



Policy Advisory Committee

10 October 2017

Review of the *Osteopathic Practice Standards*

Classification	Public
Purpose	For decision
Issue	An update on the consultation on the revised <i>Osteopathic Practice Standards</i>
Recommendations	<ol style="list-style-type: none">1. To note the progress of the consultation on updated <i>Osteopathic Practice Standards</i>.2. To agree the timetable for approval of the revised <i>Osteopathic Practice Standards</i>
Financial and resourcing implications	The review so far has been within budget allocations. Consultation and engagement, including the preparation of documentation is accounted for in the 2017-18 budget. The equality impact assessment advice has also been accounted for within the budgets.
Equality and diversity implications	An equality impact assessment has been developed by an independent consultant, and will be updated throughout the development of updated standards.
Communications implications	The consultation process is being regularly promoted to osteopaths and other stakeholders using a range of media. Weekly updates are considered by the project team and used to adapt our social media messages and channels throughout the consultation to maximise the reach to our stakeholders. A draft communications strategy to introduce the updated revised standards before they come into force in 2019 is being developed.
Annex	None
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Background

1. At the Policy Advisory Committee meeting of 8 June 2017, a draft of the updated *Osteopathic Practice Standards* and Consultation document were discussed.
2. As a result of input from the Committee, the draft was subsequently revised, specifically:
 - a. In relation to Standard A7: '*You must make sure your beliefs and values do not prejudice your patients' care.*' The following paragraph was removed from the guidance:

If carrying out a particular procedure or giving advice conflicts with your personal, religious or moral beliefs, and this conflict might affect the treatment or advice you provide, you must explain this to the patient and advise them they have the right to see or be referred to another osteopath.
 - b. The reference to 'philosophy' as well as osteopathic principles was added to revised B1 guidance.
3. The consultation website was further developed to enhance accessibility and encourage as broad engagement as possible with the consultation.
4. At its meeting of 18 May 2017, Council agreed the updated *Osteopathic Practice Standards* for consultation, and the consultation strategy.
5. The consultation was launched on 1 August 2017 as planned, and will run until 31 October 2017.

Discussion

The consultation

6. The consultation is being conducted via a dedicated website: <http://standards.osteopathy.org.uk/>. The updated *Osteopathic Practice Standards* and the consultation questions are presented on the site, as well as being downloadable in separate PDF documents. Responses to the consultation questions can be made via response pages on the website, and it is made clear that respondents do not have to answer all of the questions unless they wish to. The design of the site enables respondents to easily select the appropriate questions without having to progress through all of them. There is a tick-box response for those who are happy with the updated standards, and have no particular comments to make. We also welcome comments via email to standards@osteopathy.org.uk, and provide hard copies of the consultation and standards to anyone who requests it.
7. Weekly summaries of the consultation process are prepared, and a weekly synthesis of responses is collated. Up to and including week seven of the

consultation, we had received 143 responses via the website, and 67 by direct email.

8. The consultation is being promoted via social media and in *The Osteopath*, e-bulletins and direct emails, and the reach of the consultation is being monitored. For example:
 - The consultation website has had 687 visitors from launch date to week seven, who spend an average of 3.45 minutes on the website.
 - For the latest email sent to osteopaths and others regarding the consultation, 5,371 were successfully delivered (97.8%), and 4,890 of these were opened by the recipients.
 - Our latest Facebook post promoting the consultation reached 920 people, and resulted in 10 'post clicks', of which one was a click on the link.
 - The top performing Facebook post was a link to the consultation video, which resulted in 834 views.
 - We have had 30 requests for 'toolkits', which is a presentation and documentation to enable groups to run their own sessions to engage with the consultation.

