



*Draft  
Osteopathic  
Practice  
Standards*

This document comprises the Standard of Proficiency and also the Code of Practice. A statement of changes between the previous Osteopathic Practice Standards (effective from 2012) and those within this document is available on the General Osteopathic Council's website ([www.osteopathy.org.uk](http://www.osteopathy.org.uk))

This document was published on xxxx and take effect as the Standard of Proficiency and the Code of Practice on 1 September 2019.

Section 13 of the Osteopaths Act 1993 (as amended) requires the General Osteopathic Council (GOsC) to determine the standard of proficiency required for the competent and safe practice of osteopathy.

Section 19 of the Osteopaths Act 1993 (as amended) requires the GOsC to publish a Code of Practice laying down the standards of conduct and practice expected of osteopaths and giving advice in relation to the practice of osteopathy.

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### The Osteopathic Practice Standards and your practice

The Osteopathic Practice Standards set out the standards of conduct, ethics and competence required of osteopaths to promote patients' health and wellbeing and to protect them from harm. They bring together the Standard of Proficiency and Code of Practice required by the Osteopaths Act 1993.

The Standards provide a framework to support the delivery of ethical, competent and safe osteopathic care. The Standards also play a central role in the requirements for osteopathic training and gaining registration with the General Osteopathic Council for both UK and international graduates in osteopathy.

The Standards set out the expectations of osteopaths as regulated healthcare professionals. Patients must be able to trust osteopaths with their health. To justify that trust osteopaths must meet the standards expected in the Osteopathic Practice Standards. Osteopaths are personally accountable for their professional practice and must always be prepared to justify their decisions and actions, explaining how they have exercised their professional judgement.

The standards and guidance are arranged in four main themes:

- A. Communication and patient partnership
- B. Knowledge, skills and performance
- C. Safety and quality in practice
- D. Professionalism.

The standards in each theme are listed at the start of each section. They are then reproduced, with, in each case, supporting guidance.

Within the Osteopathic Practice Standards the terms 'must', 'should' and 'may' are used in the following ways:

- **'Must'** is used where osteopaths are expected to comply. Failure to do so may put the osteopath at risk of fitness to practise proceedings.
- **'Should'** is used to indicate how the standard can be met. It is also used where the relevant duty or principle will not apply in all situations or circumstances, or where there may be factors outside the osteopath's control that affect whether or how they comply with the guidance.
- **'May'** is used in the guidance to indicate that osteopaths have a choice as to whether to carry out certain actions or not.

### A. Communication and patient partnership

This theme sets the standards relating to communication, the formation of effective patient partnerships, and consent. Patients should be at the centre of healthcare and should be given the information that they need in order to make informed choices about the care they receive. These standards support therapeutic relationships built on good communication, trust and confidence.

#### Standards

- A1. You must listen to patients and respect their individuality, concerns and preferences. You must be polite and considerate with patients, and treat them with dignity and courtesy.
- A2. You must work in partnership with patients, adapting your communication approach to take into account their particular needs, and supporting patients in expressing to you what is important to them.
- A3. You must give patients the information they want or need to know in a way they can understand.
- A4. You must receive valid consent for all aspects of examination and treatment and record this as appropriate.
- A5. You must support patients in caring for themselves to improve and maintain their own health and wellbeing.
- A6. You must respect your patients' dignity and modesty.
- A7. You must make sure your beliefs and values do not prejudice your patients' care.

**A1. You must listen to patients and respect their individuality, concerns and preferences. You must be polite and considerate with patients, and treat them with dignity and courtesy.**

1. Poor communication is at the root of most patient complaints. Effective communication is a two-way exchange, which involves not just talking but also listening with care.
2. You should be alert to patients' unspoken signals; for example, when a patient's body language or tone of voice indicates that they may be uneasy, experiencing discomfort or anxious and vulnerable.
3. Patients will come to you with different experiences and expectations. You should try to accommodate their wishes as much as you can without compromising the care you can provide. If you cannot accommodate their wishes you should explain why you are unable to do so.
4. Be aware that patients will also have particular needs or values in relation to gender, ethnicity, culture, religion, belief, sexual orientation, lifestyle, age, social status, language, physical and mental health and disability. You must be able to respond respectfully and appropriately to these needs.
5. Your patients should have your full attention, and you should allow sufficient time to deal properly with their needs. If you are in sole practice, you should seek to minimise interruptions while you are with a patient.

**A2. You must work in partnership with patients, adapting your communication approach to take into account their particular needs, and supporting patients in expressing to you what is important to them.**

1. Trust is an essential part of a clinical relationship, and requires effective communication between osteopath and patient.
2. You must care for your patients and do your best to understand their symptoms and support their health.
3. You should be sensitive to the specific needs of patients, and be able to select and utilise effective forms of communication, which take these into account.
4. You should share accurate and relevant information with patients, encourage them to ask questions, and to take an active part in decisions about their treatment and care.
5. The most appropriate treatment for patients will sometimes involve:
  - 5.1. referring them to another osteopath or other healthcare professional
  - 5.2. providing advice on self-care
  - 5.3. not treating them at all.

