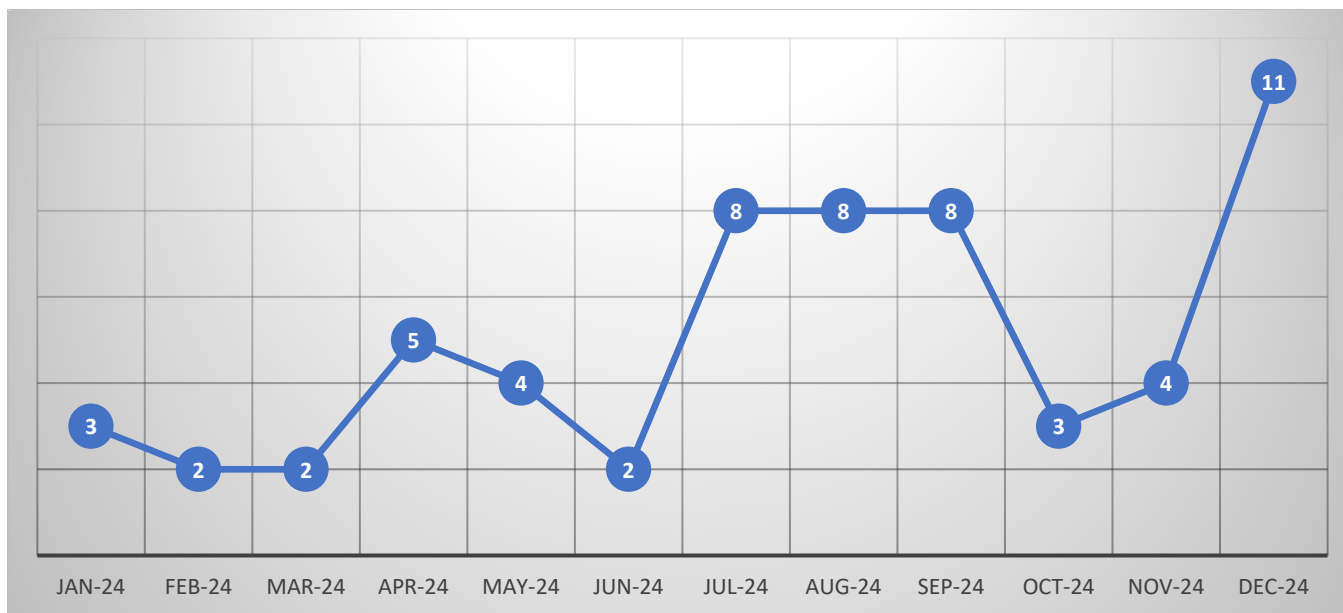
The GCC Investigating Committee (IC) investigates complaints made to the GCC about a chiropractor's conduct, professional incompetence or health, to establish whether there is a 'case to answer'. If there is a case to answer, the IC will refer the complaint for consideration by the GCC Professional Conduct Committee (PCC) or Health Committee (HC).

IC meetings are not held in public. The Committee sits with a Legal Assessor to advise them on points of law and procedure, but the Legal Assessor has no decision-making role.

In 2024, the IC determined 58 cases compared to 52 cases in 2023.

	2024	2023	2022	2021	2020
Cases determined	58	52	60	82	87

Cases determined by month



Decisions of the Investigating Committee

Of the 58 cases that were determined by the IC in 2024, nine were referred on to the PCC (16%). Whilst there was a slight increase of cases determined by the IC, the proportion of referrals to the PCC remained nearly the same as 2023.

Decision of the IC	2024	%	2023	%	2022	%	2021	%	2020	%
No Case to Answer	49	84%	42	81%	48	80%	73	89%	78	90%
Referred to PCC	9	16%	10	19%	12	20%	9	11%	9	10%
Total	58		52		60		82		87	

Professional Conduct Committee

The Professional Conduct Committee (PCC) determines allegations about a chiropractor’s conduct or professional incompetence referred to it by the IC.

Allegations that have been referred to the PCC are considered at a public hearing. On rare occasions, parts of a hearing may be held in private.

The PCC members are both chiropractors and, non-chiropractic lay members. At each hearing there must be at least three PCC members present, including one chiropractor and one lay member. The panel is chaired by a lay member. The PCC sits with a Legal Assessor, advising the Committee on points of law and procedure, and who has no decision-making role.

If the PCC decides that the allegation against the chiropractor is not well founded, no further action will be taken. However, if the PCC decides that the allegation is well founded, it must impose a sanction.

Sanctions available to the PCC are:

- Admonishment
- Conditions of practice order
- Suspension
- Removal from the register

In 2024, 11 cases were determined by the PCC.

Five chiropractors were found guilty of unacceptable professional conduct in 2024. Details of the decision of each are set out below.

In six cases the chiropractor was found not guilty of unacceptable professional conduct.

PCC decision	2024	2023	2022	2021	2020
Removal	1	1	1	2	0
Suspension	0	1	1	1	0
Conditions of Practice	1	2	0	0	0
Admonishment	3	1	3	2	2

No UPC	6	6	5	6	4
GCC offered no evidence	0	0	0	0	0
Total	11	11	10	11	6

The median number of weeks taken from the receipt by the GCC of the initial complaint to the decision taken by the PCC was 123 weeks for decisions made in 2024.

Review hearings

Where a chiropractor has been either suspended or a conditions of practice order imposed at a previous hearing, a review hearing may be held to ensure the chiropractor is safe to return to the register.

There was one review hearing held in 2024, in comparison to three review hearings in 2023.

PCC Caseload

At the end of 2024 there were 8 cases that were yet to be determined by the PCC. This is a decrease of two cases compared to those at the end of 2023.

Health Committee

The Health Committee (HC) determines allegations of serious impairment of a chiropractor’s fitness to practise due to ill physical or mental health.

There were no cases referred to HC and which did not meet in 2024.

PCC cases where the chiropractor was found guilty of Unacceptable Professional Conduct (UPC)

This section of the report is produced in accordance with the Chiropractors Act 1994, Section 22(14), which requires the Committee to publish a report setting out the names of those chiropractors in respect of whom it has investigated allegations and found the allegations to be well founded.

Name and registration number of Registrant	Date of Decision	Source of complaint	Outcome
Horace London 01494	29/02/2024	Patient/Relative of	Admonishment
<p>Summary of facts found proved and amounting to UPC</p> <p>The registrant failed to record Patient A's case history, failed to adequately conduct / record the patient's physical examinations, and did not develop or document a plan of care. The registrant also failed to obtain / record Patient A's informed consent to treatment. The registrant performed a cervical spinal manipulation. The registrant adjusted Patient A's clothing to expose her buttock without obtaining her consent and touched her buttock in the course of advising / correcting their posture. The registrant did not adequately or at all wear a surgical mask / a single use apron / glove. The registrant also failed to cooperate with the GCC in that he did not provide the GCC with a transcript of Patient A's chiropractic records following one of more requests.</p>			
Robert Cooper 3873	23/07/2024	Chiropractic/Clinic where worked	Conditions of Practice
<p>Summary of facts found proved and amounting to UPC</p> <p>The registrant failed to maintain adequate patient records (record keeping and documentation involving a very large number of patients spanning from 2013 until around 2019). The registrant failed to communicate properly with other healthcare professionals or third parties and failed to refer patients to alternative practitioners when clinically indicated. The registrant failed to make or record diagnoses which were not supported by examination findings or presenting symptoms and in relation to one patient, provided treatment which may have been contraindicated.</p>			
Horace London 01494	20/09/2024	Organisation (e.g. Police/Chiro association)	Admonishment
<p>Summary of facts found proved and amounting to UPC</p> <p>The registrant failed to notify the GCC within the prescribed time period that he had been charged with two criminal offences on 28 February 2022 which was noted as misleading.</p>			

Name and registration number of Registrant	Date of Decision	Source of complaint	Outcome
Julia Gold 01698	11/12/2024	Self Declaration / Registrations	Admonishment
<p>Summary of facts found proved, material relevance of the criminal offence and amounting to UPC</p> <p>The registrant was convicted of the offence of driving a motor vehicle when the alcohol level was above limit. The registrant also failed to notify the GCC within the prescribed time period that she had been charged and convicted with a criminal offence.</p>			
Paul Allen 05039	18/12/2024	Patient/Relative of	Removal
<p>Summary of facts found proved and amounting to UPC</p> <p>The registrant did not make accurate records of Patient A’s non-chiropractic care and treatment and acted dishonestly in that he knowingly created inaccurate records of Patient A’s non-chiropractic care and treatment.</p>			

Interim Suspension hearings

Investigating Committee

If a complaint received raises an immediate concern for the protection of the public, the Investigating Committee (IC) will hold an ‘interim suspension’ hearing to consider whether it should suspend the registration of the chiropractor being investigated.

