



Council
13 November 2015
Health Committee Bank of Conditions

Classification	Public
Purpose	For discussion
Issue	The paper proposes the introduction of a standard bank of conditions to assist the decision making of the Health Committee at final hearings.
Recommendation	To agree the draft Bank of Conditions to be used by the Health Committee.
Financial and resourcing implications	None
Equality and diversity implications	The GOsC will monitor and evaluate the impact of the bank of conditions on osteopaths especially those from a protected group and this will form part of the Regulation Department Quality Assurance Framework.
Communications implications	The GOsC has undertaken a three month consultation on the draft bank of conditions. If approved, the bank of conditions will be published on the GOsC website.
Annexes	A. Consultations responses B. Draft Bank of Conditions for the Health Committee
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Background

1. The Health Committee considers allegations about a registrant's fitness to practise at hearings. The procedures followed at the hearing are set out in the GOsC (Health Committee) (Procedure) Rules 2000 (HC Rules).
2. By virtue of section 23(2) of the Osteopaths Act 1993, the Health Committee is able, in relevant cases, to impose conditions on a registrant's practice – a Conditions of Practice Order (CPO). The purpose of a CPO is to provide protection to the public, including patients, while allowing a registrant to continue to practise. When it has decided that a CPO is the most appropriate sanction, the Health Committee will need to formulate detailed conditions that will achieve this aim. Conditions need to address the specific risks or shortcomings identified in the case and should be drafted so that registrants understand clearly what is expected of them, and the timescales for compliance. Conditions also need to be monitored, measurable and attainable so that a future Health Committee panel can consider osteopaths' compliance with the conditions.
3. In October 2013, Council agreed to introduce a standard Bank of Conditions to assist the decision making of the Professional Conduct Committee in cases in which it is considered appropriate to implement a Conditions of Practice Order.
4. In November 2014, Council received the first annual report of the Health Committee. Prior to this time, it was considered that the Health Committee had not sat on sufficient occasions to merit the production of a report.
5. The GOsC is beginning to handle a growing number of health cases. The Regulation team's current case load includes 5 open health cases at various stages of the fitness to practise process. In addition, in his report to Council in November 2014, the Chair of the Health Committee noted that the Committee had dealt with the following types of health issues:
 - bipolar affective disorder
 - personality disorder (narcissistic/paranoid/antisocial)
 - substance misuse depression and hypomania
 - alcohol dependence syndrome
 - paranoid schizophrenia or delusional disorder
6. While the number of cases which have been determined at a full Health Committee hearing remains low (at present 14 in total) it was deemed prudent to have in place a Bank of Conditions to assist the Health Committee.

Discussion

7. In developing the Bank of Conditions, those used by other healthcare regulators were considered to ascertain the feasibility of transfer to an osteopathic context. In addition, the Executive asked the Institute of Osteopathy to consider the

standard banks used by other regulators and to provide feedback on the individual conditions which might be suitable for use within osteopathic practice.

8. At its meeting on 12 March 2015, the Osteopathic Practice Committee (OPC) considered the draft Bank of Conditions, and the comments of the Chair and panel chairs of the Health Committee on the draft. OPC members made a number of helpful drafting comments which were incorporated into the draft. The OPC agreed with the Chair and panel chairs of the Health Committee that the conditions should not be categorised by medical condition, but should instead be set out according to the intended purpose of the condition.
9. Council considered the draft policy at its meeting on 14 May 2015, where further, minor amendments were suggested and subsequently made to the draft. Council members approved this draft of the policy for consultation at this meeting in May.