**A3. You must give patients the information they want or need to know in a way they can understand.**

1. Before examining or treating a patient, you should ensure that they understand:
  - 1.1. their rights as a patient, including the right to have a chaperone present and to stop the examination or treatment at any time
  - 1.2. what they can realistically expect from you as an osteopath.
2. You should discuss care options, encourage patients to ask questions, and deal with these clearly, fully and honestly. You should inform your patients of anticipated benefits and any material or significant risks associated with the treatment you are proposing, and confirm their understanding of these. If proposing no treatment, you should explain any potential risks and benefits associated with this.
3. If you propose to examine or treat a patient who has difficulty communicating or understanding, you should take all reasonable steps to assist them. For example, make use of an appropriate interpreter if the patient communicates in a different language to you. If you are unable to communicate sufficiently with the patient, you should not treat them.

**A4. You must receive valid consent for all aspects of examination and treatment and record this as appropriate.**

1. Gaining consent is a fundamental part of your practice and is both an ethical and legal requirement. If you examine or treat a patient without consent, you may face criminal, civil or GOsC proceedings.
2. Gaining consent is an ongoing process. You must ensure that patients are able to make decisions at all stages of their treatment and care, and continue to give consent.
3. For consent to be valid, it must be given:
  - 3.1 voluntarily
  - 3.2 by an appropriately informed person
  - 3.3 with the capacity to consent to the intervention in question.

**Voluntarily**

4. To be voluntary, the patient must not be under any form of pressure or undue influence to consent to osteopathic care. You must ensure that patients are given the information they need to reach their own decision and give consent.
5. Situations where you might question whether consent is voluntary might include patients being put under pressure by employers or relatives to accept osteopathic care, or where a patient might otherwise be vulnerable.

### By an appropriately informed person

6. The patient needs to understand the nature, purpose, benefits and material or significant risks to them of the examination or treatment proposed. The patient must then be free to either accept or refuse the proposed examination or treatment. Some patients may need time to reflect on what you have proposed before they give their consent to it.
7. Where your diagnostic examination and treatment is carried out simultaneously, consent could be obtained by explaining your approach, describing the types of treatment methods you might like to use, setting the parameters within which you will work, and how the patient may indicate that they wish the treatment to stop. If the patient consents to you proceeding on this basis, you may do so. If the patient expresses concern that you are going outside the agreed treatment plan, you must stop the treatment.
8. Before deciding that consent has been given, you should consider whether patients have been given the information they want or need, and how well they understand the details and implications of what is proposed.
9. It is particularly important to ensure that your patient understands and consents to the proposed examination or treatment of any intimate area before it is administered. Intimate areas include the groin, pubis, perineum, breast and anus, but this list is not exhaustive, and patients may regard other areas of their body as 'intimate'. Some patients may not have come prepared for such a procedure and you should offer to conduct this at a subsequent appointment, and offer a chaperone.

### Capacity

10. Capacity, in this context, relates to the ability of an individual to understand, retain and evaluate information and to make and communicate a decision regarding their health needs and treatment options.
11. You must not assume that a patient lacks capacity solely because of their age, disability, appearance, behaviour, medical condition, beliefs, or because they make a decision with which you disagree. The starting point should always be a presumption of capacity.
12. The law recognises that some patients – because of illness, mental capacity or age – are not competent to give consent for a particular examination or treatment. This is because they may not be able to absorb or weigh up the information and make an informed decision.
13. When an adult lacks mental capacity, decisions about their treatment must be taken in their best interests and in accordance with relevant legislation. Further details on the relevant legislation are provided in the GOsC guidance documents Obtaining Consent.



### Treatment of children and young people

Note that in the summary below a 'child' is a person under the age of 16 years and a 'young person' is a person aged 16 or 17 years.

14. Obtaining consent for treatment to be given to a child or young person is a complex issue. If you treat children, you must be aware of the law in this respect, which may vary depending on where you practice in the UK. Further details are provided in the GOsC guidance document *Obtaining Consent*.
15. A child may have the capacity to consent. You will need to apply the law, and use your professional judgement in assessing the capacity of each patient under 16 years, which will depend on their maturity and ability to understand what is involved. You are strongly advised to involve a person with parental responsibility for the child when seeking consent.
16. You should involve children and young people as much as possible in discussions about their care, even if they are not able to make decisions on their own.
17. A young person can be treated as an adult and can be presumed to have the ability to make decisions about their own care. Nevertheless, you will need to use your professional judgement to assess whether the young person in fact has the maturity and ability to understand what is involved in the treatment you are proposing for them because, as with adults, consent must be valid.