Stakeholder engagement

9. A range of stakeholder engagement is planned as part of the consultation strategy. This includes:
 - Patient focus group
 - Meeting with Osteopathic Educational Institutions
 - Presentation to senior management team at the University College of Osteopathy
 - Presentations to regional osteopathic groups (Scotland, London, Kent and East Sussex, Bedfordshire)
 - Presentations with students (BCOM, Swansea)
 - Direct feedback from policy officer on the GMC standards and ethics team
 - Web meeting with registration assessors/education visitors
 - GOsC stand at the iO annual convention to promote the consultation

Interim feedback

10. We are not at the conclusion of the consultation at present, and this update is presented to the Committee as a flavour of progress so far.
11. There are two standards which are drawing the majority of comments to date. These are:
 - B1 (*You must have sufficient and appropriate knowledge and skills to support your work as an osteopath*), and
 - C6 (Be aware of your role as a healthcare provider to promote public health).

12. In relation to B1, the issue centres around the guidance, which sets out what such knowledge and skills should include. Paragraph 1.2 of the guidance states that this should include; *'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'*. Some feel that referring to philosophy and principles within guidance is downgrading it (though philosophy is not mentioned within the current version of the *Osteopathic Practice Standards*). Examples of feedback include:

"Osteopathic philosophy and principles should be a standard."

"The philosophy and principles are the essence of Osteopathy and must be included as a standard."

"Philosophy and principles is fundamental to an osteopathic approach to health care and it is important to state this. Otherwise osteopathy can seem little different to other manual therapies rather than the unique system of healthcare that it is."

"We need to retain the Osteopathic ness otherwise Osteopathy is diluted and downgraded. Osteopathic philosophy and principles should be a standard."

And some in support of the updated standard as drafted (referred to as Option 2 in the consultation document).

"Option 2 makes more sense to me. I like to be guided rather than told what to do."

"Caters for the breadth of opinion in the profession."

13. By the end of week seven of the consultation, we had received 122 website responses relating to this standard, of which 10 were supportive of the OPS as drafted, two suggested removing all reference to philosophy and principles, and 110 felt that philosophy and principles should be included within a standard. The majority of direct emails received related to this also, and are in favour of referring to osteopathic philosophy and principles within a standard.

14. In relation to C6, the majority of responses received so far do not like the word 'promote' in relation to public health within this standard. Examples of responses include:

"I do not accept Standard C6: 'Be aware of your role as a healthcare provider to promote public health'. I propose: 'Be aware of your role as a healthcare provider in relationship to public health.'"

"I do not accept Standard C6: 'Be aware of your role as a healthcare provider to promote public health'. I propose: 'Support patient care through an awareness of public health issues'"

"I do not accept Standard C6: 'Be aware of your role as a healthcare provider to promote public health'. I propose: 'Be aware of your role as a healthcare provider with regard to public health'. The guidance is clear but it does not match the text of the Standard. The text of the standard could be interpreted as a requirement for osteopaths to actively promote government policy of healthcare rather than making the patient aware of their options, and this is not compatible with our role as independent healthcare providers."

And some in favour of the standard as drafted:

"Public health awareness and promotion is essential part of any healthcare professional so I totally support the inclusion of promotion of public health."

"I feel the GOsC wording is fine. Surely we can all choose HOW we promote general public health?"

15. By the end of week seven of the consultation, we had received 129 website responses relating to the standard and its guidance. Of those, 17 were supportive of it as drafted, and 112 were along the lines of the examples above, suggesting revised wording of the standard to remove the word 'promote'. Again, a majority of the direct emails received were similarly against this standard as drafted, and suggesting revised wording.
16. A full analysis of responses will be undertaken once the consultation has ended on 31 October 2017. A report will be prepared which will consider key themes arising, including the issues around B1 and C6 as set out above. Further input from the Stakeholder Reference Group will be sought with a meeting in January 2018.
17. In view of the consistent nature of the responses in relation to standards B1 and C6, it is felt that detailed consultation outcomes and Stakeholder Reference Group recommendations should be reported back to the Policy Advisory Committee at its meeting of 15 March 2018, rather than direct to Council at its meeting of 31 January 2018. A final version of the updated *Osteopathic Practice Standards* will then be submitted to Council at its meeting of 3 May 2018 for approval prior to publication.

Recommendations:

1. To note the progress of the consultation on updated *Osteopathic Practice Standards*.
2. To agree the timetable for approval of the revised *Osteopathic Practice Standards*