If the IC decides that it needs to suspend the registrant to protect the public, the order cannot last longer than two months and will be in place while the complaint is investigated. If granted, the Interim Suspension Order is effective immediately. The Committee has no power to revoke an order once it has been made.

There were five registrants who were the subject of interim suspension hearings by the Investigating Committee in 2024, an increase of one from the previous year.

	2024	2023	2022	2021	2020
Interim Suspension Hearings held	5	4	7	9	3
Interim suspension ordered	1	0	2	1	0
Interim suspension not ordered	4	4	5	8	3

Professional Conduct Committee

If the PCC decides that a complaint that has been referred to it by the IC is so serious that the public might need immediate protection, it will hold an interim suspension hearing. If the PCC decides that it needs to impose an Interim Suspension Order to protect the public, the Order is effective immediately, and it lasts until the end of the PCC process.

There were no PCC interim suspension hearings held in 2024, the same as the previous year.

Section 32 complaints

Under Section 32 of the Chiropractors Act 1994, a person who (whether expressly or by implication) describes themselves as a chiropractor, chiropractic practitioner, chiropractitioner, chiropractic physician, or any other kind of chiropractor, is guilty of an offence unless they are a registered chiropractor.

Over the course of a year, several complaints are received relating to individuals that describe themselves as above where they are not a registered chiropractor.

Following review, the GCC can take several courses of action. These include:

- Issuing advice to result in changes to websites, publications and other relevant marketing materials
- Sending a ‘cease and desist’ letter
- Instructing inquiry agents to obtain more information
- Recommending that the case is closed.

Where letters have been sent, the GCC checks that appropriate action has been taken.

In cases where the breach or potential breach of section 32 is of very serious concern, the Registrar will consider whether to prosecute.

During 2024, 57 complaints were reviewed and closed in 2024, leaving 13 complaints open at the end of 2024.



General
Chiropractic
Council

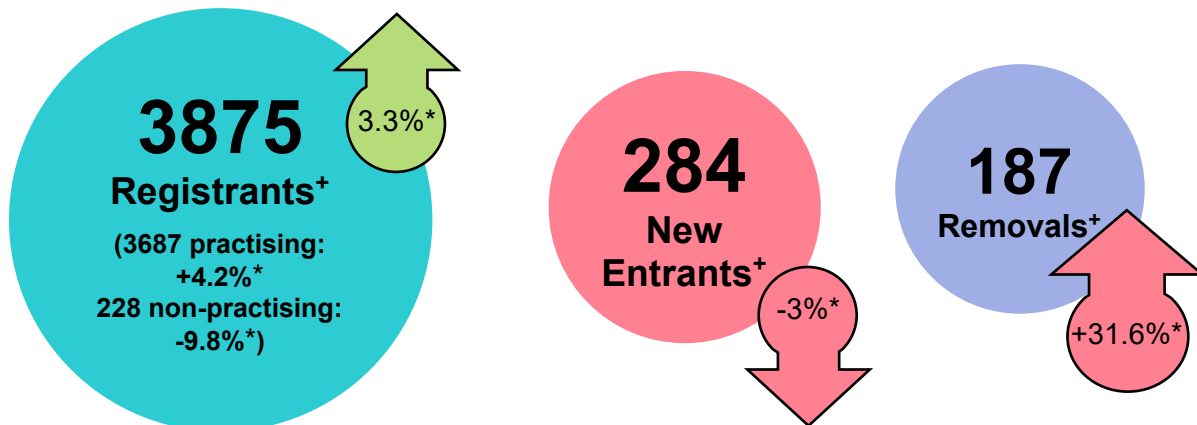
The Register Annual Report

2024



The Register in 2024

This report provides an overview of registration activity in the General Chiropractic Council between 1 January to 31 December 2024 and is a snapshot of the Register of Chiropractors as of 31 December 2024.

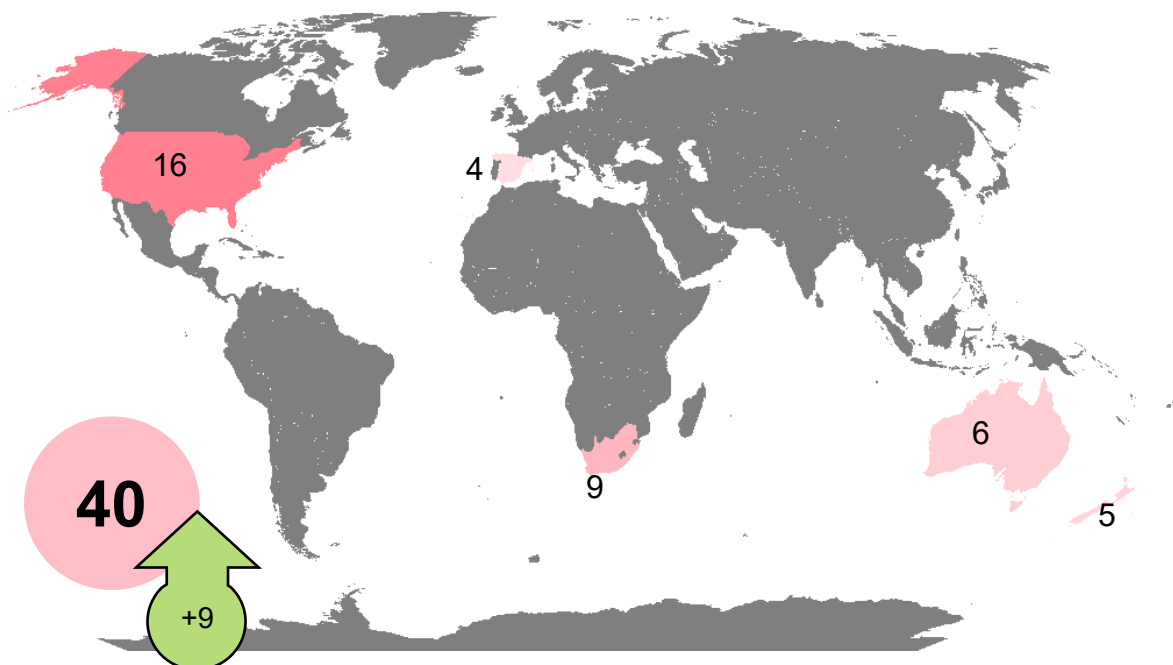


+ at 31 December 2024
* when compared to 2023 figures

The register grew in 2024 by 123 – this is less than the growth in 2023 but still a sizable number given the overall size of the register. Predictions indicate that the register will grow for at least the next four years.

Origins of New Registrants

Qualification Country of New Registrants via International Route in 2024



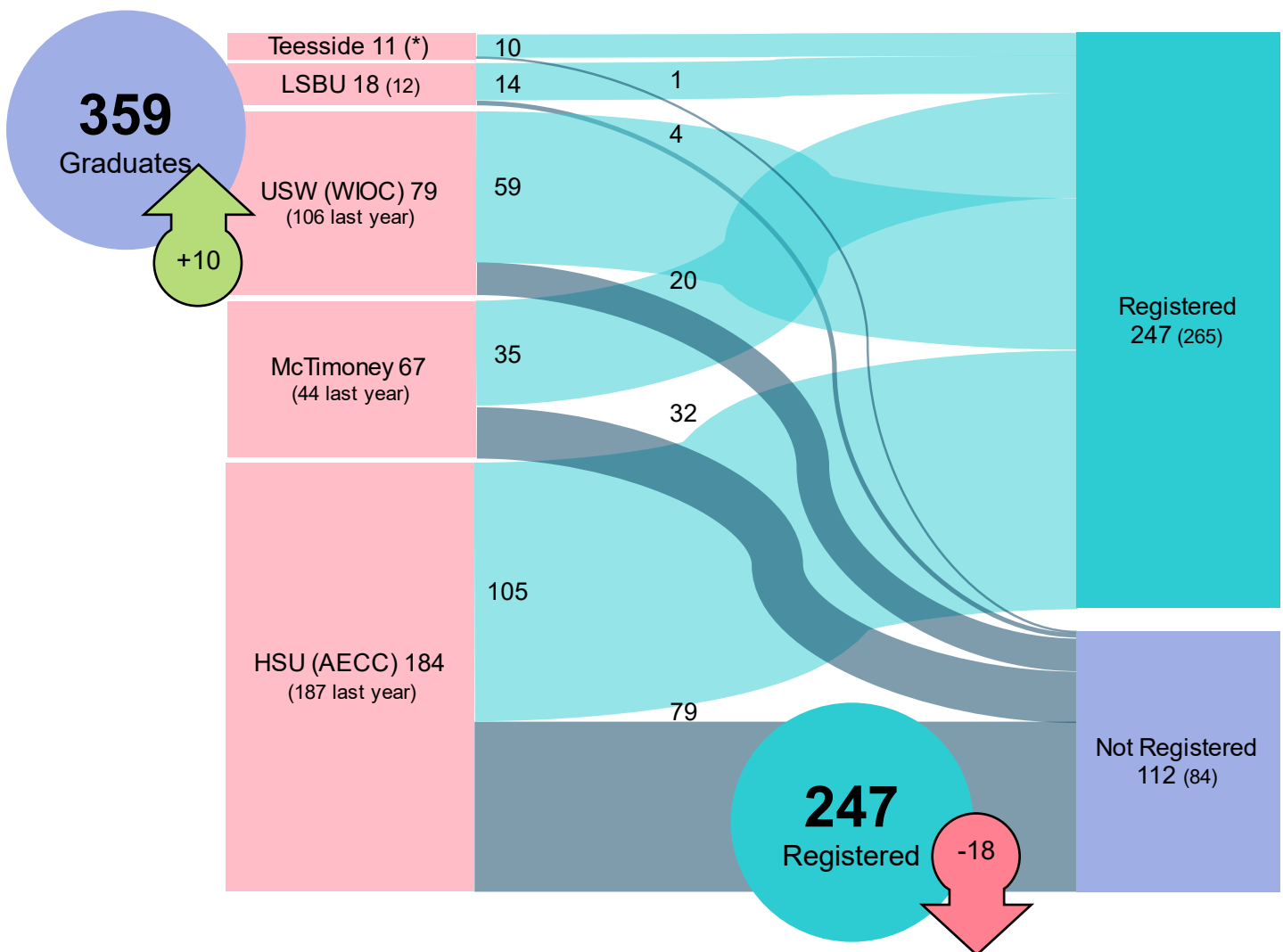
In 2024, a total of 40 new registrants with overseas qualifications joined the register, representing an increase of nine compared to the previous year.