### Records of consent

18. You must record key elements of your discussion with the patient. This should include information discussed, any particular concerns, expectations or requests for information raised by the patient, how you addressed these, and any decisions made. It is important that such issues are evidenced in the patient records.
19. The validity of consent does not depend on the form in which it is given. Written consent may serve as evidence of consent but if the elements of voluntariness, appropriate information and capacity have not been satisfied, a signature on a form will not by itself make the consent valid.
20. Valid consent does not always have to be given in writing by the patient. However, if you are proposing a vaginal or rectal examination or technique, written consent must be obtained and kept with the patient records. You may also consider gaining written consent for other procedures, particularly those relating to areas which the patient considers intimate.

### Sharing of information

21. You must obtain specific consent from patients regarding the sharing of any information about them with others.

**A5. You must support patients in caring for themselves to improve and maintain their own health and wellbeing.**

1. Supporting patients in caring for themselves may include:
  - 1.1 providing information on the effects of their life choices and lifestyle on their health and well-being
  - 1.2 supporting decision making about lifestyle changes where appropriate
  - 1.3 encouraging and supporting patients to seek help from others, including other health professionals, or those coordinating their care, if necessary
  - 1.4 respecting patients' decisions about their care, even if you disagree with those decisions.

**A6. You must respect your patients' dignity and modesty.**

1. Patients will have different requirements for maintaining their dignity and modesty during a consultation, and you must be sensitive to these. Some of these ideas may have been shaped by a patient's culture or religion, but it is unwise to make assumptions about any patient's ideas of modesty.
2. You should respect your patients' dignity and modesty by:
  - 2.1 Explaining to patients in advance of their first appointment that they may be asked to undress for examination and treatment.
  - 2.2 Allowing a patient to undress, and get dressed again, without being observed.
  - 2.3 Only observing a patient undressing, if you consider this necessary for the purposes of diagnosis or treatment. This must be explained to the patient, and consent obtained. If the patient does not wish to be observed, you must respect their wishes and find another way of establishing the clinical information you need.
  - 2.4 Giving patients the option of covering areas of their body that do not need to be exposed for examination or treatment. This can be achieved by providing a suitable gown or cover, asking that they only remove such items of clothing that are necessary for the proposed examination or treatment, or providing the opportunity to get dressed again in full or part as appropriate. If you feel it is necessary for the examination or treatment that the patient is undressed to their underwear, you should explain this to the patient, and seek their consent.
3. If it becomes necessary during examination or treatment to adjust or remove items of the patient's clothing or underwear, they should be asked to do this themselves. If it is necessary for you to assist them, then you must have their consent to do so.
4. If you need your patient to remove underwear for an examination or treatment, you should ask them to put their underwear back on at the conclusion of that particular examination or treatment and before you continue with any other procedure.

5. You must always ask a patient if they would like a chaperone when:
  - 5.1 you examine or treat an intimate area
  - 5.2 you are treating a patient under 16 years of age
  - 5.3 you are treating an adult who lacks capacity
  - 5.4 you are treating a patient in their home.
6. A chaperone can be:
  - 6.1 a relative or friend of the patient
  - 6.2 a suitable person from your practice but not your spouse or personal partner.
7. If the patient wishes to have a chaperone and neither you nor the patient is able to provide one, you should offer to re-arrange the appointment.
8. If a chaperone is present, you should record this in the patient records. If a patient within one of the categories in paragraph A6.5 declines the offer of a chaperone, you should record this in the patient's notes.

### **A7. You must make sure your beliefs and values do not prejudice your patients' care**

1. The same quality of service and care should be provided to all patients. It is illegal to refuse a service to someone on the grounds of their age, gender reassignment, marriage or civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation.
2. You should maintain a professional manner at all times, even where a personal incompatibility arises with a patient.
3. You are not obliged to accept any individual as a patient (subject to the points raised in paragraph 1 above), but if having done so you feel you cannot continue to give them the good quality care to which they are entitled, you may decline to continue treating them. In that case, you should try to refer them to another osteopath or healthcare professional where appropriate. Reasons for not accepting someone as a patient or declining to continue their care might include:
  - 3.1. aggressiveness
  - 3.2. a lack of confidence in the care you are providing.
  - 3.3. inappropriate dependence on you.

**B. Knowledge, skills and performance**

All osteopaths must have the knowledge and skills to support their practice as primary healthcare professionals, and must maintain and develop these throughout their careers. They must always work within the limits of their skills and experience. The standards in this theme set out the requirements in this respect.

**Standards**

- B1. You must have and be able to apply sufficient and appropriate knowledge and skills to support your work as an osteopath
- B2. You must recognise and work within the limits of your training and competence.
- B3. You must keep your professional knowledge and skills up to date.
- B4. You must be able to analyse and reflect upon information related to your practice in order to enhance patient care.