The consultation

10. The GOsC undertook a three month consultation from 7 July to 6 October 2015 in accordance with our engagement strategy. In addition to being published on our website, an article relating to the consultation was featured in the Aug/Sept 2015 issue of the osteopath and the July and September news e-bulletins sent to osteopaths.
11. Direct correspondence in the form of an email went to targeted stakeholders, including osteopathic educational institutions, other healthcare regulators and public/patient representatives both at the launch of the consultation (7 July) and as a 'last chance' reminder email (28 September) a week before the deadline. The consultation also featured in social media postings on Twitter and Facebook.
12. The GOsC received five responses to the consultation questionnaire. Three responses were received from osteopaths; one from another healthcare regulator (General Optical Council) and one from a non-healthcare regulator (Architects Registration Board). The low response might be partly attributable to the technical nature of the consultation and also, as there have only been a small number of hearings before the Health Committee, the GOsC health procedures may be relatively unknown within the osteopathic profession.
13. A summary of the consultation responses are set out in Annex A.
14. All feedback received has been reviewed and considered when making revisions to the revised bank of conditions which can be found at Annex B.

Recommendation: to agree the draft Bank of Conditions for the Health Committee at Annex B.

Consultation Question	Yes	No	If no, reasons and suggestions for improving the bank¹	Other comments
<p>Are the conditions appropriate given the healthcare settings/work environment in which osteopaths practice?</p> <p>If no, please set out your reasons and any suggestions for improvement</p>	3	1	<p>Rather than have a list of conditions covering any possibility, the conditions should be derived from the specific way in which the osteopaths' health affects their competence and safety to practice. It would be much clearer to state what the health problems that are of concern, and how the health problem then impairs their practice, and this needs to be specific. Once the specific problem in their practice is defined, then one can apply conditions to monitor and improve their health, and secondly how their practice is monitored or limited in order to maintain patient safety. Thus the conditions on health monitoring and practice are specific to that person in their practice. This means it is likely to be more helpful to that osteopath, as specific and personal, and therefore more likely to be complied with, and have less negative impact on the osteopath both from their health and their work.</p> <p>A list of conditions reads as being non specific, impersonal. Delete it</p>	<p>No.37: Personal Development Plan should more prescriptive/detailed. Is very ambitious.</p> <p>No. 42: Plenty of drug/prescription abuse happens with OTC meds too.</p>

¹ Some responses have been shortened.

<p>Do you think the conditions bank will assist in improving public confidence in our processes?</p>	<p>2</p>	<p>2</p>	<p>Reads as non specific, impersonal and not caring, as though the GOSC cannot be bothered to write specific conditions for an osteopath personally.</p> <p>The public are unlikely to be aware of the conditions bank?</p>	
<p>Please provide us with any other comments you may have.</p>				<p>Needs to be clear about how the osteopath will demonstrate i.e. No.4. annex 2 (Annex B)</p> <p>The guidance is clearly worded and the draft conclusions cover matters that would be within the registrant’s power and clarify who should bear the costs of any hearing.</p> <p>Occupational Health assessment is available widely across the UK. All osteopaths who the GOsC think might need conditions for their registration should be seen by an Occupational Medical Specialist, in addition to a specialist dealing with their health problem. A GP or psychiatrist or surgeon will be able to manage their health problem, but will have very limited understanding and skills in advising someone on how this pertains to their work, and are likely therefore to err on being cautious and advising the person not to practice inappropriately. Particularly in profession of osteopathy which is generally poorly understood by the medical profession.</p>



Draft Guidance for the Health Committee

Formulating Conditions of Practice Orders

Introduction

1. The General Osteopathic Council (GOsC) was established by the *Osteopaths Act 1993* (the Act) to regulate and develop the profession of osteopathy. This document relates to the GOsC's regulatory function and in particular the work of its Health Committee.
2. This document has been produced primarily to assist the Health Committee when it has determined that a Conditions of Practice Order should be imposed on an osteopath. However, osteopaths, their legal representatives, professional bodies and members of the public may also find the information contained in this document useful.
3. A Conditions of Practice Order allows an osteopath to continue practising whilst providing protection for the public and patients. When formulating conditions, the Health Committee will have the public interest at the forefront of its mind.
4. This document is designed to guide the Health Committee when it needs to formulate conditions that an osteopath must adhere to. It is not exhaustive, nor intended to restrict the Health Committee from exercising its own judgement.

