

COUNCIL

Quarter 4 2012/13: January – March 2013

Meeting: 16 May 2013

Status: for noting

Lead responsibility: Samantha Peters
(Chief Executive and Registrar)

Contact details: speters@optical.org

EXECUTIVE SUMMARY

1. The last quarter of the year has been one of considerable achievement and significant challenge.
2. Foremost amongst our achievements has been the successful transition from one continued Education and Training (CET) cycle to another. Getting this right is an essential part of ensuring that our registrants remain fit to practise over their working lives. In total, **99%** of registrants passed the **2010/12** cycle by the **15 March 2013** deadline. Critically, the roll out of the new cycle has been delivered without significant operational hitches. Whilst it will take time to bed down fully, initial indications are positive, with **11%** of registrants having already met their peer review requirement.
3. This achievement has taken place against the annual retention of fully qualified registrants and corporate bodies which ended on **31 March 2013**. Ensuring retention runs effectively, is a critical cornerstone for ensuring only those who should be registered, actually get on our registers. In total **19,305** individual registrants and **2089** company registrants completed retention (**96.9%** of registrants by **31 March 2013** deadline). Of which, **97.8%** were completed online. Notably, in comparison to the end of the previous CET cycle during the retention period of **2010/11**, **17.5 %** fewer registrants were removed this year than at the end of the previous CET cycle (**April 2010**).
4. More broadly, we continue to perform well against our performance Indicators. We are reaching that part of the year when key reports about our Key Performance Indicators (KPIs) fall due. We, for example, report positively that our (independently undertaken) annual audit of Fitness to Practise (FtP) demonstrates that decisions made at the initial and final stages of procedures, are well reasoned, consistent, protect the public and maintain confidence in the profession. This is a critical achievement for any regulator, but cannot be taken for granted. We also consider to deliver the majority of our Core Activity Performance Indicators (CAPIs).

PUBLIC C19(13)

5. The last quarter has not been without its difficulties and challenges. Foremost of these has been our financial performance. We have not delivered against our **2012/3** budget. Our income for the year is **£5.84m** and our full year expenditure is **£6.48m** including amortisation and depreciation. The overall draft result at **31 March 2013** is a deficit of **£640.7k** against an original budgeted surplus of **£514.6k**. The main causes are set out at paragraphs 57 to 68. Notably, legal costs have risen dramatically in **2012/13** compared to the prior year, mainly due to two factors: the continued upward trend in number of referred cases and the complex and escalating nature of a relatively small number of registrants' cases.
6. Action to mitigate the costs are underway, including a more regular case reporting from the solicitor panel firms and case cost limits on each externally instructed case. Instruction letters for new cases have been amended to require earlier notification of complexity or other potentially costly legal issues. Management information and case monitoring processes around the use of external law firms have been reviewed and are being managed in a more disciplined way so that we are better able to forecast the costs of each stage of the FtP process. Controls on referrals and authorisation of case costs above fixed fees have also been tightened.
7. Other challenges include the continually changing environment and the scale and speed of activity we need to keep pace with. Alongside the major strategic review of student registration and business regulation which we are undertaking to feed into the Law Commission, we have the Francis Inquiry to grapple with, a steady stream of consultations, and a series of ad hoc emerging issues which raise questions for our on-going management of standards. Keeping pace with all this requires a considerable amount of energy and effort from across the whole of the organisation, not just our policy teams; it is both essential and extraordinarily difficult.
8. Council is requested to:
 - note the contents of this review;
 - note the progress made with sections on risk and compliance and give a steer on the scope, scale and level of reporting within them; and
 - note that the section on regulation is still under development.

HORIZON SCANNING

9. This section includes an update on GOC responses to external consultations and an update on wider policy developments. It also summarises the changes to the NHS and how these affect optical services.

**PUBLIC
C19(13)**

External consultations publications and reports

10. We continue to monitor and engage with external developments, including external consultations, publications and reports that are of relevance to the GOC's activities.

GOC responses to external consultations

11. We responded to the consultation from the Department of Health on the *Review of the Balance of Competencies* which aims to assess how the UK's national interests interact with the European Union's (EU) role. The report is examining evidence concerning the impact of EU competence on the UK national interest.
12. Our response concluded that the EU has a valuable role to play in issues concerning public health and healthcare and set out the relevant issues, particularly in relation to the sale of non-corrective contact lenses.
13. We responded to the consultation from the General Osteopathic Council (GOsC) on a proposed new policy for the retention of data acquired by the GOsC in the performance of its functions. Our response stated that as the GOsC considers and implements its proposals, it might wish to consider how it can work with the other health and social care regulators to help create (as far as possible) a common approach to the retention of statutory and regulatory information.
14. We also contributed to a response from the Joint Optical Committee for the European Union (JOCEU) which comprises of the Association of Optometrists (AOP) College, the Federation of (Ophthalmic and Dispensing) Opticians (FODO), Association of British Dispensing Opticians (ABDO) and GOC, to the consultation on the European Council of Optometry and Optics (ECOO) Guidelines for Optometric and Optical Services. This response argued that the Guidelines would benefit from a cover page making it clear that national regulation and national guidelines take precedence over the ECOO guidelines.

Future external consultations

15. We are planning to respond to the Department of Health's consultation on implementing the requirement to have insurance or indemnity as a condition of registration as a healthcare professional (closes **17 May 2013**).

Published responses to past external consultations

16. In April 2013 the Medicines and Healthcare Products Regulatory Agency (MHRA) published their analysis of the responses to a consultation they launched on the revision of European legislation on medical devices. In our consultation response, we supported the proposal to broaden the scope and definition of 'medical devices' to include non-corrective contact lenses. In general there was strong support for this amongst other respondents. The

**PUBLIC
C19(13)**

MHRA said that they would consider recommendations to include such products within the definition based on whether these products present a high risk to patients. We will continue to monitor developments closely.

Professional Standards Authority

17. The Professional Standards Authority (PSA) is planning a public consultation in the autumn on the performance review process and how it could be improved. We responded to a request from the PSA to supply our initial thoughts, suggesting ways in which the process could be more targeted at areas of poor performance and how the collection of performance data could be improved to, for example, make improved comparisons between regulators.

Policy update

18. The following section gives Council an update on key policy areas including the Government's response to the Mid Staffordshire NHS Foundation Trust Public Inquiry and the new NHS Commissioning arrangements which came into effect on **1 April 2013**.