If we consider nationality, half of all new overseas qualified registrants trained in their home country of the USA (12) or South Africa (8 +1 – see below). Chiropractors from Australia (6) and New Zealand (3) also all trained in their home country.

Chiropractors from Canada, Britain, France, Republic of Ireland and Senegal all qualified outside their home country:

Country of Nationality	Total joining register in 2024	Country of qualification
South Africa	9	8 x South Africa, 1 x Spain
Canada	4	2 x USA, 1 x South Africa, 1 x New Zealand
Britain	3	1 x USA, 1 x Spain, 1 x New Zealand
France	1	Spain
Republic of Ireland	1	Spain
Senegal	1	USA

Destination of UK Approved Programme 2024 Graduates



Destination registration figures are for graduates who completed an approved course in 2024, and have joined the register by March 1 2025.

In 2024, 359 students graduated from a GCC approved education programme.

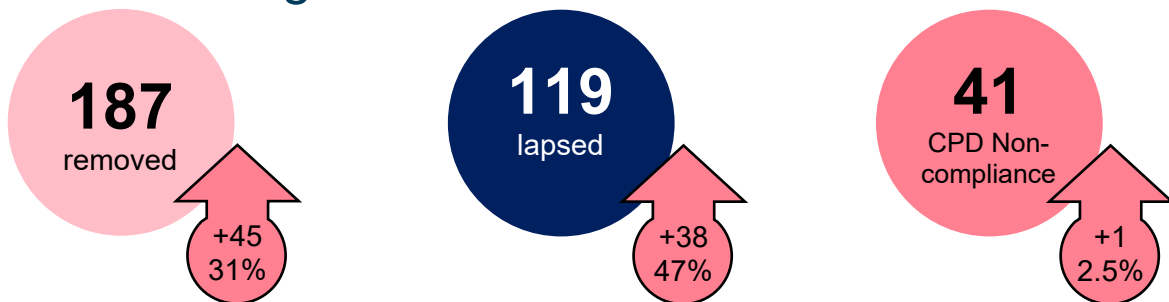
Of note is the University of Teesside's first cohort of students graduating in 2024, with 10 of their 11 graduates registering.

London South Bank University (LSBU) and McTimoney College of Chiropractic (MCC) both increased their graduate numbers, but this growth was balanced out by a drop in University of South Wales (USW / WIOC) graduates. This drop must be seen in the context of 2023 being a record year for USW (WIOC), and the 2024 graduate figures are closer to the previous five year's average.

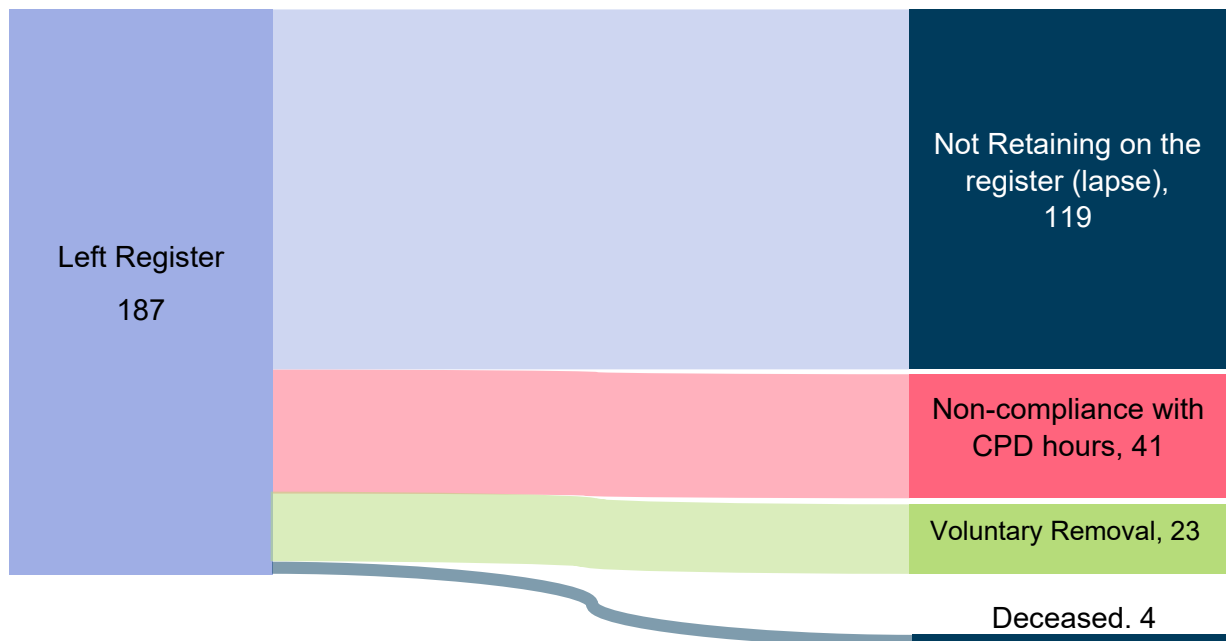
The registration rates for Health Sciences University (AECC) at 57% and USW (WIOC) at 75% both reflect the international student population for the graduating years (as reported in the annual monitoring forms). This suggests few international students continue into practice in the UK.

In previous years, the registration rate for MCC has been over 90%. The 2024 registration rate of 52% is currently low, but we believe this to be a function of the increased number of graduates, and a large December graduation, rather than reflective of a wider trend.

Trends in Register Leavers - 2024



In 2024, a total of 187 chiropractors left the register. Most removals were due to lapsed registrations (119), which saw a significant rise of 47%. There was little change (+1) in the 41 removals for CPD non-compliance (failure to record sufficient CPD hours).



The voluntary removal process, as defined in the GCC rules, is bureaucratic (requiring a sworn statement), with most choosing to leave the register by not retaining on the register at the end of the year (lapsing).

While the 47% increase in lapsed registrations appears to be concerning, this is a positive result of work to reduce the number of non-practising registrants.

Over the previous five years, the total number of registrants paying the non-practising fee has remained steady at around 250 (in 2023 it was 6.7% of the register).