Health Committee (HC)

5. The procedures adopted by the Health Committee are governed primarily by the Act and the GOsC (Health Committee) (Procedure) Rules 2000 (the Rules). Other legislation, such as the *Human Rights Act 1998*, also has an impact on the way the Health Committee operates and the procedures it adopts, as does common law.
6. By Section 23(1) of the Act, it is the duty of the Health Committee to consider any allegation referred to it that a registrant's fitness to practice as an osteopath is seriously impaired because of his physical or mental condition.
7. Section 22(3) requires the Health Committee to take one of the following steps, if it is satisfied that the allegation is well founded (proved):
 - a. make an order imposing conditions with which the osteopath must comply while practising as an osteopath (a 'conditions of practice order');

- b. order the Registrar to suspend the osteopath's registration for such period as may be specified in the order (a 'suspension order');
8. The Health Committee does not have the power to admonish a registrant, or to remove an osteopath's name from the Register of Osteopaths.
9. This guidance is solely concerned with the Health Committee's powers to make an order imposing conditions with which the osteopath must comply while practising as an osteopath (a 'Conditions of Practice Order').

Conditions of Practice Order

10. A Conditions of Practice Order (the Order) allows an osteopath to continue practising whilst providing protection for the public and patients. The primary purpose of the Order is to protect the public. If it is not possible to formulate workable conditions that achieve this, the HC must suspend the osteopath's registration.
11. Conditions take two forms: they may be restrictive and prevent an osteopath from practising in a certain way or on a particular category of patient; or they may address deficiencies in practice or potential risks to the public and require the osteopath to undergo additional training or other improvement activity. An Order will generally contain a number of conditions, which may be both restrictive and address deficiencies.
12. It is important that any osteopath who is subject to an Order clearly understands what they are expected to achieve. The Health Committee should, therefore, always produce a written Order that clearly identifies the conditions that are to be complied with. The Health Committee should also explain its reasons for formulating these conditions.

Formulating conditions

Restrictive conditions

13. It is essential that the Health Committee identifies and expressly states the risk posed by the osteopath and satisfies itself that the risk can be mitigated by conditions. If so, restrictive conditions can be used to protect the public and patients whilst the osteopath continues to practise.
14. When formulating restrictive conditions, the Health Committee should ask itself three key questions:
 - a. What are the risks that need mitigating?
 - b. How are the public and patients to be protected from these risks?
 - c. How can compliance with the conditions be demonstrated, monitored and independently verified?

15. The GOsC's primary concern is the protection of patients and the public. Where conditions have been imposed, it is important for the GOsC to have assurance that all conditions are being complied with on an on-going basis.
16. If it is not possible to formulate workable conditions that mitigate the identified risks, and which are capable of being measured and monitored, then the Health Committee should consider suspending the osteopath's registration.

Conditions addressing deficient practice

17. Formulating conditions to address deficient practice can be difficult and the Health Committee should ask itself four key questions when undertaking this task:
 - a. What is the problem that needs addressing?
 - b. What does the osteopath need to do to address this problem?
 - c. How should the osteopath demonstrate that they have addressed the problem?
 - d. How should the osteopath's claim that they have addressed the problem be independently verified?
18. The objectives of the conditions always need to be made sufficiently clear for the osteopath to know what is expected of them.
19. Taking each of the identified shortcomings in the relevant case, the HC should make clear what it expects of the osteopath and explain how the conditions relate to these shortcomings.
20. The Health Committee will wish to be satisfied that the identified shortcomings have been sufficiently addressed and that the osteopath now practises to the standards required. The Health Committee should clearly explain to the osteopath what evidence it will wish to see to be satisfied of this. For example evidence of:
 - the successful completion of any training courses
 - reports from a supervising osteopath
 - details of any self-directed learning and reflective accounts.
21. It is important that the claims made by the osteopath are independently verified. This can be achieved by, for example:
 - Drug/alcohol testing
 - Reports from registered medical practitioners.
22. Annex A provides sample wording to assist the Health Committee when drafting an order.