Mid Staffordshire NHS Foundation Trust Public Inquiry

19. The Government has issued its public response to the Francis Inquiry - *Patients First and Foremost*. It sets out the Government's collective commitment and includes a new statutory duty of candour for organisations which provide care and are registered with the Care Quality Commission (CQC). Council will receive a briefing paper on this issue for discussion at the May 2013 meeting.

NHS Commissioning

20. From **1 April 2013**, the new organisations created through the Health and Social Care Act 2012 took over responsibility for commissioning healthcare services in England. NHS England will have an overarching role to ensure that the NHS delivers better outcomes for patients within its available resources. Primary Care Trusts (PCTs) have been replaced by GP-led commissioning organisations called Clinical Commissioning Groups (CCGs). A fuller briefing about the NHS changes will be attached to the next CEO's Bulletin for Council and staff.

General Ophthalmic Services

21. Under the new system NHS England (through the 27 Area Teams) will be responsible for commissioning General Ophthalmic Services (GOS). Optical contractors will be commissioned to carry out an NHS sight test for a fee of £20.90.
22. Optical contractors must refer all patients that show signs of injury, disease or abnormality in the eye (or elsewhere) and require medical treatment. They

**PUBLIC
C19(13)**

must also refer patients that are unlikely to see satisfactorily with corrective lenses. As a result the nationally commissioned service is very narrow in scope.

Locally commissioned services

23. Patients in CCG areas will have eye care needs beyond the scope of the nationally commissioned services. CCGs will need to commission local eye care services to meet these additional needs using the most appropriate procurement methods and locally identified funding. These services include:
- Referral refinement and/or assessment especially to eliminate false positive glaucoma suspects;
 - Cataract monitoring – pre and post extraction;
 - Low vision services including low vision aids;
 - Stable glaucoma monitoring;
 - Red eye/acute anterior segment; and
 - Children’s eye care services, e.g. screening at school entry.

Implications for the GOC and sector

24. As a result of these changes the sector may face some uncertainty and change in terms of what services are commissioned locally and potentially the availability of referral refinement services.
25. The implications of these changes are not yet clear or how these changes may impact on our role as regulator. However we will be monitoring the impact of the changes to the GOS contract.
26. Where the GOC previously engaged with PCTs, for example in FtP investigations and cases, and also removals from the register, we will now have to identify and engage with the new commissioning structures.
27. From **April 2013** a new eye health indicator has also been introduced as part of the Public Health Outcomes Framework to help improve outcomes. The indicator will measure how many people have lost their sight from preventable sight loss cases (e.g. glaucoma, age related macular degeneration and diabetic retinopathy). This will provide us and the sector with better information and we will be analysing the intelligence this provides.

Law Commission Review

28. After the last Council meeting we met the Law Commission to obtain an update on the progress of their review. They informed us that rather than drafting specific legislation on optical business regulation as they had planned previously, they are now intending to propose that Government should have a general power to activate business regulation for any of the healthcare regulators (which is the same approach that they intend to take in relation to student regulation). This means that it will be necessary to persuade

**PUBLIC
C19(13)**

Government to use a general power to introduce an appropriate system of business regulation. It also means that we have some more time to develop our thinking about what would be the most appropriate system of business regulation rather than having to communicate our view to the Law Commission in **September 2013**.

29. As a result, we are now planning to present a draft consultation document to the Council meeting in **July** rather than **May 2013**. Since Council discussed the business regulation project at its **March 2013** meeting, we have asked Europe Economics to do further work on their report in order to address Council's comments. We have also spoken to a number of registrant Council members to discuss business practices in more detail and have fed their views into Europe Economics. We are also working on a draft consultation document and planning further engagement with stakeholders, including groups representing the public and patients, and our stakeholder reference groups.
30. More generally, we understand the Law Commission are expecting to find out by the end of **May 2013** when the Bill they are working on is likely to be introduced to Parliament. In the meantime, they are still planning to conclude their review and submit a draft Bill to Government in **February 2014**. The Government could then introduce the Bill to Parliament straight away, but there is likely to be some delay while the Government considers whether any additional provisions are needed following the Francis Inquiry Report. The Government could also delay the Bill while it drafts the secondary legislation that will be required to implement the new legal framework. Alternatively it could introduce the Bill and draft the secondary legislation subsequently. We should be able to provide more clarity about the legislative timetable in the next quarterly review.

Emerging policy issues

31. We continue to monitor emerging issues both within the optical sector and more broadly to help ensure that we are aware of key external developments.
32. We are developing a policy issues log to capture all such emerging issues and will send this to Council for discussion at the July 2013 meeting. Just three examples we have identified as areas where we need to keep a watching brief and consider appropriate action in the short and long term are the Francis Inquiry (see paper C21(13) for details), regulatory implications of developments around Fluorets (where production has ceased and supply will come to an end over the course of the year) and similarly 3-D eyewear and the development and availability of 3-D prescription glasses to the public.

PERFORMANCE REPORT

**PUBLIC
C19(13)**

33. This is the fourth quarterly performance report against the 2012/13 business plan (for the period 1 January 2013 to 31 March 2013).
34. The report is divided into three sections. The first section reports on progress against the key performance indicators (Annex 1), the second section reports on the Core Activity Performance Indicators (Annex 2) and the last section provides progress on key projects.

Progress on Key Performance Indicators

35. We will report annually in the Annual Report on our performance against our Key Performance Indicators (KPIs) set out in our strategic plan.
36. Our stakeholder survey provides a rich source of data to assess our performance against a number of the KPIs. The survey involved seeking the views of Council and Committee members, staff, stakeholder organisations and registrants. We asked these groups a core set of questions to ascertain whether they think we are fulfilling our mission and living up to our values.
37. We expect the PSA to publish their annual performance review report at the end of June 2013. In their last report they said that we were meeting 22 of the 24 standards of good regulation against which we were assessed. We will be examining this year's report closely to learn from the PSA's comments about our performance and to see what we can learn from the good practice of other regulators.
38. In the last three months we have received three Learning Points Letters from the PSA and are considering the lessons learned. We will report on any required action in the Annual Report.

Progress against Core Performance Indicators

39. Annex 2 shows our performance against our Core Performance Indicators (CPIs).
40. We have set out below the areas where we have not met the CPIs and explains the reasons and what remedial action we are taking:
 - During the last quarter we received around 500 applications for business registration. We received and processed these applications in batches and so it was not feasible to process them in line with our CPI, which is one working day. We have now processed all the applications, with the average processing being 18 working days.
 - Our CPI to maintain a set of standards of competence and conduct which reflect current practice and protect the public was not achieved this quarter. We identified one area where it would be useful to provide additional guidance. This followed a FtP case where the Investigation

PUBLIC C19(13)

Committee requested more specific guidance on dealing with disabled patients.