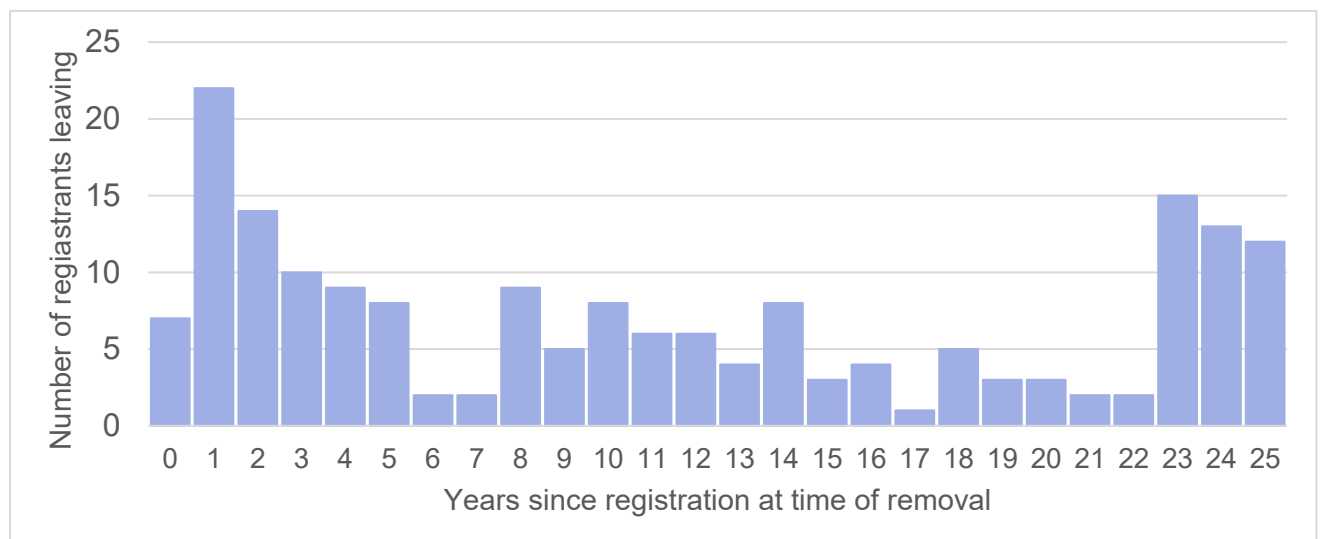
Many non-practising registrants do not realise they are still required to submit CPD and they are disproportionately represented in the removals for non-compliance with CPD hours. In 2024, 19 (46%) of the 41 registrants removed for non-compliance with CPD hours were registered as non-practising.

The October 2024 newsletter [included an article](#) highlighting that non-practising is usually inappropriate for chiropractors seeking a career break, and encouraging them to leave and restore to the register later. This messaging was reinforced in the retention materials and advice provided by the registrations team.

Of the 119 registrations that were not retained, 31 (26%) were non-practising prior to their registration lapsing. Overall, there was a 9.8% drop in the number of non-practising registrants, meaning the 2024 register is 5.8% non-practising.

Across all registrants choosing to leave the register (excluding deaths), 56% were female and 42% were male. However, male registrants were more likely to be removed for non-compliance with CPD hours (M:59%, F:41%), whereas female registrants left due to non-retention (M:41%, F:59%) and voluntary removal (M:30%, F:70%).

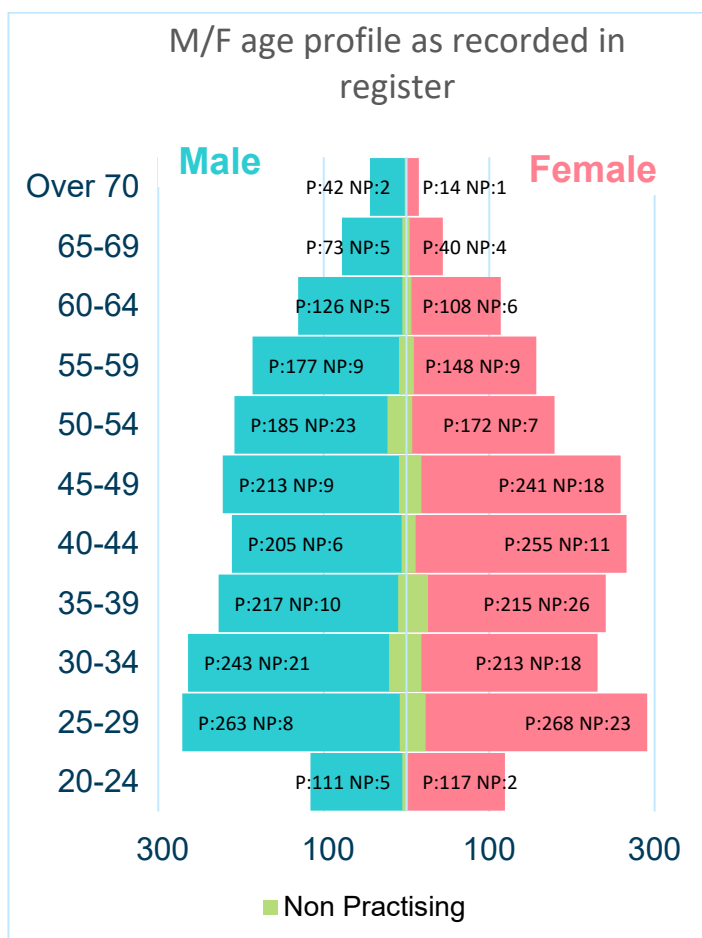
Considering the distribution of years on the register before leaving, there is a clear peak in leavers who have only been registered for a year, and a separate peak over 23 years (which we suggest is due to retirement).



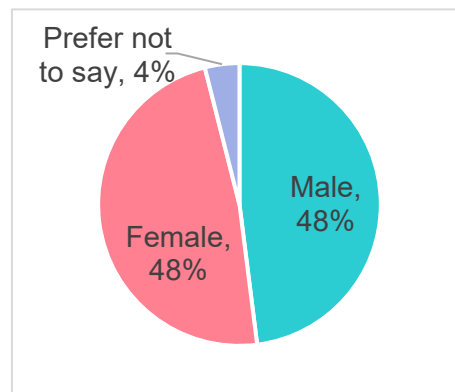
Previous reports have suggested overseas-qualified registrants are over-represented in the numbers leaving the register, however this does not appear to be the case in 2024. Of the 2024 leavers, 8 (4.3%) were overseas-qualified (all left via non-retention). In comparison the total register is 5.6% overseas-qualified.

Demographic profile of the register population

Age and Sex/Gender



Registrants reported their sex as



In previous years, this report has only used “male” or “female” data published within the register.

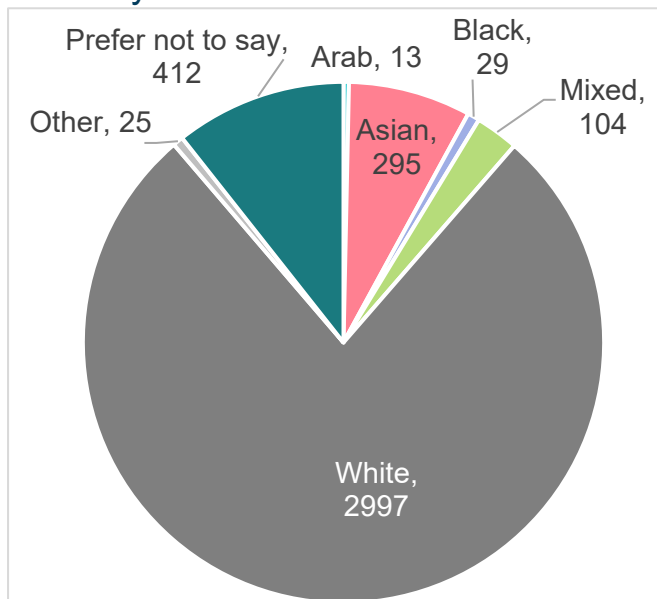
This approach did not give registrants the opportunity to opt their data out of demographic reporting, nor did it define whether “male/female” referred to sex or gender.

From 2023 retention onwards, we have separately asked for the registrant’s sex, and given the option to opt out.

The largest group falls within the 25-29 age range (580), indicating strong early-career participation. Numbers remain high through the 30s and 40s but begin to decline from 50 onwards, suggesting attrition due to retirement or career changes.

The male/female split is near parity until age 50, when female numbers decline more quickly than male. This may mean females leave the profession earlier (due to retirement or career changes) or may reflect historical imbalances in the profession, with more recent cohorts showing greater male/female balance.

Ethnicity



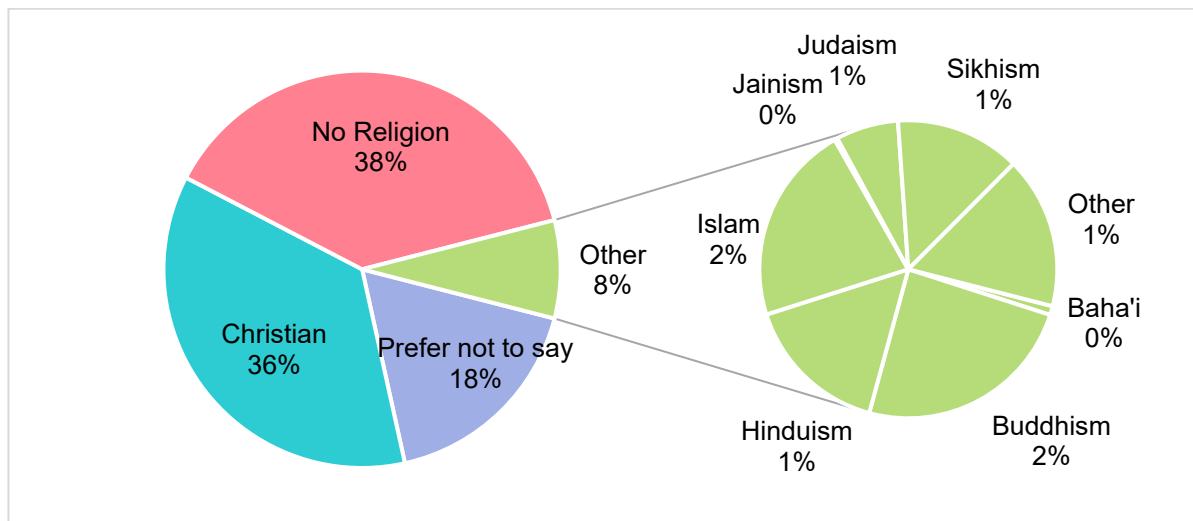
In total 12% of the register identify with a minority ethnicity (compared with 18.3% of the UK population in 2021 census).