**B1. You must have and be able to apply sufficient and appropriate knowledge and skills to support your work as an osteopath**

1. These should include:
  - 1.1 an understanding of osteopathic philosophy, principles and concepts of health, illness and disease, and the ability to apply this knowledge critically, in the care of patients
  - 1.2 a knowledge of human structure and function sufficient to inform appropriate care
  - 1.3 a knowledge of pathophysiological processes sufficient to inform clinical judgement and to identify where patients may require additional or alternative investigation or treatment from another healthcare professional
  - 1.4 an understanding of the psychological and social influences on health, sufficient to inform clinical decision-making and patient care
  - 1.5 an awareness of the principles and applications of scientific enquiry and the ability to critically evaluate scientific information and data to inform osteopathic care
  - 1.6 an understanding of the principles of biomechanics sufficient to apply osteopathic treatment safely and effectively
  - 1.7 well-developed palpatory skills
  - 1.8 an understanding of the characteristics of the normal and abnormal functioning of different body tissues and systems to inform the interpretation of clinical findings
  - 1.9 the ability to determine changes in health and function by the appropriate use of observation, palpation, motion and clinical evaluation
  - 1.10 problem-solving and thinking skills in order to inform and guide the interpretation of clinical and other data, and to justify clinical reasoning and decision-making
  - 1.11 the ability to protect yourself physically and psychologically during interactions with patients to maintain your own health
  - 1.12 the ability to critically appraise your own osteopathic practice. For example, this could be achieved through:
    - 1.12.1 self-reflection
    - 1.12.2 feedback from patients
    - 1.12.3 feedback from colleagues
    - 1.12.4 case analysis or clinical audit.

**B2. You must recognise and work within the limits of your training and competence.**

1. You should use your professional judgement to assess whether you have the training, skills and competence to treat a patient, seeking advice where necessary.
2. If not, you should consider:
  - 2.1 seeking advice or assistance from an appropriate source to support your care for the patient
  - 2.2 working with other osteopaths and healthcare professionals to secure the most appropriate care for your patient
  - 2.3 referring the patient to another osteopath or appropriately qualified healthcare professional.
3. Working within your competence also applies if you work within the fields of education and research.

**B3. You must keep your professional knowledge and skills up to date.**

1. To achieve this, you should:
  - 1.1 Be professionally engaged, undertaking professional development activities, and complying with GOsC requirements regarding continuing professional development.
  - 1.2 Keep up-to-date with factors relevant to your practice, including:
    - 1.2.1 GOsC guidance
    - 1.2.2 legal requirements or changes to the law in relation to your practice, for example, in relation to data storage (see standard C3), health and safety in the workplace (see standard C5) and equality issues (see standard D6)
    - 1.2.3 research and other relevant developments in healthcare.

**B4. You must be able to analyse and reflect upon information related to your practice in order to enhance patient care.**

1. To achieve this you will need to have sufficient knowledge and ability to collect and analyse information and evidence about your practice to support both patient care and your own professional development.

### **C. Safety and quality in practice**

Osteopaths must deliver high-quality and safe healthcare to patients. This theme sets out the standards in relation the delivery of care, including evaluation and management approaches, record keeping, safeguarding of patients and public health.

#### **Standards**

- C1. You must be able to conduct an osteopathic patient evaluation and deliver safe, competent and appropriate osteopathic care to your patients.
- C2. You must ensure that your patient records are full, accurate, legible and completed promptly.
- C3. You must respond effectively and appropriately to requests for the production of written material and data.
- C4. You must take action to keep patients from harm
- C5. You must ensure that your practice is safe, clean and hygienic, and complies with health and safety legislation.
- C6. You must be aware of your wider role as a healthcare professional to contribute to enhancing the health and wellbeing of your patients.

**C1. You must be able to conduct an osteopathic patient evaluation and deliver safe, competent and appropriate osteopathic care to your patients.**

1. This should include the ability to:
  - 1.1 take and record the patient's case history, adapting your communication style to take account of the patient's individual needs and sensitivities
  - 1.2 select and undertake appropriate clinical assessment of your patient, taking into account the nature of their presentation and their case history
  - 1.3 formulate an appropriate working diagnosis or rationale for care, and explain this clearly to the patient
  - 1.4 develop and apply an appropriate plan of treatment and care. This should be based on:
    - 1.4.1 the working diagnosis
    - 1.4.2 the best available evidence
    - 1.4.3 the patient's values and preferences
    - 1.4.4 your own skills, experience and competence.
  - 1.5 adapt an osteopathic technique or treatment approach in response to findings from the examination of your patient
  - 1.6 evaluate post-treatment response and justify the decision to continue, modify or cease osteopathic treatment as appropriate
  - 1.7 recognise adverse reactions to treatment, and take appropriate action
  - 1.8 monitor the effects of your care, and keep this under review. You should cease care if requested by the patient or if you judge that care is likely to be ineffective or not in the patient's best interests
  - 1.9 recognise when errors have been made, and take appropriate action to remedy these, taking account of the patient's best interests under your duty of candour (see D3)
  - 1.10 where appropriate, refer the patient to another healthcare professional, following appropriate referral procedures.
2. If providing care outside of your usual practice environment, you should note in your records where this took place, and apply the same standards, as you would apply in your usual practice, or be able to justify why this was not appropriate.