- We have a target of achieving 97% positive or neutral news coverage. Our performance in Q4 improved on the previous two quarters, but only reached 90% as a result of some negative stories about the new CET system. It is worth noting, however, that most stories about CET were positive.
- Our CAPI to maintain effective provision of meeting support continues to be challenging. We achieved our target for sending out papers for Council meetings however did not achieve our target for sending out minutes within 15 days. The February minutes were sent out to Council within 18 days and the March minutes within 16 days. We aim to improve our performance in this area now that we have a full-strength governance team and that there are fewer Council meetings scheduled.
- We did not meet our target of achieving a budget variance of 5% or less. The Q4 financial report (provided as part of the quarterly review) gives more information about our financial performance during Q4 and the reasons for the budget variance.

Project performance

41. Council has previously asked for more substantial quarterly updates on a small number of specific projects (Continued Education and Training, Customer Relationship Management, Fitness to Practice Reform, Illegal Practice Strategy, Information Governance and Property). These are set out below. At its meeting in April 2012 Council agreed to the re-prioritisation of some projects to ensure the business plan was achievable, such as prioritising the CRM project over the property project.

Illegal practice strategy

42. The specific purpose of this project is to 'develop a clear strategy for preventing and addressing illegal practice'. It sits under our work stream for 'protecting the public from harm from illegal practice and supports our strategic aim to 'deliver effective, proportionate and fair public protection'. The initial project sponsor was Mandie Lavin, Director of Regulation and the project lead was Kiran Gill, Head of Legal Compliance. Alistair Bridge, Director of Policy and Communications, is now leading the project.

43. We have commissioned research from Europe Economics to inform our thinking. They have examined the risks to the public that flow from practices that can be illegal, including sale of zero-powered contact lenses and the supply of contact lenses online. Council will be considering the research findings and the implications for our strategy at the May 2013 meeting.

New CET Cycle

PUBLIC C19(13)

44. The specific purpose of this project is to 'implement a new CET Cycle from **1 January 2013**'. It sits under our work stream for 'ensuring the competence, performance and conduct of registrants'. It supports our strategic aim to 'deliver effective, proportionate and fair public protection'. The project sponsor is Mandie Lavin, Director of Regulation and the project lead is Linda Ford, Head of Education and Standards.
45. The CET project is now complete with **99%** of registrants passed the 2010-12 cycle by the **15 March 2013** final deadline. Stakeholder feedback regarding the new scheme has been largely positive and technical issues with the new IT system have been minimal. 11% of registrants have already met their peer review requirement.

CRM

46. The specific purpose of this project is to 'integrate all our systems on a CRM software and hardware platform to provide one screen access to registrant data, comprehensive management information and a better registrant experience at lower cost'. It sits under our work stream for 'modernising our information management into a single integrated framework'. It supports our strategic aim to 'ensure our systems and processes are efficient and cost effective'. The project sponsor is Josie Lloyd, Director of Resources. The project lead is Agnieszka Knapik, Head of Information Technology.
47. Council received a paper relating to the progress of the CRM project at their meeting of **20 August 2012**. Since that date, the contract with the supplier of the system has been signed. The design phase of this work is complete and the build phase is underway. The project board signed agreed this on **19 March 2013**. We are still anticipating that costs will turn out as predicted at the start of the project. It is still anticipated that the project will be completed in time for the start of the 2014/15 retention period in **January 2014**.

FtP Reform

48. The specific purpose of this project is to complete our current planned programme of FtP reform including new FtP Rules. It sits under our work stream for 'reviewing and improving our complaints process as an end to end process' and it supports our strategic aim to 'ensure our systems and processes are efficient and cost effective'. The project sponsor is Mandie Lavin, Director of Regulation and the project lead is Julian Carpenter, Head of FtP.
49. The current project will conclude with amended FtP Rules being finalised, agreed by the GOC Council and then passed to the Privy Council to oversee the Parliamentary approval process. The Rules are currently scheduled to be considered by the GOC Council at its **July 2013** meeting.

**PUBLIC
C19(13)**

Information governance

50. The specific purpose of this project is to 'review and update our Governance framework (incorporating the outcome of the committee review and review of internal decision-making) to ensure a robust decision-making process which is appropriately documented in a governance handbook (outlining relevant documents, and how, when and who makes decisions).' It sits under our work stream for 'ensuring open, transparent and robust governance'. It supports our strategic aim to 'ensure our systems and processes are efficient and cost effective'.
51. BDO Stoy Hayward LLP undertook a review of the GOC approach to information governance and security in **August 2012**. The report following this review contained a number of findings, and made a series of recommendations for the Executive to consider. The report was discussed by the Audit Committee on **8 October 2012**. Areas of recommendation included accountability structures for information governance; staff and contractor communication and training; data retention policies, and information risk management.
52. The Project Director (Philip Hallam) has completed our response to the recommendations of the report. Work is progressing on prioritising the actions and developing our work plan. We have undertaken a recruitment exercise for the Project manager for this work and have appointed Lisa Sparkes to the post for a period of six months from May 2013. She will be working closely with us on the project and will receive support from BDO as well as the project sponsor and director.

Relocation project

53. As previously reported to Council, this project has been deferred to 2013/14, to enable the Executive to continue to focus on resolving tenancy issues in 2012/13. Council received an update report on **27 March 2013** in relation to this project. Since that time contracts have been signed and sealed and lodged with our solicitor. We are awaiting confirmation of the terms of the agreement being met so that payment can be made to the tenant. We expect the tenant to move out sometime in **May 2013** but we have not received confirmation of the date yet. Any further progress in this matter will be reported verbally to Council.

Standards

54. The Standards Review project was deferred until the 2013/14 Business Plan. Recruitment is underway for a Standards Manager to support the Head of Education & Standards so she can resource the review. In the meantime discussions are continuing with other regulators to explore areas of collaboration and a programme of stakeholder engagement activities are planned for June and July 2013.

Q4 FINANCIAL REPORT

55. The draft outturn management accounts for the year ended **31 March 2013** are attached as **Annex 3**. The full year income is **£5.84m**, above budget by **£166.3k** and this includes additional income from Bodies Corporate. Full year expenditure is **£6.48m** including amortisation and depreciation. The overall draft result at **31 March 2013** is a deficit of **£640.7k** against an original budgeted surplus of **£514.6k**.
56. The reasons for this variance are analysed in more detail below, and the impact of these variances is fully reflected in the full year draft results. These figures form the basis for the financial statements which will be audited during May 2013 and are stated **before** any transfers to/from reserves.

