



**Council**  
**4 February 2016**  
**Review of the *Osteopathic Practice Standards***

<b>Classification</b>	Public
<b>Purpose</b>	For decision
<b>Issue</b>	This paper outlines plans for engaging stakeholders in the process of reviewing the 2012 <i>Osteopathic Practice Standards</i> .
<b>Recommendations</b>	<ol style="list-style-type: none"><li>1. To agree the principles of the <i>Osteopathic Practice Standards</i> review.</li><li>2. To consider the pre-consultation approach.</li><li>3. To agree the timeframe for the review of the <i>Osteopathic Practice Standards</i>.</li></ol>
<b>Financial and resourcing implications</b>	The major costs of the review and implementation will be incorporated into the 2016-17 and 2017-18 budgets, minor costs will be incurred in this financial year.
<b>Equality and diversity implications</b>	Equality and diversity considerations have influenced the review planning process and we will undertake an Equality Impact Assessment in relation to the revised standards.
<b>Communications implications</b>	Communication plans are set out in this paper.
<b>Annexes</b>	None
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## Background

1. At its meeting of 12 November 2015, Council approved plans to initiate a review of the 2012 *Osteopathic Practice Standards*. It was agreed that the process for revising the current standards underpinning osteopathic practice would begin in early 2016 and would require desk research, engagement with stakeholders to ascertain the scope of necessary improvements, redrafting, and a formal public consultation on the revised standards prior to final approval.
2. It is recognised good practice that professional standards should be reviewed at approximately five-year intervals, to take account of changes in the law, society and public expectations, and developments in osteopathic practice and training.
3. The Council acknowledged that the 2012 *Osteopathic Practice Standards* succeeded in helpfully integrating the Code of Practice and Standard of Proficiency into a single document. The arrangement of standards into four broad themes or 'domains' also made the revised *Osteopathic Practice Standards* compatible and comparable with the standards of other health practices. The standards in this format have subsequently been embedded in osteopathic education curricula and practice, and underpin the structure of a revised CPD scheme for osteopaths, proposed and consulted on over the course of 2015.
4. Taking account of this, Council was of the opinion that revising and updating the *Osteopathic Practice Standards* requires a strategy that enables stakeholders to identify where improvements are needed, but as far as possible should avoid disrupting or undermining the overall structure.
5. Research<sup>1</sup> conducted in 2014 for the GOsC by Professor Gerry McGivern *et al* suggested that the majority of osteopaths are broadly familiar with the *Osteopathic Practice Standards* – and the standards themselves are not significantly different to those that apply to other health practices – but weaknesses in the supporting guidance may be undermining osteopaths' application of the standards in practice. The review of the *Osteopathic Practice Standards* will wish to explore this deduction and ascertain whether clearer guidance, rather than different standards, along with more educational resources, might be central to ensuring compliance and high quality practice.

## Discussion

### *Strategy for identifying revisions to the 2012 Osteopathic Practice Standards*

6. By monitoring the external environment and changes in the law and public expectation, the GOsC has already identified likely revisions to the *Osteopathic Practice Standards* in relation to:
  - a. The duty of candour

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<sup>1</sup> <http://www.osteopathy.org.uk/news-and-resources/research-surveys/gosc-research/research-to-promote-effective-regulation/>

- b. Raising concerns/safeguarding (including a new duty on health professionals to report Female Genital Mutilation)
- c. Changes in the law relating to consent
- d. Confidentiality and implied consent
- e. Advertising.

As part of a review process we will consider how best to incorporate or strengthen these areas within the *Osteopathic Practice Standards*, also ensuring compatibility with the standards of other health practices.

- 7. Simultaneously, we intend to conduct desk-based research to identify and address weaknesses in practice and the need for improved support, including reviewing common ethical enquiries, trends in complaints and claims against osteopaths, public-patient feedback, the current standards of other regulated health practices, and relevant research, including the McGivern study and GOsC public-patient surveys<sup>2</sup>.
- 8. The third, important, strand of the proposed review process will be a 'call for evidence' from stakeholders. The McGivern research revealed that some osteopaths misinterpret or misunderstand some osteopathic practice standards, or believe them to be unworkable; we need to better understand this phenomenon as a precursor to revising standards. To this end, we propose to work closely with osteopaths, osteopathic organisations and training providers to identify where enhancements and clarification or additional resources relating to the *Osteopathic Practice Standards* are needed. An outline of our proposed strategy for engaging with stakeholders is set out below.