**C2. You must ensure that your patient records are comprehensive, accurate, legible and completed promptly.**

1. Records help you to provide good quality care to your patients, and should include:
  - 1.1 date of the consultation
  - 1.2 patient's personal details
  - 1.3 any problems, symptoms, concerns and priorities discussed with your patient
  - 1.4 relevant medical, family and social history
  - 1.5 your clinical findings
  - 1.6 the information and advice you provide, including a record of how this is communicated to your patient
  - 1.7 a working diagnosis and treatment plan
  - 1.8 records of consent
  - 1.9 any treatment you undertake
  - 1.10 any communication with, about or from the patient
  - 1.11 copies of any correspondence, reports, test results, etc. relating to the patient
  - 1.12 clinical response to treatment and treatment outcomes
  - 1.13 the location of your visit if outside your usual consulting rooms
  - 1.14 whether any other person was present and their status
  - 1.15 where an observer is present (for example, a chaperone, peer observer, osteopathic student, or potential student) as well as their status and identity, you should record the patient's consent to their presence.
2. Your notes should be contemporaneous or completed promptly after a consultation (generally on the same day).
3. The information you provide in reports and forms or for any other purpose associated with your practice should be honest, accurate and complete.

**C3. You must respond effectively and appropriately to requests for the production of written material and data.**

1. To achieve this you will need to:
  - 1.1 Produce reports and referrals, and present information in an appropriate format to support patient care and effective practice management.

- 1.2 Develop mechanisms for storing and retrieving patient information, including financial and other practice data to comply with legal requirements in relation to confidentiality, data processing and storage, and requests for information from patients, healthcare professionals or other authorised parties.

**C4. You must take action to keep patients from harm**

1. You must comply with the law to protect children and vulnerable adults.
2. You should have an awareness of, and keep up to date with, current safeguarding procedures, including those relevant to your local area, and follow these if you suspect a child or vulnerable adult is at risk.
3. You should take steps to protect patients if you believe that the health, conduct or professional performance of a colleague or other healthcare practitioner poses a risk to the patient. You should consider one of the following courses of action, keeping in mind that your objective is to protect the patient:
  - 3.1 discussing your concerns with the colleague or practitioner
  - 3.2 reporting your concerns to other colleagues or the principal of the practice, if there is one, or to an employer
  - 3.3 if the practitioner belongs to a regulated profession, reporting your concerns to their regulator
  - 3.4 if the practitioner belongs to a voluntary register, reporting your concerns to that organisation
  - 3.5 where you have immediate and serious concerns for a patient, reporting the colleague to social services or the police.
4. In any circumstances where you believe a patient is at immediate and serious risk of harm, you should consider the best course of action, which may include contacting the police or social services (though see D5 regarding confidentiality).
5. If you are the principal of a practice, you should ensure that systems are in place for staff to raise concerns about risks to patients.
6. You must comply with any mandatory reporting requirements, for example, those related to female genital mutilation (FGM) in England and Wales.

**C5. You must ensure that your practice is safe, clean and hygienic, and complies with health and safety legislation.**

1. Your practice premises must be clean, safe, hygienic, comfortable and appropriately equipped.

2. There are detailed requirements in law for health and safety in the workplace. Further details can be found on the website of the UK Health and Safety Executive.
3. You must have adequate public liability insurance.
4. You should ensure that you have appropriate procedures in place in the event of a medical emergency.
5. You should take all necessary steps to control the spread of communicable diseases

**C6. You must be aware of your wider role as a healthcare professional to contribute to enhancing the health and wellbeing of your patients.**

1. You should be aware of public health issues and concerns, and be able to discuss these in a balanced way with patients, or guide them to resources or to other healthcare professionals to support their decision making regarding these.

**D. Professionalism**

Osteopaths must act with honesty and integrity and uphold high standards of professional and personal conduct to ensure public trust and confidence in the profession. The standards in this theme deal with such issues and behaviours, including the establishment of clear professional boundaries with patients, the duty of candour, and the confidential management of patient information. These contribute to ensure that trust is established and maintained within therapeutic relationships.

**Standards**

- D1. You must act with honesty and integrity in your professional practice.
- D2. You must establish and maintain clear professional boundaries with patients, and must not abuse your professional standing and the position of trust which you have as an osteopath.
- D3. You must be open and honest with patients, fulfilling your duty of candour.
- D4. You must have a policy in place by which you manage patient complaints, and respond quickly and appropriately to any which arise.
- D5. You must respect your patients' rights to privacy and confidentiality, and effectively maintain and protect patient information.
- D6. You must treat patients fairly and recognise diversity and individual values. You must comply with equality and anti-discrimination law.
- D7. You must uphold the reputation of the profession at all times through your conduct, in and out of the workplace.
- D8. You must be honest and trustworthy in your professional and personal financial dealings.
- D9. You must support colleagues and cooperate with them to enhance patient care.
- D10. You must consider the contributions of other health and care professionals to optimise patient care.
- D11. You must ensure that any problems with your own health do not affect your patients. You must not rely on your own assessment of the risk to patients.
- D12. You must inform the GOsC as soon as is practicable of any significant information regarding your conduct and competence, cooperate with any requests for information or investigation, and must comply with all regulatory requirements.