10% of the register responded "prefer not to say" when asked their ethnicity (6.1% last year).

The data for religion, sexuality and disability is presented for completeness, but does not yield any specific insights. There is very little change from previous years.

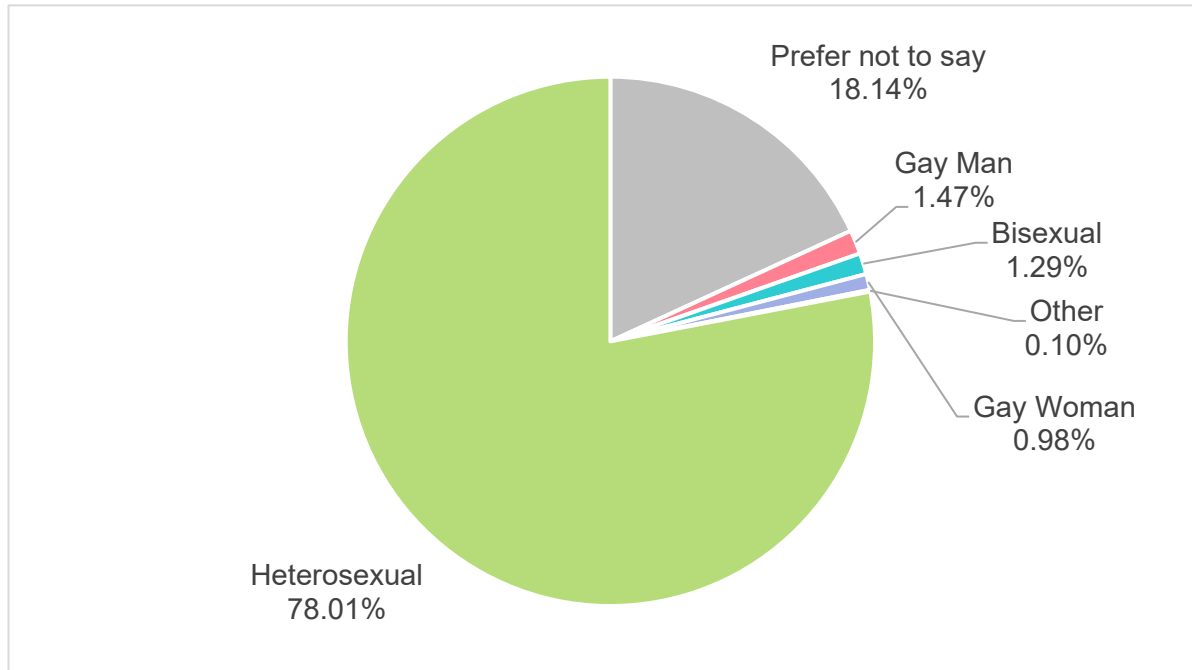
Religion/Beliefs

Which religion or belief system does the registrant identify with?



The proportions broadly reflect the [2021 census data](#) (37.2% no religion, 46.2% Christian, 6% prefer not to say, 6.5% Muslim, 1.7% Hindu).

Sexual Orientation

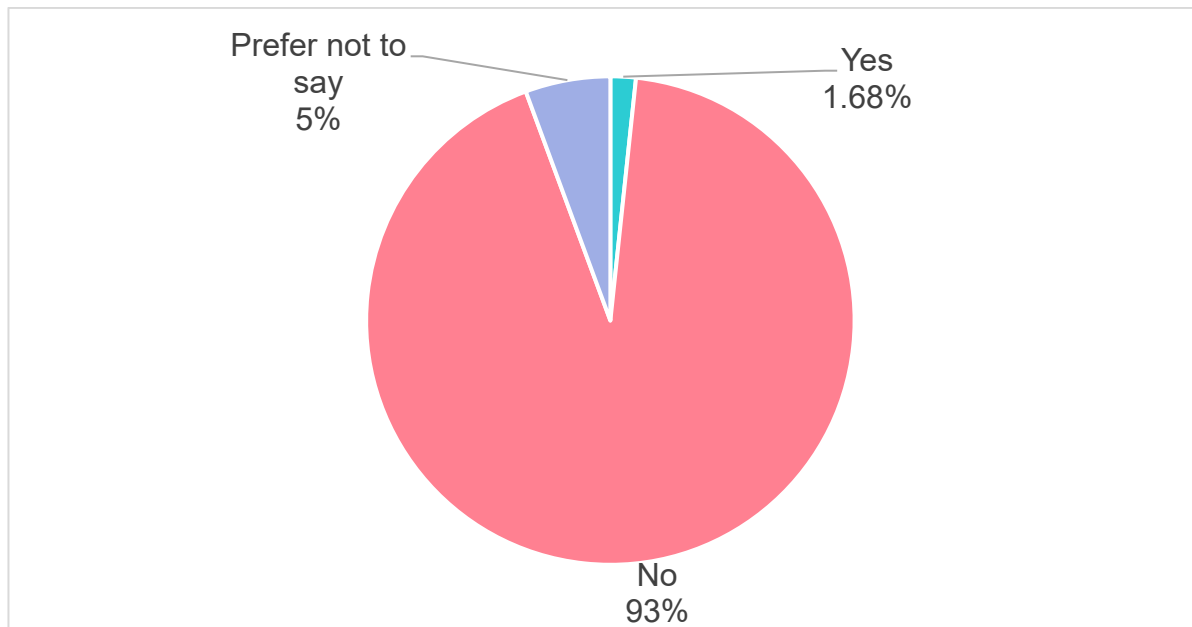


Which sexual orientation does the registrant identify with?

The proportions broadly reflect the [2021 census data](#), (3.2% LGB+, 89.4% heterosexual, 7.5% prefer not to say).

Disability

Does the registrant consider themselves as disabled?



Not unexpectedly, fewer chiropractors consider themselves disabled than the general population according to the [2021 census data](#) (17.7% disabled, 82.2% non-disabled, no option to not answer).

There is a small increase in chiropractors declaring a disability (equivalent 2023 data: 0.73%). It is not clear if this is due to more disability, or more confidence to share the data.

For noting

Annual Report from the Professional Conduct Committee

Meeting paper for Council on 19 March 2025

Agenda Item: 9a

Purpose

This report by the overall Chair of the Professional Conduct Committee provides Council with an overview of the Professional Conduct Committee's work and related activities in 2024.

Recommendation

Council is asked to note the report and that the Chair of PCC, Derek McFaull will present it and respond to questions.

Introduction

1. The Professional Conduct Committee (PCC) continued with its statutory duties in 2025 as well as undertaking other activities and work throughout the year. I formally took over the role as overall Chair of the PCC on 1 October 2025 following the resignation of Claire Bonnett from the role. I am grateful to her for her 'handover.' Part of my role is to provide an important link between PCC members and the GCC.
2. I was pleased to meet with both Jonathan McShane, Chair of Council and Nick Jones, Chief Executive and Registrar for virtual introductory meetings and I look forward to working with them and all the Executive Team.

PSA Report November

3. The PSA performance review report for 2023-2024 noted the GCC met all but one of the 18 Standards of Good Regulation, with Standard 15 The time to progress FTP investigations not met. The PSA recognised the challenges faced by the GCC and but concluded that investigations took too long. The PSA noted that a small number of vacancies can have a big impact on smaller organisations and welcomed the recognition by the GCC of the issues and the actions it took to try to reduce the impact.
4. The PSA has reviewed all decisions reached by the PCC, in particular a substantive hearing which concluded in November 2023 in which they only recently shared learning points from. The Authority did not refer the case to the High Court under its Section 29 powers, however several learning points were made to the GCC. In response, learning points arising from this case were issued to PCC Members and Legal Assessors, with the learning from this case discussed in our recent training.

Committee Membership

5. There are presently 17 members of the PCC: five lay chairs, eight lay members, and five registrant members. All PCC members, save for one co-opted member from 2019, were appointed from 1 June 2021 to serve for a period of either 3 or 4 years. There is a balance to be struck regarding the number of Members, too few and we struggle for listings and too many means not enough activity. My assessment is the number is right but will keep under review.
6. Two new chairs were appointed on 1 October 2024 following an internal recruitment process. We welcome Amanda Orchard and Hannah Poulton in their new roles. Consideration of the recruitment of further Committee members may be required in the next few years. The PSA has noted the need for the GCC to improve the diversity of its FTP Committees, as no external recruitment has taken place this year any further recruitment process should ensure this area is addressed.