#### *Scope of pre-consultation engagement*

- 9. It is proposed that between February and June 2016, the GOsC will involve stakeholders, particularly all sectors of the osteopathic profession, in the *Osteopathic Practice Standards* review process, maximising the opportunities for osteopaths and others to highlight potential improvements to the standards and supporting guidance, and to identify where there may be a need for associated learning resources provided by the GOsC.
- 10. Target audiences will include:
  - Osteopaths
  - The undergraduate/postgraduate osteopathic education sector

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<sup>2</sup> <http://www.osteopathy.org.uk/news-and-resources/research-surveys/gosc-research/public-and-patient-perceptions/>

- Osteopathic organisations, including the Institute of Osteopathy, the National Council for Osteopathic Research, advanced practice groups and local/regional osteopathic CPD groups
  - Providers of professional indemnity insurance to osteopaths.
11. We intend to seek input from osteopathic patients via the GOsC Public Patient Involvement group and our links with the national Healthwatch network (England), Patient and Client Council (Northern Ireland), Scottish Health Councils and Community Health Councils (Wales). Through our professional networks we anticipate inviting views also from partner bodies in the healthcare regulatory sector.

*Scope of the 'call for evidence'*

12. The primary outcome of this pre-consultation review exercise is to gather from stakeholders views on both the standards and guidance contained in the 2012 *Osteopathic Practice Standards* in relation to a small number of key questions, for example:
- What works?
  - What doesn't work/how could we make it work?
  - What is missing?
  - What supporting resources would be helpful?
  - Other comments?

*Engagement mechanisms*

13. We propose to use a multi-media approach to informing and engaging stakeholders in this 'call for evidence' exercise. Osteopaths and others will need to be encouraged to review the 2012 *Osteopathic Practice Standards*, and we are looking to develop/offer a simple interactive, online presentation of the OPS, that enables respondents to easily annotate or attach comments to the current text.
14. GOsC engagement events scheduled for the first half of 2016 will provide platforms for eliciting feedback, including:
- GOsC/osteopathic educational institution seminars and meetings with individual colleges.
  - GOsC-hosted Regional Communications Network forum event on 18 March 2016, involving local osteopathic groups and national osteopathic organisations representing all sectors (Council of Osteopathic Educational Institutions, National Council for Osteopathic Research, Osteopathic Alliance, Institute of Osteopathy).

- Cross-regulatory engagement meetings.
- Scheduled meetings of the Osteopathic Development Group organisations, the National Council for Osteopathic Research, and providers of professional indemnity insurance to osteopaths.
- Webinar for registrants.
- GOsC website (registrant zone and public website) facilities for reviewing the *Osteopathic Practice Standards* and submitting views/suggestions to the GOsC.
- We will encourage peer discussion of potential enhancements to the current standards within osteopathic forums such as local and regional group events, practice meetings, osteopathic online forums and blogs, to produce collective responses.

### *Communication approach*

15. We will use all our communications channels to ensure a high level of awareness among stakeholders of our 'call for evidence'. This will include:

- Tailored information on the GOsC websites, highlighted on the home pages, possibly including a short video introducing the review, outlining the 'call for evidence', encouraging engagement, and indicating mechanisms for submitting views.
- A dedicated email to all registrants and osteopathic organisations, launching the 'call for evidence', and identifying mechanisms for submitting feedback.
- Email invitation to non-osteopathic stakeholders.
- The GOsC monthly e-bulletins to registrants (five issues, January to May 2016) will repeatedly highlight the review, focussing each edition on a different aspect of the current OPS.
- *the osteopath* magazine: the two issues for publication in this period will focus on different elements of the *Osteopathic Practice Standards*, e.g. February/March – communication and patient partnership, knowledge skills and performance, April/May – safety and quality in practice, professionalism.
- GOsC social media: Facebook and Twitter.
- GOsC flyer for inclusion in administrative correspondence with registrants, e.g. renewal of registration correspondence.
- Partner organisations – seek assistance of the Institute of Osteopathy to raise awareness among membership (website and *Osteopathy Today*); OEIs to disseminate information via college intranets; Osteopathic Alliance member organisations, etc.

- Targeted emails to members of the GOsC Public-Patient Partnership Group, the Healthwatch network, Welsh Community Health Councils, Northern Ireland Patient and Client Council, Scottish Health Councils.
- GOsC online and print media: proposed message themes for life of the review:
  - January/February: Promoting awareness of review, look at the OPS
  - March: Talk with your colleagues
  - April: Tell us what you think
  - May: Tell us what you think, deadline.

*The work of the Osteopathic Development Group and the Institute of Osteopathy*

16. Both the Osteopathic Development Group and the Institute of Osteopathy are currently undertaking work that has a direct bearing on potential revisions to the current *Osteopathic Practice Standards*, and the GOsC will wish to liaise closely with these partner organisations. The Osteopathic Development Group is developing a set of service standards that are intended to complement GOsC standards of osteopathic practice and conduct. Alongside this, the Institute of Osteopathy is developing a 'Patient Charter' for use by members. Along with the *Osteopathic Practice Standards*, these initiatives should serve to improve public awareness of the quality of osteopathic care; it is essential, therefore, that these initiatives are compatible.