Income

57. Corporate body registrations were higher than budgeted and contributed additional income amounting to **£136k** for the year. Total income of **£5.84m** was **£166.3k** higher than budgeted.

Policy & Communications

58. A new directorate was created in 2012/13 to better support the organisation's work in the fields of governance, policy and communications. This was a development that took place after the budget for **2012-13** was set and therefore has resulted in a negative variance of **£56k** for the year. Expenditure on external consultancy advice has contributed to the negative variance in the Policy area of **£55k**. The new directorate team are planning to undertake work in-house to reduce the need for external consultancy wherever practical in future.

Regulation

59. The main factor in the negative variance of **£880k** in this area is in Fitness to Practice (FtP) expenditure, where costs for the year were **£1.51m**, **£821k** higher than budgeted. Legal costs have risen dramatically in **2012-13** compared to the prior year, mainly due to two factors: the continued upward trend in number of referred cases and the complex and escalating nature of a relatively small number of registrants' cases.
60. This dramatic increase in costs reflects the significant impact of a small number of high cost cases. In **2012-13** the highest five registrant cases costs are **£169.1k** against the **2011-12** full year figure of **£93.8k** There has been a steady increase in hearings for interim orders (IO), IO reviews, appeals and restorations of some **27%** over the last year (38 in 2012, 30 in 2011 and 27 in 2010). This equates to a **41%** increase over the 2 year period. Costs also include 3 appeal cases, and provision for two judicial reviews.

**PUBLIC
C19(13)**

61. Action to mitigate the costs in this area include more regular case reporting from the solicitor panel firms and case cost limits on each externally instructed case. Instruction letters for new cases have been amended to require earlier notification of complexity or other potentially costly legal issues. Management information and case monitoring processes around the use of external law firms have been reviewed and are being managed in a more disciplined way so that we are better able to forecast the costs of each stage of the FtP process. Controls on referrals and authorisation of case costs above fixed fees have also been tightened.
62. Ongoing savings have been realised in respect of transcription, which is no longer being undertaken unless requested rather than for all hearings as a matter of course.
63. The full year figure for FtP investigation costs is **£1.51m**, and of these costs a net transfer of **£250k** will be made from the legal costs contingency reserve. This is based on the maximum funding available for costs identified which meet criteria previously set by Council but retaining the legal contingency reserve at **£750k**.
64. Costs for the year in Education & Standards amount to **£782k** against a budget of **£793k**. The positive variance to budget of **£11.5k** is due to changes in the timing of consultancy, CET programme management costs, and lower than budgeted member expenses.
65. Expenditure in Registration is higher than budget by **£22.1k** for the year and includes the extra resources which were needed to process corporate registrations. Criminal prosecution costs total **£159.7k** against a budget of **£132.3k** for the year included additional staff resource required to cover a period of long-term sickness. FtP hearings costs are **£22.7k** above budget for the full year due to additional Counsel fees and unbudgeted additional costs to accommodate two hearings externally.

Resources

66. The Human Resource area was budgeted for **2012-13** in a way which left the department inadequately resourced to deal with a programme of recruitment, restructuring and vital updating of policies and processes. This resulted in the need to appoint interim staff to undertake this programme of work. Costs for the year in this area of **£514.7k** are above budget by **£281.8k**. It has been recognised that the way the department was resourced was not the most cost effective, although savings of approximately **£56k** on recruitment agency fees on senior appointments have been achieved.

PUBLIC C19(13)

67. The appointment of a new Director of Resources has addressed the resourcing issue for the coming financial year, and this post will provide the necessary support and guidance in the Human Resources function in future.
68. The negative variance to budget in the facilities department of **£9.6k** is due to additional staff support in dealing with in-house hearings, and the negative variance in the finance department of **£48.6k** is due to unbudgeted temporary staff cover earlier in the financial year and the need to write off certain balance sheet items in preparation for the audit. Ongoing savings have been realised in respect of the insurance arrangements which carry forward into **2013/14**, and will amount to approximately **£20k** for a full year.

RISK REPORT

69. A revised risk management strategy and process was agreed and adopted by Council in February 2013 and is being implemented. The process includes monthly review of the risk register by Heads of Departments and Senior Management. The strategy will be reviewed again as part of the regular review of such items by our new internal auditors Moore Stephens who were appointed in February 2013.
70. The Senior Management Team (SMT) has reviewed the Corporate Risk Register at each of its meetings since October 2012. There are currently 17 corporate risks identified. In the opinion of the Executive, two of the identified risks have increased their risk level over the last three months, six risks have decreased and the others remain at the same level.

COMPLIANCE REPORT

71. The Audit and Risk Committee discussed and approved the workplans for both the internal (Moore Stephens) and external auditors (Crowe Clark Whitehill), at its meeting 18 April 2013.
72. The Committee also approved the Accounting Policies which will be used when preparing the financial statements for the year ending 31 March 2013 and made a number of revisions to the Scheme of Delegation for Financial Management.
73. In addition, The Committee considered the third report prepared by Morgan Cole LLP who have audited annually a sample of the decisions made by the Investigation and Fitness to Practice Committees (see Regulation report below). The audit is undertaken to assess whether decisions taken are well reasoned, consistent, protect the public and maintain confidence in the profession. The most recent audit report identified four learning points, which have been fed back to the Investigation Committee and staff as appropriate. The Executive are currently considering the nature and scope of this audit work in the future. The

PUBLIC C19(13)

Committee noted the management responses and learning points and there are no specific issues which the Committee felt needed to be raised with Council. The findings of the report demonstrate that fitness to practise decisions at the initial and final stages of the process comply with the eighth FTP standard of the Professional Standards Authority's Standards of Good Regulation.

74. Council will recall that the Audit Committee expressed some concern about the lack of progress being made in relation to a number of action points at the **October 2012** Council meeting. It was reported in **February 2013** that considerable progress had been made in relation to all of the outstanding items. The Committee has received a further update from the Director of Resources which clearly advised on the actions and timescales for completing the various tasks. As a result the Committee is content that the Executive has completed all expected actions in accordance with the timeframes they agreed and currently considers that there are no additional issues which need to be brought to Council's attention. Remaining items on the plan have been incorporated into the business as usual workplan for the Committee.
75. As previously reported to Council, this section will be developed over the course of the year.