### **D1. You must act with honesty and integrity in your professional practice.**

1. A lack of integrity in your practice can adversely affect patient care. Some examples are:
  - 1.1. putting your own interest above your duty to your patient
  - 1.2. subjecting a patient to an investigation or treatment that is unnecessary or not in their best interest
  - 1.3. deliberately withholding a necessary investigation, treatment or referral
  - 1.4. prolonging treatment unnecessarily
  - 1.5. putting pressure on a patient to obtain other professional advice or to purchase a product
  - 1.6. recommending a professional service or product solely for financial gain
  - 1.7. borrowing money from patients, or accepting any other benefit that brings you financial gain.
2. You should not allow misleading advertising or information about you and your practice. You should make sure that:
  - 2.1 your advertising and promotional material, including website content, is legal, decent, honest and truthful as defined by the advertising standards authority (ASA) and conforms to current guidance, such as the UK code of non-broadcast advertising, sales promotion and direct marketing (the CAP code)
  - 2.2 the information you provide about your professional qualifications, practice arrangements and the services you provide is of a high standard and factually accurate
  - 2.3 you do not use any title that implies you are a licensed medical practitioner if you are not. if you use the title 'doctor' because you have a PhD or other doctorate, or you qualified as a medical doctor but you do not have a licence to practise, you should make this clear to patients and others
  - 2.4 you do not generate publicity so frequently or in such a manner that it becomes a nuisance or puts those to whom it is directed under pressure to respond.
3. You must have a professional indemnity insurance arrangement which provides appropriate cover in accordance with the requirements of the Osteopaths Act (1993) and the current Professional Indemnity Insurance Rules.

**D2. You must establish and maintain clear professional boundaries with patients, and must not abuse your professional standing and the position of trust which you have as an osteopath.**

1. Abuse of your professional standing can take many forms. The most serious abuse of your professional standing is likely to be the failure to establish and maintain appropriate boundaries, whether sexual or otherwise.
2. Appropriate professional boundaries are essential for trust and an effective therapeutic relationship between osteopath and patient. Professional boundaries may include physical boundaries, emotional boundaries and sexual boundaries. Failure to establish and maintain sexual boundaries may, in particular, have a profoundly damaging effect on the patient, is likely to bring the profession into disrepute and could lead to your removal from the GOsC Register.
3. Not all crossing of professional boundaries will necessarily be an abuse of your professional standing. For example, sometimes it may support empathy and trust with a patient to disclose personal information or to treat a patient as an emergency outside your usual hours. However, there is a spectrum and osteopaths must ensure that patients who may be vulnerable are protected at the time and also throughout the duration of the professional relationship.
4. You should be aware of the risks to patients and to yourself of engaging in or developing social or commercial relationships with patients, and the challenges which this might present for the therapeutic relationship and to the expectations of both patient and professional. You should also be aware of the risk of patients developing an inappropriate dependency upon you, and be able to manage these situations appropriately – seeking advice from a colleague or professional body as necessary.
5. When establishing and maintaining sexual boundaries, you should bear in mind the following:
  - 5.1 Words and behaviour, as well as more overt acts, may be sexualised, or regarded as such by the patient. Examples might include:
    - 5.1.1 sharing inappropriate intimate details about yourself
    - 5.1.2 visiting a patient's home without an appointment
    - 5.1.3 making inappropriate sexual remarks to or about patients
    - 5.1.4 unnecessary physical contact.
  - 5.2 You should avoid any behaviour which may be construed by a patient as inviting a sexual relationship or response.
  - 5.3 Physical contact for which valid consent has not been given can amount to an assault leading to criminal liability.

- 5.4 It is your responsibility not to act on feelings of sexual attraction to or from patients.
- 5.5 If you are sexually attracted to a patient, or if a patient displays sexualised behaviour towards you, you should seek advice from, for example, a colleague or professional body on the most appropriate course of action. If you believe that you cannot remain objective and professional, or that it is not possible to re-establish a professional relationship, you should refer your patient to another healthcare practitioner. If referring a patient because of your own sexual feelings towards them, you should endeavour to do so in a way that does not make the patient feel that they have done anything wrong.
- 5.6 You must not take advantage of your professional standing to initiate a personal relationship with a patient. This applies even when the patient is no longer in your care, as any personal relationship may be influenced by the previous professional relationship, and an imbalance of power between the parties.
- 5.7 You must not end a professional relationship with a patient solely to pursue a personal relationship with them.
- 5.8 If you think that a personal relationship with a former patient might develop, you must consider whether this is appropriate. Factors that might impact on this include:
  - 5.8.1 the nature of the previous professional relationship
  - 5.8.2 the length of time the professional relationship lasted, and when it ended
  - 5.8.3 whether the former patient was particularly vulnerable at the time of the professional relationship, and whether they might still be vulnerable.
- 5.9 Osteopaths who practise in small communities may find themselves treating friends or family. In such cases, establishing and maintaining clear professional boundaries will help you ensure that your clinical judgement is objective and that you can provide the treatment your patients need. The same level of care should be given to all patients, whether they are known to you in a social or other capacity, or not.