Listings for future hearings

7. The Committee concluded 11 substantive hearings in 2024. Scheduling continues to cause concern, notably the administrative arrangements, however improvements are underway with cancellations and amendments communicated to panel members in a timelier manner. This has been welcomed by members and it is hoped there will be no recurrence.

Appraisal and Peer Feedback

8. Having recently moved to a bi-annual process, appraisals of current members of the PCC are to be conducted before the end of 2025.
9. There will be a continuation of self-appraisal, followed by an appraisal discussion with me as overall Chair of the PCC. Peer feedback is provided online via a form following each hearing, I am pleased to say this feedback form is now sent promptly after each hearing to all members for completion. I also engage with all members during appraisals and identify any training needs or concerns.

Training

10. The PCC Committee training day took place in person at the GCC offices in Kennington, London on 13 November 2024, providing an opportunity for the committee members to meet each other face to face. The Committee members expressed great satisfaction with this approach and engaged fully with the trainer, Rosemary Rollason, experienced in our work and professional regulation over many years. It provided a great forum for lively open discussion, engagement and interaction with each other. Feedback indicated it was enjoyable and interesting and that for colleagues to engage in more meaningful discussion.
11. I liaised with the Director of FTP and the trainer on subject areas to be covered. Topics discussed included etiquette and being confident in addressing disrespectful behaviour; assertiveness - controlling the hearing; the hearing processes - responsibilities of individuals; and the decision-making process to ensure participation; and agreeing reasons and communicating those in plain language.
12. The following day 14 November 2024, a further training session for PCC Chairs was undertaken again by Rosemary Rollason. This covered an overview of the role and responsibilities of Chairs; the relationship between the Committee and Legal Adviser and the GCC team; formal processes, for example initial application admissibility and half-time submissions; and the reading out of reasons.

Themes

13. During discussions and informal feedback discussions after hearings, a number of themes have emerged as potential areas for future all-Committee training and areas of concern:
 - (a) Late receipt of papers continues to cause problems for Committees prior to hearings. These sometimes arrive late on the Friday before a hearing scheduled to start on the following Monday and are often voluminous. On occasion, the

PCC has had to use the first morning of the listed hearing dates to read the bundle. It is acknowledged that this is largely outside the control of the GCC.

- (b) Requests for availability and subsequent listing of hearings has seen an improvement in communication with committee members in this regard.
- (c) Continuing need for more prehearing case management to deal with some preliminary issues and legal argument in advance of the substantive hearing.
- (d) Regulatory case law update – this formed part of the recent annual training and some case law updates have been circulated by the GCC this year. These are sent out by other regulators and by many law firms.

GCC Support

- 14. Members of the committee wish to express their thanks to Niru Uddin who recently vacated her role within the GCC. We wish her well in her new career path and look forward to working with any new appointment in this role.
- 15. There is also universal praise from all panel members for the role and engagement undertaken by the Protection of Title Caseworker & Committee Coordinator, who is to be praised for excellent command of a difficult, busy and challenging role.

Hearings at end-2024

- 16. The Committee concluded 11 substantive hearings in 2024. Unacceptable Professional Conduct (UPC) was found in five cases. As regards sanctions one registrant received an admonishment, and a further registrant received an Admonishment on two separate cases. A registrant received a Conditions of Practice Order. One registrant was erased from the Register.
- 17. Allegations arising from breaches of clinical care; concerns about treatment techniques and breaches of professional and sexual boundaries were recurring themes in cases coming before the PCC.
- 18. There are currently 8 cases yet to heard and 1 part heard case from 2024. Most hearings in 2024 were again conducted remotely on Microsoft Teams with one case held in-person.
- 19. In line with other regulatory bodies, the GCC is introducing new arrangements for its committee members and panellists, including members of the Professional Conduct Committee. This relates to the treatment of those engaged by employers who are not employees, but 'workers' going forward. Amongst other things this deals with the obligations on employers to grant holiday (that is, holiday pay) and an opportunity to join a pension scheme, if qualifying.

- 20.** I am in discussion with the CER further to concerns I have expressed as to the indemnity arrangements in place to protect committee members. I am sure these issues will be resolved soon.
- 21.** The disengagement of witnesses continues to be an issue in the context of remote hearings. The risk of withdrawal by a complainant where the process of cross-examination has become challenging for them is a recurrent theme.
- 22.** There have been cases in which the complainant has either withdrawn completely or threatened to leave the remote hearing further to challenges to their credibility. This is much more difficult to predict and to prevent in the context of a remote hearing and should be factored into any decision to hold a hearing remotely. The committee continues to highlight this concern for those engaged in the preparation of witnesses for the hearing setting.

Derek McFaul

Overall PCC Chair

Date: 28 February 2025



For noting

Annual Report from the Investigating Committee

Meeting paper for Council on 19 March 2025

Agenda Item: 9b

Purpose

This report by the overall Chair of the Investigating Committee provides the Council with an overview of the Investigating Committee's work and related activities in 2024.

Recommendations

Council is asked to note the report and that the Chair of IC, Nilla Varsani who will be presenting it virtually and able to respond to questions.

Report from the Investigating Committee

Introduction

Overview

1. In 2024 the Investigating Committee (IC) dealt with 58 cases, with 9 being referred to the Professional Conduct Committee, because of the IC's assessment that there was a 'case to answer'. The other cases were closed with no further action. A further 4 cases were adjourned for further information.
2. In the previous year, the IC considered 52 cases, with 10 being forwarded to a hearing. As such, the number of referrals from IC to the PCC has remained relatively consistent over the past three years. This shows consistency of decision-making.

Committee Membership - transition

3. My predecessor oversaw the recruitment of 20 new IC committee members in 2023, a significant volume of recruitment. Whilst challenging this was a sensible and prescient step and provides for resilience amongst the committee's membership.
4. There are some risks, in essence the new cohort become the IC membership over 2024/25. To illustrate, my term ends in May 2025 along with eight experienced colleagues, all serving the committee since 2017.
5. That said from June 2025, there will be 18 members of the Committee who have benefited sitting alongside experienced members over the last two years. My assessment is that this is the right number to ensure there is a sufficiently wide pool and to ensure opportunities to sit are evenly distributed – maintaining members' skills and so on.
6. Consistent with this, five Chairs were appointed from the September 2023 cohort. My assessment is that, again, this has enabled a secure transition. Indeed, subject to a decision of Council earlier in the meeting, one of that number is my successor as overall Chair.
7. My observations of the new members is that the recruitment selection was robust in having recruited a diverse membership which brings with it a wealth of experience which should provide reassurance to Council that the standard of decision-making and drafting of determination will continue to remain high.

8. Moving forward I would recommend that the GCC continues to take a pro-active approach in supporting and training IC members particularly now that meetings are all held remotely. During 2024 the full IC membership met in person for the first time since IC meetings have moved to being held remotely for their annual training. I would propose that this continues going forward. I have also initiated opportunities for the new IC Chairs to come together to enable informal learning, relationship building and the sharing of best practice. Again, this is something that I would suggest continues particularly now that pool of Chairs is greater than it has been in the past.

Evaluation

9. I am aware this has been a challenging year for the Executive with some staff turnover and so on. That said the Committee met for 30 meetings this year compared to 28 in 2023 and dealt with six more cases. In other words, the throughput from Executive was consistent and the IC was not a barrier to the progression of cases, which I am pleased about.
10. The Committee is aware of course that the Professional Standards Authority in its review of the GCC concluded the investigations were taking too long in the year and decided Standard 15 was not met. The IC must consider cases when they are put to us, and we are mindful of the impact of adjournments or requests for further information and as can be seen above our productivity is consistent with previous years' performance. Timeliness is an important consideration, equally there is a lot resting on the decisions of the Committee which can have far-reaching consequences.
11. We will always privilege decision-making over timeliness. We are aware that all complaints made must come to IC. I add that cases that are minor can have elements of underlying materiality. At the same time, we receive some cases that are lower risk and received some time ago – and we suggest that the executive investigate ways to dispatch those promptly. I understand that the new case management system has the potential to support doing so.
12. We are pleased to see that the conclusions of the in-depth evaluation of a sample of cases carried out by an external firm confirm the care by which cases are considered. Along with other members of the committee I receive the summary report of the audit and act on the findings.

Worker status

13. In line with other regulatory bodies, the GCC is introducing new arrangements for its committee members and panellists, including members of the Investigating Committee. This relates to the treatment of those engaged by employers who are not employees, but 'workers' going forward. Amongst other things this deals with the obligations on employers to grant holiday (that is, holiday pay) and an opportunity to join a pension scheme, if qualifying.
14. The GCC has invited those affected to enter into supplier agreement with effect from 1 April 2025. I know that some members of the Committee have corresponded with the GCC as to their expectations of the backdating of such payments and which remains a concern for those members. I would encourage the GCC to find a suitable resolution to the concerns that have been raised.