23. A template has been produced to assist the Health Committee at hearings and when it is formulating conditions within this framework in individual cases. This template is provided at Annex B.

Annex A

Sample Wording for Conditions

Provided below are samples of the wording that may be used in Conditions of Practice Orders. This list is provided to guide the Health Committee and it is by no means exhaustive or comprehensive.

Conditions relating to medical advice, supervision and notification – general	
1.	To place yourself and remain under the supervision of a registered medical practitioner specialising in []/ General Practitioner/registered health care practitioner/therapist who is approved by the GOsC.
2.	To attend appointments with [] as arranged, follow his/her advice/comply with his/her recommended treatment.
3.	To inform the GOsC by [date] of the name and contact details of your general practitioner and any other registered medical practitioner/registered healthcare practitioner/therapist responsible for your care and to consent to the GOsC corresponding with him/her about your health.
4.	To arrange for the GOsC to receive reports from your supervising Consultant/GP/healthcare practitioner/therapist every [] months or on reasonable request by the GOsC. To meet any costs associated with attending such supervision and the provision of reports.
5.	To obtain the approval of a medical practitioner/healthcare practitioner/therapist approved by the GOsC, before undertaking any post for which registration with the GOsC is required or before treating any patients.
6.	To keep your professional commitments under review and limit your practice in accordance with the advice of Consultant/GP/Registered medical practitioner/registered healthcare practitioner/therapist approved by the GOsC.
7.	To cease work immediately if so advised by your Consultant/GP/Registered medical practitioner/registered healthcare practitioner/therapist approved by the GOsC, and to notify the GOsC immediately of this fact.
8.	You are to inform the Council immediately if you move away from []
9.	If you move away from [] or otherwise change your GP, you must: <ol style="list-style-type: none"> a. register immediately with a GP in your new locality who confirms a preparedness to supply the reports and testing required under

	<p>Condition [] above;</p> <p>b. immediately provide the Council with the contact details for your new GP;</p> <p>c. immediately notify the Council of the support arrangements you intend to secure in your new location.</p>
10.	You are to permit [] and any successor to notify the GOsC of any change in your treatment/care/state of health and to confirm the position in writing every three months, even if there has been no change.
Conditions relating to assessment and treatment	
11.	You are to consent to undergo a further full assessment by a Consultant Psychiatrist nominated by the Council, and at a time to be determined by the Council, before the expiry of this Order. You are further to consent to the Consultant Psychiatrist receiving the reports and results from []
12.	You are to seek treatment from/remain under the care of a Consultant Psychiatrist approved by the GOsC and/or mental health professional, until such time as you are formally discharged from their care.
13.	You must commence treatment if, at any point, your General Practitioner/Medical Supervisor recommends re-referral to a consultant psychiatrist and/or mental health professional.
14.	You are to comply with the advice and directions of your treating Psychiatrist and Community Mental Health Team, and to cease work immediately if so advised.
15.	You are to adhere to the medication as prescribed by your treating Psychiatrist.
16.	You are to permit the GOsC to secure an independent psychiatric report on your health for the review of this order.
17.	You are to show a copy of these conditions to your treating Psychiatrist and Community Mental Health Team and to any potential osteopathic employer or potential osteopathic business partner.
18.	You must inform the GOsC immediately if you are discharged by your existing Community Mental Health Care team.
Conditions relating to obtaining reports	
19.	<p>You are to consent to your GP providing reports to the Council every three months. These reports are to cover your general state of health, together with assessments of the results of tests relevant to your abstinence from alcohol, including the following.</p> <ul style="list-style-type: none"> • Full blood count. • Liver function tests. • 5 Carbohydrate-Deficient Transferrin (CDT).
20.	You are to permit the GOsC to liaise with your treating clinicians to secure and obtain reports from them as to your state of health. Such reports are to be submitted to the GOsC every six months.