### **D3. You must be open and honest with patients, fulfilling your duty of candour.**

- 1. If something goes wrong with a patient's care which causes, or has the potential to cause harm or distress, you must tell the patient, offer an explanation as to what has happened and the effects of this, together with an apology, if appropriate, and a suitable remedy or support.
- 2. You must also be open and honest with your colleagues and/or employers, where applicable, and take part in reviews and investigations when requested.

**D4. You must have a policy in place to manage patient complaints, and respond quickly and appropriately to any that arise.**

1. A complaint is an opportunity to reflect on the communication and standard of care that was given and it may highlight areas of your practice that could be improved. A complaint which is handled well can also result in a stronger bond of trust between you and your patient, leading to improved patient care.
2. In the event of a concern being raised, If you act constructively, allow patients the opportunity to express their dissatisfaction, and provide sensitive explanations of what has happened and why, you may resolve this at an early stage.
3. You should provide information to patients about how they can make comments, complaints and compliments, about the service they have received.
4. You should make sure that your staff are familiar with your complaints policy and know to whom they should direct any patient complaint.
5. You should inform your professional indemnity insurers immediately if you receive a complaint.
6. You should ensure that anyone making a complaint knows that they can refer it to the GOSc, and provide them with appropriate details explaining the procedure.

**D5. You must respect your patients' rights to privacy and confidentiality, and effectively maintain and protect patient information.**

**Confidentiality**

1. Maintaining patient confidentiality includes:
  - 1.1 keeping confidential your patients' identities and other personal information, and any opinions you form about them in the course of your work
  - 1.2 ensuring that your staff or anyone else attending your clinic in a professional capacity (students of osteopathy, potential students or peers, for example) keep such information confidential
  - 1.3 ensuring that the information is kept confidential even after the death of a patient
  - 1.4 not releasing or discussing medical details or information about the care of a patient with anyone, including their spouse, partner or other family members, unless you have the patient's consent to do so (see D5.7 and D5.8 below)
  - 1.5 taking appropriate measures to ensure that that such information is securely protected against loss, theft and improper disclosure.



2. Patients are entitled to obtain copies of their notes and you must comply with this if such a request is made in accordance with relevant legislation and good practice.

### **Management of patient information**

3. You should have adequate and secure methods for storing patient information and records. Patient records should be kept:
  - 1.1 for a minimum of eight years after their last consultation
  - 1.2 if the patient is a child, until their 25th birthday.
4. You should have a written policy regarding retention, transfer and disposal of patient information and records which should include whether it is your practice to retain them beyond eight years, or, in the case of a child, beyond their 25th birthday. Your patients should be made aware of this.
5. You should make arrangements for records to continue to be kept safely after you finish practising, or in the event of your death or incapacity. Patients should know how they can access their records in such circumstances.
6. You must comply with the law on data protection and associated legislation. For further information on data protection, please refer to the website of the UK Information Commissioner's Office.

### **Disclosure of confidential information**

7. There may be times when you want to ask your patient if they (or someone on their behalf) will give consent for you to disclose confidential information about them; for example, if you need to share information with another healthcare professional. In that case, you should:
  - 7.1 explain to the patient the circumstances in which you wish to disclose the information and make sure they understand what you will be disclosing, the person you will be disclosing it to, the reasons for its disclosure and the likely consequences
  - 7.2 allow them to withhold permission if they wish
  - 7.3 if they agree, ask them to provide their consent in writing or to sign a consent form
  - 7.4 advise anyone to whom you disclose information that they must respect the patient's confidentiality
  - 7.5 disclose only the information you need to, for example, does the recipient need to see the patient's entire medical history?

### **Disclosure of confidential information without consent**

8. In general, you should not disclose confidential information about a patient without their consent, however there may be circumstances in which you are obliged to do so. Such circumstances might include:

- 8.1 if you are compelled by order of the court, or other legal authority. you should only disclose the information you are required to under that order
  - 8.2 if it is necessary in the public interest. in this case, your duty to society overrides your duty to your patient. this might happen when a patient puts themselves or others at serious risk; for example, by the possibility of infection, or a violent or serious criminal act
  - 8.3 if it is necessary, in the interests of the patient's health, to share the information with their medical adviser, legal guardian or close relatives, and the patient is incapable of giving consent.
9. In any such circumstances, you are strongly advised to seek appropriate legal advice.
  10. If you need to disclose information without your patient's consent, you should inform the patient, unless you are specifically prohibited from doing so (for example, in a criminal investigation) or there is another good reason not to (for example, where a patient may become violent).
  11. Any disclosures of information should be proportionate and limited to the relevant details.
  12. If a patient is not informed before disclosure of confidential information takes place, you should record the reasons why it was not possible to do so, and maintain this with the patient's records.

**D6. You must treat patients fairly and recognise diversity and individual values. You must comply with equality and anti-discrimination law.**

1. You should be familiar with the requirements that apply to you under equality law.
2. It is illegal to refuse a service to someone on the grounds of their age, gender reassignment, marriage or civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation.