*Developing the consultation draft*

17. The call for evidence – as outlined above – is likely to generate a substantial amount of information for consideration. We believe it important that this feedback is considered by a reference group wider than the GOsC and we see significant advantages in establishing a multi-stakeholder reference group to support us in developing new draft standards:
- The active contribution of a range of stakeholders should minimise bias or omissions and will help us to ensure that the draft standards developed for consultation are well-rounded.
  - A multi-stakeholder reference group is likely to increase stakeholder awareness of key issues and proposed changes to standards, disseminating understanding through their own networks and potentially increasing the level of 'buy-in'.
  - Such a reference group can be expected to ensure a reliable equality impact assessment.
  - The involvement of a multi-stakeholder group will counter perceptions that standards and guidance have been developed from within an 'ivory tower'.

- A multi-stakeholder reference group will serve to foster wider partnership working and collaboration on a core regulatory element – the standards by which all osteopaths commit to practising.

18. The drawback of engaging a multi-stakeholder group can be 'drafting by Committee' and the potential for a disjointed document. However, this can be mitigated by ensuring there is an appropriate policy lead for the project, able to synthesise and distil a range of issues to the satisfaction of the reference group.

*Parameters for the review*

19. All proposals for revisions to the standards will in due course be subject to full public consultation. However, at the outset, it is important to set the scope and parameters for the review.
20. In 2010, when we consulted extensively on the *Osteopathic Practice Standards*, 'all stakeholder groups were generally supportive of bringing the existing *Code of Practice* and *Standard of Proficiency* together in one document' (see *GOsC Response to the Osteopathic Practice Standards* consultation, November 2010, page 3, available on the GOsC website: closed consultations). Since that time, there has been no indication that bringing the *Code* and *Standard of Proficiency* together has given rise to problems for any stakeholders. Indeed, bringing these together has ensured a holistic approach, more logically combining competence and ethics in a single set of standards. This has led to a renewed emphasis on professionalism and ethics in education, illustrated by our *Guidance on Osteopathic Pre-registration Education* and revised quality assurance processes, which are now based on both the *Code* and the *Standard of Proficiency*.
21. Indications from our stakeholders and policy Committees, GOsC research and recent work on a revised CPD scheme, strongly suggest that it would not be helpful at this time to completely revise the structure of the *Osteopathic Practice Standards*, which currently comprises four themes: Theme 1 – communication and patient partnership; Theme 2 – Knowledge, skills and performance; Theme 3 – Safety and Quality; Theme 4 – Professionalism. In developing the 2012 *Osteopathic Practice Standards*, the GOsC undertook a detailed review of the themes used in the standards of other regulators, confirming that the themes adopted by the GOsC are current and compatible.
22. Therefore, it is recommended that the 2016 GOsC review of osteopathic standards should be based on the following fundamental principles:
- a. The existing four themes for the *Osteopathic Practice Standards* should be retained, i.e.: Communication and patient partnership; Knowledge, skills and performance; Safety and quality; Professionalism.
  - b. The *Osteopathic Practice Standards* should continue to comprise both the *Code of Practice* and the *Standard of Proficiency*, standards specified in the Osteopaths Act 1993.

- c. A call for evidence, using a diverse range of communications, should target all our stakeholders. Evidence gathered in this way will inform proposed revisions to the *Osteopathic Practice Standards*, prepared for public consultation.
- d. A reference group comprising a range of stakeholders should be engaged to ensure a balanced approach to the analysis of pre-consultation feedback and the development of new draft standards.
- e. The scope of the review will embrace the four levels of standards and guidance outlined in the November 2015 Council paper, namely:

1. Overarching values/ principles	Possible inclusion of a set of high-level over-arching values/principles. Alternatively, reflect those developed and owned by the profession (e.g. Patient Charter').
2. Standards	The existing 37 standards with modifications where required.
3. Guidance	Revision and strengthening of the current guidance, incorporating revisions identified in the review.
4. Learning resources	A range of material explicitly linked to the OPS, providing more explicit explanation of why standards are in place/how they apply in practice. In support, also additional resources, or sign-posting to relevant external resources, case studies, and interactive educational material, etc. This would largely be provided online.

### Timeframe

23. Our proposed timeframe for reviewing and revising the *Osteopathic Practice Standards* (OPS) is as follows:

Desk research	January to June 2016
Call for evidence: engagement with key stakeholders	February to summer 2016
Multi-stakeholder working group established to review evidence and develop consultation draft	July 2016
Review of evidence	Summer 2016
Interim report to Council	July 2016
Initial draft of revised OPS to Osteopathic Practice Committee	December 2016



Council approval of draft OPS for consultation	February 2017
Consultation	Spring/summer 2017

**Recommendations:**

1. To agree the principles of the *Osteopathic Practice Standards* review.
2. To consider the pre-consultation approach.
3. To agree the proposed timeframe for the review of the *Osteopathic Practice Standards*.