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21.	You must secure a report from your General Practitioner for submission to the GOsC every three months, as regards your overall health record and in particular your mental health, including your assessed adherence to your GPs advice over prescribed medication. If your GP were to require tests relating to your possible use of drugs or alcohol, then you would be expected to take all reasonable steps to undergo them.
22.	You must secure a report from your Community Mental Health Care Co-ordinator for submission to the GOsC every three months, about progress in relation to your mental state, your compliance with medication, and action you are taking to cope with crisis and stress (including the development of your network of support).
23.	You must secure a report from a psychiatric practitioner with Membership of the Royal College of Psychiatrists for submission to the GOsC every seven months. This report should include, but may not necessarily be limited to, a description of your treatment plan, an analysis of your adherence to it, and the assessed prognosis for the future. Each report should be based on the information contained in the reports referred to at Conditions 1 and 2 above and on a recent face-to-face consultation with you.
Conditions relating to testing	
24.	To comply with arrangements made on or behalf of the GOsC for the testing [including unannounced testing breath/blood/urine/saliva/hair etc.] of [substance to be tested for] for the recent and long term ingestion of alcohol and/or [drug]. The costs of such testing to be borne by you.
25.	To arrange and undertake [type of test] for the recent and long term ingestion of alcohol and/or [drug] every [] months until the expiry of this order. The test must be undertaken in such a way that the chain of custody can be shown to be intact. The results of such tests should be promptly forwarded to the Council. The costs of such tests are to be borne by you.
Conditions relating to support and professional supervision	
26.	To attend meetings of Alcoholics Anonymous/Narcotics Anonymous/or any other support group if recommended to do so by your medical supervisor. The frequency of your attendance should be determined by your medical supervisor. To consent to the group leader writing to the GOsC to confirm your attendance at the meetings and to highlight any concerns/issues.
27.	You are to permit a [] to provide the Council with a report every three months. This report is to include information as to your progress and insight relevant to the management of your condition; your engagement with supportive activities designed to sustain abstinence; and

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	your action to cope with crisis and stress (including the maintenance and development of your support network).
28.	You must secure a Registered Osteopath to act as a mentor supporting your phased return to practice. The identified Registrant must be acceptable to the Council. This must be achieved, and notified to the Council, within 14 days of the date of this determination. He or she shall provide a report to the Council every three months about your progress in relation to your phased return to practice. Each report shall be based upon information obtained in the course of consultations with you, which shall take place monthly.
29.	To refrain absolutely from undertaking the following types of osteopathic treatment...
30.	To maintain a log detailing every case in which you have undertaken [] procedure and to provide a copy of this log to the GOsC prior to any review hearing.
31.	For the purpose of this requirement, supervision means that the supervising osteopath is on the premises, approves in advance the proposed treatment in the light of the case history and examination findings, and has the clinical responsibility for the patient.
32.	You must furnish the GOsC with the full contact details of a professional colleague who is prepared to supervise your compliance with the conditions and provide a report to the GOsC every X months providing details of any progression or regression in the specified area. The supervising osteopath must be approved by the GOsC.
33.	You must place yourself under the supervision of a registered osteopath, who will on a weekly/monthly basis meet with you to review ... The supervising osteopath must be approved by the GOsC.
34.	You must place yourself under the supervision of a registered osteopath, who you should meet at intervals of not more than x and allow the supervisor to prepare a report on which should be sent to the GOsC. Each report should have specific regard to ... The supervising osteopath must be approved by the GOsC.
Conditions relating to practice	
35.	Save in life threatening emergencies, to undertake all consultations with patients in the immediate presence of an osteopath registered and in good standing with the GOsC, or other person acceptable to the GOsC.
36.	Save until otherwise notified by the GOsC, to refrain completely from