REGULATORY REPORT

Education

76. The **2010/12** Continuing Education and Training (CET) cycle ended on **31 December 2012**. Registrants registered for the full period of **1 January 2010 to 31 December 2012** were required to gain **36** general points and a further **18** specialty points where relevant. Registrants who did not complete the required amount of points by **31 December** are deemed to be in "shortfall" and were not able to complete their retention applications until such a time that they had acquired all shortfall points. Registrants, who failed to gain the relevant amount of points by **15 March 2013**, were removed from the register on 2 April for failure to complete their CET points.

Registration

77. The retention period for fully qualified registrants and corporate bodies ended on **31 March 2013**). In total, **19,305** individual registrants and **2089** company registrants completed retention. In total **96.9%** of registrants completed their retention applications by **31 March 2013**. This is a slight decrease from the previous year's **97.6%**; however this is accounted for by the CET removals. Of all renewal applications, **97.8%** registrants completed their applications online.
78. In comparison to the end of the previous CET cycle during the retention period of **2010/11**, **17.5 %** fewer registrants were removed this year than at the end of

**PUBLIC
C19(13)**

the previous CET cycle (**April 2010**). A total of **144** registrants have been removed from the registers after failing to apply for retention **2013/14**. In addition, **187** registrants have been removed due to failing to meet their CET points' target. This compares to **210** and **191** registrants respectively in **2010/11**.

79. There was an increase in the amount of withdrawal and retirement notifications received. This year we received a total on **222** withdrawal notifications (of these **87** were in a CET shortfall at the time of removal from the registers) and **87** retirement notices. During the **2012/13** retention period, **175** withdrawal notices and **57** retirement notices were received. In total, **18** registrants failed to complete their retention applications but have been retained on the statutory register for administrative purposes.
80. Since retention **2010/11** when the low income fee was made available, a total of **1836** registrants have applied for and been granted the low income fee for retention. This year there was a reduction in the number of registrants applying for the reduced fee. There were **653** applications in **2012/13** and 528 in **2013/14**.
81. We also received a total of **501** company registration applications during the retention period. These applications were received in batches of four to **234** applications. All companies were registered by the end of **March 2013**.

Fitness to Practise

82. Complaints: In the last quarter (as at **31 March 2013**), there were **113** investigations open which have yet to be considered by the Investigation Committee (IC), **46** in **2013**, **64** from **2012** and **5** from previous years. Of the latter, two are listed for the IC by June, one awaits the outcome of a criminal trial and the two have been directed by the IC to have a health assessment and a further investigation. In total, here has been an increase of approximately **25%** increase in the number of cases opened compared to the same period last year. If this trend continues it will have resourcing implications for both FTP staffing and meetings frequency for the Investigation Committee
83. Appeals: Of the cases referred by the Investigation Committee to the FTP Committee, **57** remained open (**as at 31 March 2013**), including one registration appeal and two High Court appeals (with one of is the latter scheduled to be heard on **16 May 2013**).
84. Reform: The current project to reform FtP conclude with amended FTP Rules being finalised, agreed by the GOC Council and then passed to the Privy Council to oversee the Parliamentary approval process. The Rules are currently scheduled to be considered by the GOC Council at its July meeting.

**PUBLIC
C19(13)**

85. Guidance: Guidance has been drafted to support decision makers and applicants involved in 'Rule 16 applications' – a review by the Investigation Committee of a previous referral, with a view to cancelling the investigation. The Guidance will be considered by the GOC Council at its **May 2013** meeting.
86. Quality assurance: In compliance with the eighth FTP standard of the Professional Standards Authority (PSA), the GOC commissions an annual audit of FTP decisions made at the initial and final stages of procedures, to demonstrate they are well reasoned, consistent, protect the public and maintain confidence in the profession. The most recent audit report (undertaken by Morgan Cole) identified four learning points, which have been fed back to the Investigation Committee and staff as appropriate. Their review of the previous year's learning points found no reoccurrence of the issues they had raised. A copy of the report's executive summary has been circulated to Council.
87. Investigation Committee: An advertising campaign was launched on **24 April 2013** to recruit a dispensing optician member (DO) of the Investigation Committee, whose constituent membership is laid down in Rules and requires two DO members (one to be quorate). This is a cross-team task, involving Governance, Human Resources, Communications and FtP.
88. Training: The annual training to the FtP Committee will take place on **30 October 2013** and involve a mix of regulatory case law updates and group work on scenarios created to illustrate and test some recurring and difficult features of cases at the hearings stage.

ADVISORY COMMITTEE UPDATE

89. During the last quarter the following Statutory Advisory Committees have held meetings: the Education Committee, the Companies Committee and the Registration Committee.
90. At their meeting on **28 February 2013** the Education Committee:
- received an update on current work streams and agreed, in regard to the Handbooks review, that they would wish to see optometry handbooks consistently map the journey from training providers to examinations;
 - discussed the Accreditation and Quality Assurance visits and considered the visit reports;
 - discussed the ABDO FBDO winter Examinations; and
 - noted the results from the GOC Optometry Annual Monitoring process for **2011/12**.
91. At their meeting on **7 March 2013** the Companies Committee discussed:

PUBLIC C19(13)

- the issue of Indemnity Insurance;
 - the draft Guidance on Declarations; and
 - the impact of the Francis Inquiry across healthcare regulators.
92. The Registration Committee met on **24 April 2013** and considered the following:
- the draft declarations guidance;
 - Registration Guidance and process documentation;
 - a paper on business regulation; and
 - a paper on the review of Student Regulation.

HUMAN RESOURCES UPDATE

Recruitment Campaigns

93. There are a number of recruitment campaigns which have been developed or undertaken during the last quarter, and these include:
- Registration Assistant - appointed
 - Registration Officers x3 – appointed
 - Investigations Caseworker x2 – appointed
 - Head of Governance – appointed
 - Information Governance Project Manager – offer made

Human Resources Policies and Procedures

94. A completely revised set of HR policies is being developed; progress on them is as follows:
- Tranche 1 (Annual Leave, Special Leave, Interim Pay and Probation) has been completed and policies are now published on the intranet;
 - Tranche 2 - (Standards of Conduct, Attendance and Performance, Grievance, Sickness Absence, Employment References and No Smoking) has been completed and published;
 - Tranche 3 – (Maternity, Paternity and Adoption; Recruitment; Whistleblowing) has been completed and published with the exception of the Whistleblowing policy which is being further developed;
 - Tranche 4a – (Managing Change and Redundancy; Training) which has been launched and is live on the intranet;
 - Tranche 4b – (Flexible Retirement) is undergoing further consultation with SMT and HODs and will be consulted with staff shortly;
 - Bullying and Harassment; Health and Wellbeing (Stress, Drugs and Alcohol) has been consulted with SMT, HODs and staff and is now launched and live on the intranet
 - Tranche 6 – (Flexible Working and flexitime) is in development at present.
95. These policies have been launched to form the substance of an electronic staff handbook which is available on our intranet for staff.