**D7. You must uphold the reputation of the profession at all times through your conduct, in and out of the workplace.**

1. The public's trust and confidence in the profession, and the reputation of the profession generally, can be undermined by an osteopath's professional or personal conduct. You should have regard to your professional standing, even when you are not acting as an osteopath.
2. Upholding the reputation of the profession may include:
  - 2.1 acting within the law at all times (criminal convictions could be evidence that an osteopath is unfit to practise)
  - 2.2 showing compassion to patients

- 2.3 showing professional courtesy to those with whom you work
- 2.4 behaving honestly in your personal and professional dealings
- 2.5 maintaining the same standard of professional conduct in an online environment as would be expected elsewhere
- 2.6 not abusing alcohol or drugs
- 2.7 not behaving in an aggressive or violent way in your personal or professional life
- 2.8 not allowing professional disputes to cause you to fall below the standards expected of you
- 2.9 not falsifying records, data or other documents.

**D8. You must be honest and trustworthy in your professional and personal financial dealings.**

- 1. You should charge fees responsibly and in a way which avoids bringing the profession into disrepute.
- 2. It will help you avoid disputes about fees if you have clear and visible information available on patient fees and charging policies.
- 3. You should not place pressure on a patient to commit to unjustified treatment.
- 4. You may recommend products or services to patients only if, in your professional judgement, they will benefit the patient.
- 5. You should declare to your patients any financial or other benefit you receive for introducing them to other professionals or commercial organisations. You should not allow such an organisation to use your name for promotional purposes.
- 6. You should maintain sound financial records for your practice.

**D9. You must support colleagues and cooperate with them to enhance patient care.**

- 1. Where the care of patients is shared between professionals, you should consider the effectiveness of your handover procedures. Effective handovers can be done verbally, but it is good practice to make a note of the handover in the patient's osteopathic records.
- 2. You are responsible for all the staff you employ in your clinic (including administrative staff) and for their conduct, and any guidance or advice they give to patients. You should make sure that staff understand the importance of:
  - 2.1 patient confidentiality

- 2.2 secure storage and retention of medical records
  - 2.3 appropriate relationships with patients, colleagues and other healthcare professionals
  - 2.4 complaints and associated procedures for handling them
  - 2.5 maintaining a safe work environment
  - 2.6 health and safety
  - 2.7 equality duties and good practice.
- 3. If you are responsible for an associate or assistant, you should provide professional support and adequate resources for them so that they are able to offer appropriate care to their patients. You should not put them under undue pressure, or expect them to work excessive hours. You should not expect them to provide treatment beyond their competence.
  - 4. If your practice employs support staff, you should ensure that they are effectively managed and are aware of any legal obligations necessary to fulfil their role.

**D10. You must consider the contributions of other health and care professionals to optimise patient care.**

- 1. To achieve this, you should:
  - 1.1. Treat other health and care professionals with respect, acknowledging the role that they may have in the care of your patients. Any comments that you make about other healthcare professionals should be honest, valid and accurate.
  - 1.2. Understand the contribution of osteopathy within the context of healthcare as a whole.
  - 1.3. Follow appropriate referral procedures when referring a patient, or one has been referred to you.
  - 1.4. Work collaboratively with other healthcare providers to optimise patient care, where such approaches are appropriate and available.

**D11. You must ensure that any problems with your own health do not affect your patients. You must not rely on your own assessment of the risk to patients.**

- 1. If you know or suspect that your physical or mental health is impaired in a way that might affect the care you give to patients, you must:
  - 1.1. seek and follow appropriate medical advice on whether you should modify your practice and in what way
  - 1.2. if necessary, stop practising until your medical advisor considers you fit to practise again

- 1.3. inform the GOsC.
2. If you are exposed to a serious communicable disease, and you believe that you may be a carrier, you should not practise until you have received appropriate medical advice, and follow any advice you are given about suspending or modifying your practice. You should take all necessary precautions to prevent transmission of the condition to patients.

**D12. You must inform the GOsC as soon as is practicable of any significant information regarding your conduct and competence, cooperate with any requests for information or investigation, and must comply with all regulatory requirements.**

1. Such information regarding your conduct and competence would include:
  - 1.1. being subject to regulatory proceedings by a professional body anywhere in the world
  - 1.2. being charged with a criminal offence anywhere in the world
  - 1.3. accepting of a police caution
  - 1.4. being suspended or placed under a practice restriction by your employer or a similar organisation, because of concerns about your conduct or competence.

### **Statement of changes**

Under section 13(3) of the Osteopaths Act 1993 (as amended), the GOsC must widely publicise any changes made to the Standard of Proficiency and provide a minimum of one year's notice before those changes take effect. This statement, which encompasses changes to the Standard of Proficiency and Code of Practice, is available at [www.osteopathy.org.uk/standards/osteopathic-practice/](http://www.osteopathy.org.uk/standards/osteopathic-practice/)