Conclusion

15. This is my only and final meeting as overall chair of the IC as my term with the GCC ends in May 2025. I will have served eight years with the GCC, first as a member on the on the IC, then as IC Chair from October 2022 and finally finishing up as overall chair since June 2024.
16. During my tenure with the GCC I have seen several changes, the most notable being the move to virtual hearings. This change in the way IC meetings are run, in my view has not impacted the quality or effectiveness of decision-making in any way.
17. The quality and timeliness of the papers received from the executive team has remained high throughout although I would encourage the GCC to look for ways in which duplication of material within bundles is kept to a minimum. Engagement with the executive team has always been collaborative and positive as we work together towards our shared goal of protecting patients and the public interest
18. I'd like to end by thanking the executive team, the GCC staff, IC members (both past and present) and legal assessors that I have worked with over the years in the diligence, commitment and thoughtful way in which they have carried out their respective roles.

Nilla Varsani
Overall IC Chair

Annual Report from the Audit and Risk Committee

Meeting paper for Council on 19 March 2025

Agenda Item: 10A

Purpose

This report from the Chair of the Audit and Risk Committee updates the Council on Committee's activities during the 2024 financial year.

Recommendations

The Council is requested to note the report, which will be presented by Fergus Devitt, who will also respond to any questions.

Overview of the ARC's Activities in 2024

1. The Committee successfully completed the tasks it planned for the 2024 financial year (see paragraphs 2 - 15). The background to this report is set out in sections 16-21.

[Annual Report and Accounts 2023](#)

2. The Committee reviewed and agreed to recommend to Council the:
 - Approval of the 2023 annual report and audited accounts to Council on 06 March 2024. Council approved the report on 20 March 2024.
 - Signing of the letter of representation on the 2022 financial statements to the Council. Council approved and signed the letter on 20 March 2024.
 - Noting of the 2023 letter of representation from the Executive Directors to the ARC and Council. Council noted the letter on 20 March 2024.
 - Noting of the contents of the auditors' findings from their audit of the 2023 financial statements. The Council noted the very clean audit report from the external auditors.

ARC Meeting with External Auditors

3. Members of the ARC met with the external auditors in a private session on 6 March 2024 – without any staff being present – to allow members the opportunity to put any questions they had to the auditors. The members noted that the auditors did not raise any concerns regarding the 2023 audit of the financial statements in January–February 2024.

ARC 2024 Development Session

4. On 06 March 2023, members held a development session, discussed and agreed the following matters:



Internal audit:

- a) The Committee should review the criteria for setting up an internal audit function each May.
- b) The Executive should explore lower-cost options for internal audit (i.e. peer reviews) to address gaps in the GCC's assurance framework and the areas of our operations to focus on (i.e. registrations, FtP).

Both actions are ongoing and are planned to be completed by in May-25.



Environmental, Social and Governance (ESG)

- c) Capture existing ESG-related initiatives within the GCC and identify any gaps that needed to be addressed.
- d) Establish a working group to consider ESG considerations and develop a proportionate action plan (regarding GCC's size and its operations) for implementation.



The Committee will consider and agree an ESG policy for the GCC in Mar-25.



Additional Risks for the GCC

- e) The Executive should consider appropriate mitigations for the identified AI risk to education providers.
- f) The Committee should continue to review the Strategic Risk Register (SRR) at its meetings, and ensure it remained current and reflective of the risks to which the GCC was exposed.



The AI risk to educational providers remains an ongoing area of interest. The Executive have noted this action to be taken forward.



The SRR was reviewed three times by the ARC and twice by Council in 2024.



GCC Investment Portfolio

- g) The Executive should invite the investment managers to the ARC meeting in November 2024 to provide an update on the performance of the GCC's investment portfolio.
- h) Prior to the ARC meeting in November 2024, a smaller meeting involving the Chair of Council, the Chair of Audit and Risk Committee, the Chief Executive and the Director of Corporate Services should be held with the investment managers. The meeting should focus on the investment managers' approach to the investment of GCC funds, given its ethical investment policy. It would also be useful to explore the performance returns of ethical and traditional investments at that meeting. The conclusions reached at the meeting should be fed into the presentation by the investment managers to the Committee in Nov-24.



The investment managers met with the ARC members in Nov-24, and with Council members in Dec-24. The above matters were fully addressed at both meetings.



GCC Reserves

- i) The Council should maintain the current general reserve policy which covered six months of the GCC's budgeted annual operating costs. Council may decide to review this policy at any time.
- j) Council should be clear about the prudent use of the reserves of the GCC, seeking legal advice when required.



The Committee presented the recommendations on the GCC reserves to Council in Jun-24.

2023 Review of Effectiveness of External Auditor

- 5. The Committee reviewed the effectiveness of the external auditors in May-24 and agreed that the 2023 external audit process was effective.

ARC Governance Statement

6. In May 2023 the Committee agreed to include a governance statement in the 2023 annual report and accounts; and to include the statement in future reports. Council reviewed and approved the report in Mar-24.

Terms of Reference (TOR)

7. The Committee reviewed and recommended the approval of the changes to its TOR to Council in Nov-24. Council approved the updated TOR in Dec-24.

External Auditors – Audit Planning Report for 2023

8. At its November 2023 meeting, the Committee reviewed and approved the 2023 audit planning report. The report set out:
 - Risk assessment and materiality thresholds for the audit.
 - Audit team to be involved in the 2023 audit, and the audit timetable, and
 - Proposed fees for the audit.

Strategic Risk Register

9. The Committee reviewed and agreed that the Strategic Risk Register (SRR) should be recommended to Council for approval in June and December 2023. Council approved the SRR twice last year.
10. The Committee discussed and recommended the annual risk assessment statement to Council in March 2024. The Council agreed the annual risk assessment statement for the 2023 financial year in Mar-24.

Assurance Map as of May-24

11. The assurance map provided an objective scrutiny of the risk management and control practices at the GCC. It identified the key sources and forms of assurance across the four-lines of assurance throughout the organisation. The map also showed the status of the current levels of assurance compared to the desired levels agreed by the ARC.
12. Following the Committee's review of the assurance map, members agreed that the four lines of assurance were adequate for the needs of the GCC and that there were currently no gaps in the organisation's risk assurance framework.

Information Governance Update

13. The Committee reviewed the risk mitigation actions the Executive took throughout the year to help reduce the GCC's exposure to reputational damage and financial sanctions arising from an infringement of the Data Protection Act (DPA) 2018.

14. Members of the Committee noted that there were no matters which were being investigated or remained unresolved with the Information Commissioner’s Office (ICO) in 2024.

Managing the Risks Assigned to the GCC Directorates

15. The Committee reviewed and noted the reports from the Directorates of Corporate Services, Development and Fitness to Practise on how the risks assigned to their directorates impacted on the work of the ARC.

Other areas of the Committee work during the year are summarised below.

Activity	Reviewed and noted actions	Tick
Registers of Gifts and Hospitality & Conflict of Interests	The Committee reviewed and noted that the declared submissions for 2023 of Council members and the Executive did not highlight any matters of concern.	
Management Accounts Reports	The Committee reviewed three management accounts reports in March, May and November 2024. Members noted the achievement of the financial targets for the financial year.	
ARC Workplan 2024	The Committee reviewed and agreed its annual workplan for 2024.	
Presentation of reports by the GCC Executive to the Committee	The Directors of Corporate Services, Development and Fitness to Practise presented reports to the Committee in May and Nov-24 on: <ul style="list-style-type: none"> How they managed the risks that were assigned to their Directorates, and the impact of such risks on the work of the Committee. 	
Independent Audit of Investigation Cases Report (as of May-24)	The Committee received and noted report of the independent audit of 9 investigation complaint files closed between Jun-23 and Dec-23.	
Audit of Investigating Committee Decisions (Dec-23 to May-24)	The Committee received and noted the report from the Fitness to Practise (FTP) team.	
Cyclical Taxation Matters – Update	The Committee noted in November 2024 that the computation and submission of the GCC’s PAYE Settlement Agreement (PSA) and corporation tax returns for the 2023/24 tax years were completed, and associated tax liabilities settled within their timescales.	

Background

16. The ARC agreed in May 2023 that an annual report on the Committee’s work should be produced and presented to Council Members each March. This is the second annual report from the Committee to Council.

17. The ARC activities in this report cover the period from 1 January to 31 December 2024.

- 18.** The ARC met three times in 2024 (March, May and November): two virtual meetings (via Microsoft Teams) and one in-person meeting.
- 19.** The four-strong members of the Committee attended all the Committee meetings last year. The Chief Executive and Registrar and Director of Corporate Services also attended each of the Committee's meetings in 2024.
- 20.** The Committee completed the work it planned for the 2024 financial year.
- 21.** The Council received the reports and noted on the Committee's work from the Chair of the ARC at its meetings in March, June and December 2024.