**PUBLIC
C19(13)**

96. Development of our new Health and Safety policy is also underway at present. The policy has been drafted and is going through its consultation and sign off processes with SMT and HODs. This constitutes significant progress in an area which the Council had identified as having the potential to create risk.
97. A set of core common behaviours have been developed to accompany our new values. These were developed with input from both staff and Council members. These will be presented to Council at its meeting in May 2013, and subsequently built into appraisals from the Executive and council members.

Staff Changes

98. Within the Policy and Communications directorate, Nicola Ebdon was appointed as the new Head of Governance and took up her post on **7 March 2013**. Lisa Harmshaw and David Sykes have been appointed as governance managers on a permanent basis as from the start of **April 2013**. This team will oversee strategy and business planning, manage management information systems and reporting and provide support to the senior management team as well as governance. Angharad Jones and Marie Bunby have been appointed as policy managers on a permanent basis. Marta Poczowska, our research analyst, will be returning from maternity leave in mid-**May 2013**. Simon Grier has been appointed as the Communications Manager on a permanent basis, having been acting up in this role since **October 2012**.

STAKEHOLDER AND COMMUNICATIONS REPORT

Stakeholders and registrants

99. Engaging with registrants around enhanced CET remains a priority. We exhibited at both Optometry Tomorrow and Optrafair and spoke to hundreds of registrants about the new scheme. Linda Ford will speak about the new scheme at the BCLA Conference on 7 June 2013.
100. On the whole registrants have been extremely positive about the principles of the new scheme, with staff mainly answering technical questions about the new rules and IT system. We are sending a booklet to all registrants providing guidance on the scheme.
101. We will exhibit at the annual Trading Standards Institute conference during **June 2013**.
102. On **24 April 2013** Sarita Khaira (Investigations Manager) and Simon Grier (Acting Communications Manager) met with NHS Protect to discuss information sharing.

**PUBLIC
C19(13)**

103. Since the last quarterly review, Samantha Peters (Chief Executive and Registrar) has met with: David Scott-Ralphs (CEO) and Paula Spinks-Chamberlain (Information and Advisory Director) of SeeAbility (**15 February 2013**); the Law Commission (**6 March 2013**); Jackie Smith, Chief Executive at the NMC (**9 April 2013**); Chris Kenny - Chief Executive Legal Services Board (**11 April 2013**); Fran Jones, FtP Panellist (**23 April 2013**); Kathy Evans, Chief Executive, Royal College of Ophthalmologists (**30 April 2013**) and also attended the Chief Executive Steering Group (CESG) meeting for regulators (**5 February** and **16 April 2013**); the PSA 2013 Symposium (**21-22 February 2013**) and the Scottish Government Regulators' Liaison Group meeting **12 March 2013**).
104. Samantha and Gareth have also met their counterparts from both ABDO (**20 March 2013**), the AOP (**25 March 2013**), and the College of Optometrists (COO) (**7 May 2013**) in this time period.
105. The quarterly all Staff Meeting took place on **27 February 2013**. The meeting also covered items including CET, the Policy & Communications team and our work to improve our environmental and cost efficiency. Gareth Hadley attended this meeting, to meet staff.

Nations

106. The following update has been provided by Brian Coulter in respect of Northern Ireland. Brian will attend the Optometry Northern Ireland AGM on **13 May 2013** and provide a verbal update to Council.
107. The following update has been provided from Morag Alexander in respect to Scotland:
- 107.1. the **March 2013** meeting of the NHS Education for Scotland (NES) Optometry Advisory Group took place at the newly opened West Of Scotland Community Optometry Teach and Treat Clinic (WOSCOTT) in Glasgow. Developments discussed or reported at the meeting included:
- the peer discussion facilitator courses delivered by LOCSU and co-funded by NES and LOCSU have proved very popular. In addition to the two courses already delivered, a third course has now been arranged for April;
 - NES is funding the new 53-place Independent Prescribing course at Glasgow Caledonian University which began in March;
 - the NES-funded CPD (sic) survey has now been completed. The report, which will be available soon, will inform the new NES training programme from September 2013 to June 2014;
 - a research report commissioned by NES concluded that the change in CET requirements from January this year "presents a substantial opportunity as those currently reliant on online training will need to seek more face to face engagement". It also

- concludes that NES Optometry has a positive reputation among users of its services and has few barriers to use other than awareness;
- more information about NES developments, including the July Newsletter, is available on the website; and
 - the Scottish Intercollegiate Guidelines Network (SIGN), the equivalent in Scotland of NICE, has established a new committee to develop glaucoma guidelines. The estimated date for publication of the guidelines is Summer 2015.
- 107.2. Optometry Scotland will hold its AGM in Glasgow on **23 May 2013**;
- 107.3. The NES Optometry Annual Conference will take place on Sunday **6 October 2013**, venue to be confirmed; and
- 107.4. The annual regulatory conference organised by the Scottish Government Health Department, which is attended by regulators from across the UK, will take place in November 2013. The final date and venue are still to be decided. This event is now developed in partnership with the UK regulators, including the GOC.
108. The following update has been provided from Fiona Peel in respect to Wales:
- 108.1. On **13 March 2013** Optometry Wales held its biannual meeting for Council members and stakeholders. It has elected a new Chairman - Norma Davies from South Wales. Sali Davies now works full time for the newly incorporated company of OptWal. Her priorities for the coming year will be to write a business plan, encourage Assembly Members to visit optometrists' practices, develop position papers, share best practice with regional optometric committees and measure the outcomes of the new Welsh Government Eyecare Plan;
- 108.2. the consultation on the All Wales Eye Care Plan was due to conclude in March but has been extended by a few weeks. The document outlines a five year plan to improve eye health care for the people of Wales that will:
- Prevent poor eye health and visual impairment (including reducing levels of avoidable sight loss);
 - Improve eye health outcomes;
 - Ensure early identification and intervention;
 - Provide high quality, efficient services; and
 - Ensure patient focused delivery of integrated services. See <http://wales.gov.uk/docs/dhss/consultation/121219documenten.pdf> for full version. There are clear links in the pathways between optometry and ophthalmology. In light of the Francis Report GOC may wish to consider how that could affect regulation.