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	providing the following types of osteopathic treatment....
37.	<p>You are to prepare a Personal Development Plan (PDP) in consultation with your mentor within 28 days of your first meeting with him or her. The PDP shall include:</p> <ul style="list-style-type: none"> • the steps you propose to take to build up your patient caseload in safe and manageable stages; • the measures you intend to take to refresh your knowledge of Council standards, guidance and protocols; and • your objectives for continuous professional development for the twelve month period from the date of this determination. <p style="text-align: center;">•</p> <p>Your mentor's three monthly reports shall include information as to your progress in fulfilling your PDP.</p>
38.	You must obtain approval from the GOsC before accepting any post for which registration with the GOsC is required/accepting any person as an osteopathic patient
39.	You must practise only within a multi-handed practice in which the principal is a registered osteopath in good standing with the GOsC, who is willing to act as your mentor and supervisor.
40.	To limit your practice to []
41	You must work with your supervisor to formulate a Personal Development Plan, specifically designed to address the deficiencies in the following areas ...

Restrictions	
42.	To refrain from self-medication (apart from over the counter drugs which do not require a prescription) and to take drugs only as prescribed for you by your General Practitioner/registered medical or dental practitioner responsible for your care.
43.	You must not possess any drugs listed in Schedules 1 to 3 of the Misuse of Drugs Regulations 2001 (as amended from time to time).
44.	You are to abstain absolutely from the consumption of alcohol/limit your alcohol consumption in accordance with the directions given by your medical supervisor, abstaining absolutely if they so require.
45.	To refrain from undertaking any Exposure Prone Procedures until such time as: <ul style="list-style-type: none"> • you are on effective combination antiretroviral therapy and have a plasma viral load of less than 200 copies per ML or; • are an elite controller and are subject to plasma viral load monitoring every three months and are under the joint supervision of a Consultant Occupational Health Physician and your treating physician and are registered with the UKAP Occupational Health Monitoring Register.
46.	To provide evidence of your registration with the UKAP Occupational Health Register to the GOsC; and to allow the GOsC to receive regular reports from your Consultant Occupational Health Physician and/or other physicians
General conditions applicable in all cases	
47.	You must notify the GOsC immediately if at any time it becomes apparent to you that you cannot comply with any of the Conditions specified in this Order. This Order will apply for [] months. It must be reviewed before the beginning of three months ending on the date on which it is to cease to have effect (Rule 30(1)(a)) or on the written application of [the Registrant] (Rule 30(1)(b)). The Order may also be reviewed where it appears from information subsequently received that the osteopath is in a material respect not complying with a condition in the Order (Rule 30 (2)).
48.	You must notify the Council immediately if at any time it becomes apparent that you cannot comply with any of the Conditions specified in this Order.
49.	This Order is for a period of [] months to permit [the Registrant] time to re-establish his/her practice and to demonstrate his compliance with the Conditions themselves. The Committee considered that an order for []

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	months was sufficient and proportionate in all the circumstances.
50.	<p>The Committee considered it sufficient and proportionate, given the nature of the risks it had identified, to impose this order for a period of [] years.</p> <p>There will be a review of this order before the expiry of [] months from the commencement of the order.</p>

Annex B

Verification template

When formulating conditions, the Health Committee should ask and answer the following questions:

1. What is/are the shortcoming(s) and/or risk(s) that need addressing?

These will likely flow from the findings that have been reached by the PCC in the relevant case.

Shortcoming	Risk

2. What does the osteopath need to do to address the shortcoming(s) and mitigate the risk(s)?

Restrictive conditions will mitigate the risk and educational conditions will address the shortcoming.

3. How does this protect the public, including patients?

Please explain how the steps proposed at point 2 will protect the public, including patients.

4. How should the osteopath demonstrate that they have mitigated the risk and/or addressed the shortcoming?

It is important that the osteopath knows what evidence it will need to supply to the HC or GOsC in order to demonstrate that they have complied with the conditions.

5. How should the osteopath's claims be independently verified?

It is important that the osteopath's claims are independently verified. This might be achieved by:

- Medical reports
- Routine testing for drugs and alcohol
- Reports from mentors or supervisors

Shortcoming	Risk

6. How can compliance with the conditions be monitored?

Condition	Mechanism for monitoring?