Fergus Devitt

Chair of the Audit and Risk Committee



For noting

Report from the Chair of the Audit and Risk Committee

Meeting paper for Council on 19 March 2025

Agenda Item: 10B

Purpose

This paper provides the Council with a report from the Chair of the Audit and Risk Committee on the Committee's work since the last Council meeting in December 2024.

Recommendations

When the Council meets later today, members are asked to review and:

- a. **Approve** the audited annual report and accounts for the 2024 financial year.
- b. **Approve** the letter of representation from Council and authorise its signing by Council and submission to the external auditors by the Executive.
- c. **Note** the contents of the Executive Directors' letter of representation to the Council.
- d. **Note** the contents of the auditors' findings from the audit of the 2024 financial statements.

Meeting of the ARC since November 2024

1. The ARC met in-person on 5 March 2025. Kathryn Burton, Partner at the HaysMac LLP (external auditors), attended the morning session of the meeting.
2. The Committee held two sessions on the day. The morning meeting, to conduct its normal business, was held from 10.00 – 12.30hrs (sections 4–25).
3. The afternoon session was held from 13.20 – 15.00hrs to undertake development activities. The matters considered during the development session are outlined at section 26 of this report.

CER Report

4. The Committee received and noted the CER's report covering the period since its last meeting in November 2024.

5. The Committee noted, in particular:

- a. **Staffing matters:** The CER updated the Committee on leadership changes, including the resignation of the Fitness to Practise (FtP') Director and the appointment of an interim Director of Change. The interim Director will review FtP processes, support CMS implementation, and assess the registration system to enhance resilience and user experience.

The Executive acknowledged performance challenges but highlighted ongoing improvements as a valuable investment. Plans for a permanent FtP Director will be considered over the coming months.

- b. **Case management system (CMS):** The Executive reported that the CMS rollout was largely successful, though initial technical issues led to complaints about automated emails. The team quickly resolved this by refining email content and adding alerts to prevent recurrence.

6. The Committee **noted** updates on:

- The recent Coroner's report
- Partners supplier agreements
- Financial risks
- Regulatory reform
- Governance risks
- Business plan risks, and
- Complaints.

The Committee noted the report.

Management Accounts for the Period to January 2025

7. The Committee received and noted the Director of Corporate Services' report for the first month of the financial year. The report showed a headline surplus of £75k, compared to the budgeted surplus of £54k.

8. Members further noted that GCC's reserves reached their highest level at £3.949m, including £2.265m in cash. The value of investments increased by £166k, from £4.8m in December 2024 to £4.9m in January 2025. The Committee noted that the GCC's financial position remained robust.

9. On the HR update, the Committee noted that there were no immediate concerns raised by the Executive.

Annual Report and Accounts 2024

10. The Committee received the draft 2024 audited report and accounts from the Director of Corporate Services. Members raised several points, which the Executive team and external auditors addressed.
11. The Committee noted two emerging financial issues highlighted by the Director of Corporate Services:
 - a. **IFRS 15 (Revenue Recognition):** The GCC currently recognises income throughout the year in line with services provided for our registrants. The Director will assess further implications of the standard for the audited accounts by February 2026.
 - b. **IFRS 16 (Lease Accounting):** This standard requires the GCC to recognise its office lease commitments as both an asset and a liability on its balance sheet at the lease's inception. The Director added that, in compliance with the standard, the presentation of the office lease costs will have an impact on the figures in the GCC's statement of financial activities and balance sheet for the year ended 31 December 2025. The Director committed to a detailed review by February 2026 to ensure compliance.
12. Following a detailed discussion of the report, the Committee **agreed** to recommend to Council on 19 March 2025 the:
 - a. Approval of the 2024 annual report and audited accounts.
 - b. Approval of the letter of representation from Council to the external auditors.
 - c. Noting of the letter of representation from the Executive Directors to the Committee and Council.
 - d. Noting of the contents of the auditors' findings from the audit work on the 2024 financial statements.

Meeting of ARC Members with the External Auditors

13. Members met with the external auditors with no staff being present. The discussions between the members of the Committee and the external auditors were noted for confirmation to Council on 19 March 2025.

ARC Annual Report to Council

14. Members reviewed the ARC's annual report to the Council.
15. The report provides an update on the work undertaken by the Committee during the 2024 financial/calendar year.

The Committee agreed to recommend the report to Council for noting.

Strategic Risk Register (SRR)

16. The Committee received the report on the SRR from the Director of Corporate Services.
17. Strategic Risk 2 (financial sustainability/solvency): The Committee discussed the concerns about the rumoured exit from the UK market of the GCC's banking partner, Santander, and the impact of diversifying our cash deposits. The Director observed that the Financial Services Compensation Scheme (FSCS) protects only £85k of an entity's deposits per bank, meaning that opening an account with another bank would provide protection for only an additional £85k. The Committee noted that the benefits of diversifying funds across multiple banks were unclear.
18. The Committee suggested exploring depositing surplus cash in money market accounts to improve liquidity and returns.
19. Strategic Risk 3 (Future of the Profession): The Committee acknowledged that the potential risk related to regulatory changes has decreased. Therefore, members discussed whether to remove the risk from the SRR or reduce the rating of the risk from Amber (moderate) to minor (green). Following discussion, it was agreed to retain the risk in the register but downgrade the risk rating to Minor (green). Members further agreed that the re-wording of the risk in the register should be presented to the Committee's May 2025 meeting.
20. Strategic Risk number 4 (organisation's capacity): The Committee noted the reduction in its rating from Severe (red) to Moderate (amber) since the last meeting. The Committee recognised the GCC's ability to buy-in external support to complement staffing vacancies, and that this should be reflected in this section of the SRR going forward.
21. The Committee noted the progress on the updated Governance Handbook, which will be included in the Governance section of the SRR.

The Committee agreed the strategic risk register for the period to Feb-25.

Information Governance Update

22. The Committee reviewed and **noted** the report.

Register of Conflicts of Interest

23. The Committee **noted** that the declared submissions did not raise any matter of concern.

Gifts and Hospitality Declaration

24. The Committee **noted** that the declared submissions did not raise any matter of concern.

ARC Meeting Dates and Workplan 2025

25. The Committee **reviewed and noted** the workplan for 2025, with the following changes:

- The Committee effectiveness survey will be conducted every two years, based on the outcomes of the development session.
- A standing item for the review of relevant finance and governance policies will be added to the workplan for May each year.

Afternoon Development Meeting of the ARC on 05 March 2025

26. During the afternoon session of the meeting, the ARC members discussed the following matters and noted the actions to be worked through:

- 1) **Estimating Professional Conduct Committee (PCC) costs:** Members discussed ways to improve the estimation of future PCC costs but noted no simple formula exists.
- 2) **Environmental, Social and Governance (ESG):** Members reviewed the Director of Corporate Services' report and agreed that the Executive should draft an ESG statement summarising the GCC's recent ESG activities and identifying areas for improvement. The statement and any associated commitments should be appropriate to the GCC's size and resources.
- 3) **ARC Effectiveness Survey results 2025:**

The ARC effectiveness survey identified the Committee's **strengths** as follows:

Principle 1 (Membership, Independence, Objectivity, and Understanding):

- ARC members demonstrate a clear understanding of their roles and responsibilities, as highlighted by effective leadership from the Chair and a robust induction process. The Committee enjoys strong professional and friendly working relationships with the Executive. The Annual Development Day provides a welcome avenue to discuss and debate emerging issues relating to the Committee. The ARC's TOR are regularly reviewed by the Committee.

Principle 2 (Skills):

- Collectively, the ARC possesses the necessary skills to provide assurance on governance, risk management, the control environment, and the Annual Report and Accounts. Members are generally satisfied with the training and induction process, and the Chair plays a key role in developing members' skills and knowledge.

Principle 5 (Communication and Reporting):

- The ARC effectively reports its work to the Council after each meeting. Strong relationships and communication are maintained with those providing briefings and those receiving assurance, and any corrective actions required to address areas of potential weaknesses identified in the survey.

The 2025 ARC survey further highlighted the following areas for **improvement**:

- *Training and Development*: Add ARC members to the external auditors' webinar training list for relevant development opportunities.
- *Ongoing Learning*: Continue the annual development day session held in March.
- *Skills Assessment*: Evaluate the feasibility and benefits of a Training Needs Analysis for all ARC members, particularly in governance and specialist skills.
- *External Auditor Engagement*: Explore ways to enhance input from external auditors for deeper insights.
- *Additional Assurance*: Review options for requesting additional assurance or specialist input when concerns arise.

Fergus Devitt

Chair of the Audit and Risk Committee