PUBLIC C19(13)

- 108.3. Barbara Ryan, the chief optometric advisor to the Welsh Government, is ensuring an organised implementation plan for the new Eye Care Plan for Wales;
- 108.4. the Eyecare Wales website is being updated;
- 108.5. the former WECI and PEARS streams of work are now jointly considered under WECS (Wales Eye Care Service);
- 108.6. RNIB hope to have an active role in National Eye Health Week in Wales this September. The 50+ health check will be an on-line health check in Wales and there will be guidance to have a sight test on a regular basis;
- 108.7. the WOPEC led peer review process is often oversubscribed; it is proving very successful and popular; and
- 108.8. there are two new optical advisers appointed to Public Health Wales so that the three regions are better covered. Linda Ford spoke to the group about the implementation of the new CET scheme - in particular about peer review. It was warmly welcomed and members were assured by the value of the process as well as resolving some implementation problems.

Other health regulators

- 109. All healthcare regulators, but especially the GMC and NMC, are subject to recommendations from the Francis Inquiry and the Government's response to it.

Press engagement

- 110. The trade press continues to heavily feature enhanced CET. *Optometry Today* interviewed Linda Ford, Head of Education and Standards, at Optrafair; we were expecting this to be published on their website in early **May 2013**.
- 111. Gareth Hadley was interviewed for the **May 2013** issue of *Dispensing Optics* about his priorities for the role and some of the key projects in the GOC business plan.
- 112. Other topics of press interest since the last Council meeting have included body corporate and student registration, the retention deadline and an FTP hearing involving Vision Express.

MP letters

- 113. We have not received any MP letters since the last Council meeting.

ATTACHMENTS

Annex 1: Key Performance Indicators

Annex 2: Core Activity Performance Indicators

Annex 3: Management accounts for the period ending 31 March 2013

Annex 1: Key Performance Indicators

We will achieve the Vision through (Strategic Aims)	Our key performance indicators are (KPIs)	Measurement methodology
Delivering effective, proportionate and fair public protection (M)	We consistently achieve compliance with the standards in the PSA Performance Review and Initial Stages Audit, Section 29 scrutiny and Learning Points Letters around FtP cases, and have no adverse comments in legal proceedings/appeals/judicial reviews	PSA assessments, S29 referrals, Learning Point Letters and High Court judgments will be evaluated and action plans compiled and reported
	80% of members of the public who have contacted the GOC are satisfied with access to and responsiveness of GOC	Survey satisfaction of members of the public who have used GOC services
Basing our policy and regulatory practice on sound evidence (K)	At least 80% of stakeholders consider that our policies are based on sound evidence	Annual stakeholder survey
Supporting our staff, Council and committees to deliver our organisational goals (P)	At least 80% of our people believe that they are well supported to deliver our organisational goals	Annual survey of Council, staff and committee members on their perception of a range of issues, and awareness of the GOC's vision, mission and strategies
Ensuring systems and processes are efficient and cost effective (E)	Budgets are delivered to within 5% of prediction	Variance reporting monthly
	We aim to be in the top quartile of benchmarked health regulators for value for money	Comparative data will be considered from other regulators which are part of the CHRE benchmarking initiative and any other benchmarking activities
	Projects are delivered on time and to budget	Every project will have a defined timeline, and progress tracked
Engaging and working effectively with stakeholders (S)	Stakeholders consider that the GOC are principled, effective and provide value for money	Annual stakeholder survey

Annex 2: Core Activity Performance Indicators

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Registration						
Processing applications for registration, retention and restoration of optometrists, dispensing opticians, students and bodies corporate.	Average number of working days from receipt of application to process registration applications	3 days	1.7	3.3	3.6	1.5
	Average number of working days from receipt of application to process restoration application	5 days	3.8	2.8	2.0	3.5
	Registrants completing retention applications online	98%	93.5%	99.3%	N/A	97.8%*
Maintaining and updating the GOC's registers.	% of requests for applications for registration processed within one working day	33%	53.3%	34.8%	54.5	59%
Providing registration information to stakeholders	Average number of working days from month end to distribution of amendment lists	2 days	2.6	2.0	1.7	2.3**
	Average number of working days from receipt of Letter of Good Standing (LGS) or Certificate of Current Professional Status (CCPS) application to process request	5 days	2.8	2.5	1.6	4.5

C19(13)

*From January to March 2013 we received a large quantity of company registration applications (501). As these were received and processed in batches, they fall outside our standard KPI figures. The average processing time for these applications between January and March 2013 was 18 days and none were processed within 1 working day.

**Average number of working days from month end to distribution of amendment lists is above the expected level. Due to staffing changes and time restrictions due to retention, there was a delay in sending out the distribution list in March. The list was sent out within 2 working days in both January and February.

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Fitness to Practice						
Investigating complaints about a registrant's fitness to practise for consideration by the Investigation Committee	% of cases prepared to consideration by the Investigation Committee within nine months of receiving the complaint	90%	100%	98%	100%	100%
Preparing cases for a formal hearing before the Fitness to Practise Committee	% of cases where notice and other documents have been served on the Hearings Manager within seven months of the referral of the case by the Investigation Committee	80%	N/A	83%	100%	75%
Producing third annual FtP report	Positive feedback from stakeholders about the Annual Report	N/A	N/A	N/A	N/A	N/A
Formal hearings process	FtP cases to be heard within 9 months of receipt by the Hearings Manager	80%	100%	100%	29%	82%

C19(13)

	Listing to be done within 10 working days of receipt	90%	100%	100%	100%	100%
	Interim Orders to be heard within 4 weeks of receipt	90%	100%	100%	100%	100%
	Review cases to be listed within 6 weeks of order expiry	80%	100%	100%	100%	100%
End to end complaints process	Consolidated target from the opening of a case to final disposal	TBA	N/A	N/A	N/A	N/A

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Legal Compliance						
Investigation and Prosecution of criminal offences under Part 4 of the Opticians Act	Cases are closed because the illegal practice ceased without criminal proceedings	65%	96.6%	Target met	95%	93.84%
	Prosecutions are successful: the defendant is convicted or the illegal practice ceases	75%	N/A	Target met	N/A	N/A
	Cases are concluded without the instruction of external lawyers	85%	100%	Target met	100%	99.19%
	Cases are concluded within 2 years of the GOC receiving the complaint	85%	98.8%	Target met	92%	95.96%

C19(13)

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Education & Standards						
Processing applications for registration from EU and non EEA applicants	Average time (in no of days) to evaluate EU Directive Applications.	14 days	20 days	16 days	14 days	14 days
Conduct Accreditation and QA Visits to training institutions and awarding bodies	Time taken to produce Accreditation Visit Report (from visit date to issue of draft visit report)	14 days	18 days	15 days	15 days	14 days
	Response rate to issues arising from accreditation visits or annual monitoring submissions (time between receipt of issue to agreement of action plan)	7 days	N/A	N/A	N/A	5 days
	% response rate to accreditation feedback questionnaires	85%	N/A	85%	86%	N/A
Maintain an effective Scheme for CET	Percentage of registrants on target to meet their general CET requirement	96%	68.1%	67%	96%	99%
	Percentage of registrants on target to meet their specialist therapeutic CET requirement	96%	64.3%	68%	99%	100%
Maintain a set of standards of competence and conduct which reflect current practice and protect the public	No Standards needing to be changed as a result of a challenge to or failure to justify standards of competence or conduct	0	0	N/A	N/A	1*

*Investigation Committee have requested review on guidance on dealing with patients with disability as current standard felt to be not specific enough during recent FTP case

C19(13)

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Strategy & Policy						
Leading development, oversight and reporting of performance against the GOC's Strategic and Business Plans, including identification of key strategic opportunities	% of KPIs/CAPIs gathered and reported on time	100%	100%	100%	100%	100%
	% of projects proceeding on time	We will develop a target as part of improving our system of planning and reporting.	N/A	N/A	N/A	N/A
Providing Council with advice on key strategic and policy issues affecting the GOC, through preparing and presenting research, consultations and analysis.	Council members consider that GOC policy advice is high quality and supports informed and evidence-based decisions.	Will be tested through stake holder survey. This will provide a bench mark and enable us to set a target.	N/A	N/A	N/A	65%*
Leading the GOC's public affairs work - contributing to policy development and engaging with stakeholders in UK, European and international forums and processes.	Number of public affairs activities (including consultation responses, engagement with other organisations, significant external meetings etc.)	We need to develop a target that enables us to assess our impact and whether we are focusing on the right priorities	4	4	2	2**

*65% of Council and Committee members reported that the advice provided by the executive is of high quality. 35% Council/committee members agree, 59% neither

C19(13)

agree nor disagree and 6% disagree that the advice provided by the executive supports evidence-based decision making by Council. Due to the sample size this is a collective view of Council and Committee members. We continue to seek feedback specifically from Council after meetings through the survey conducted by the Governance team.

**The GOC responded to 2 consultations (see paragraphs 11-13 of this report), met with a number of stakeholders including the PSA, the Law Commission, ABDO and AOP.

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Communications						
Using media relations to promote all key developments to registrants, and manage our profile through media monitoring	Percentage of news coverage which is positive or neutral about the GOC (calculated according a points system based on content analysis).	97% positive & neutral	96%	83%	88%	90%
Supporting the development of effective relationships with key stakeholders	Level of awareness and attitudes of key stakeholders about the GOC as an efficient and effective regulator	Will be tested through stake holder survey. This will provide a bench mark and enable us to set a target.	N/A	N/A	N/A	53% to 79%*

*I believe the GOC fulfils its mission – agreed by:

- 53% of registrants
- 64% of stakeholders
- 71% of Council/committee
- 79% of staff

C19(13)

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Governance						
Effective decision making process	Attendance of Members at Council meetings	80%	91.6%	100%	100%	91.6%
	Council members' satisfaction with quality of papers (quarterly survey)	80%	100%	N/A	100%	100%
Management of Council and Committee member recruitment, appointment, induction, appraisal, and evaluation	Percentage of Appraisals completed annually (prior to re-appointment decisions)	100%	N/A	100%	N/A	N/A
	Percentage of Council and Committee appointments and re-appointments made by deadline	100%	N/A	N/A	N/A	100%
Effective provision of meeting support	Minutes out within 15 days, papers issued within 5 days prior to meeting	100%	M = 50% P = 50%	M = 100% P = 100%	M = 50% P = 100%	M = 0%* P = 100%
	Percentage of Council satisfied with the provision of meeting support (quarterly survey)	80%	87.5%	N/A	91%	88.7%

*February Council minutes were circulated in 18 days and March Council minutes in 16 days

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Human Resources						
Managing recruitment, including staff, Council and Committee members, FtP panellists and case examiners; managing performance management processes	Likely to include quarterly absence rates, disciplinary and grievance cases, turnover, new hire rates (public sector comparison in brackets)	We will develop a target as part of improving our system of planning and reporting	N/A	N/A	5 leavers, 9 joiners. Turnover 7.4% (CIPD average 10.1) Average days sick leave 1.3 (CIPD average 7.9)	4 leavers 6 joiners Turnover 9.8% (CIPD average 10.1) Average days sick leave 1.22 (2.82 pa) (CIPD average 7.9)
Maintaining oversight of HR performance and policies, and providing support and advice to staff on HR and personal issues.	Dashboard to be developed in light of detailed design above and may also include staff survey results (e.g. temperature check)	We will develop a target as part of improving our system of planning and reporting	N/A	N/A	N/A	N/A

C19(13)

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Finance						
Formulating the GOC budget, reporting progress to budget holders and Council, and accounting for funds at year end	% variance from budget	5%	1%	22%	32%	25.6%
Supporting internal clients with advice and challenge on the financial implications of policy or operational proposals	GOC staff consider that the Finance Department provides valuable and effective advice on financial issues	Will be tested through stake holder survey. This will provide a benchmark and enable us to set a target.	N/A	N/A	N/A	82% and 64%

- *82% of staff agree that 'the finance team respond quickly with information I can rely on'
- *64% of staff agree that the assistance and support I receive from the finance team helps me to understand and manage the budget

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
IT						
Managing the GOC's IT systems, resolving technical issues and providing IT support for staff.	% Helpdesk requests satisfied within five** working days	99%	98%	99%	95%	99.9%
	% Web uptime	99%	99%	98%	99.9%	99.9%
	% Systems uptime	99%	99%	97%	98%	100%

C19(13)

Activity	Performance Indicators	2012/13 target	2012/13 1/4ly Reviews			Current
			Q1	Q2	Q3	Q4
Facilities						
Managing GOC facilities and maintaining a safe and secure office environment for staff and visitors.	Health and safety, and security incidents reported	1	1	0	0	0