



General
Osteopathic
Council

Osteopathic Practice Framework

CONSULTATION
DOCUMENT
MARCH 2009



Osteopathic Practice Framework

CONSULTATION

The General Osteopathic Council (GOsC) believes that the time is right to be much clearer about the scope of osteopathy. At present, there is a considerable lack of clarity around what constitutes osteopathic practice. This not only raises questions for us as a regulator, but also has the potential to cause confusion amongst the public.

We are aware that opinions vary on where the line should be drawn in describing osteopathy, and without a full debate – involving as many osteopaths as possible – we will not be able to make any progress in this area. That is why we are embarking on these first consultative steps. We want to hear from you about whether you feel it necessary to define osteopathy and, if so, how to proceed and what the outcomes should be.

To generate debate, we ask you to read this consultation document and provide feedback by completing and returning the enclosed questionnaire. This can be completed anonymously and should be returned to us at:

Osteopathic Practice Framework
General Osteopathic Council
Osteopathy House
176 Tower Bridge Road
London
SE1 3LU

We will also be consulting with osteopathic education providers (pre- and postgraduate), the National Council for Osteopathic Research (NCOR), the British Osteopathic Association (BOA) and other osteopathic and external stakeholder groups.

Alternatively, you can access the consultation and questionnaire online via the GOsC public and zone websites (www.osteopathy.org.uk).

THIS ROUND OF CONSULTATION CLOSES ON 30 JUNE 2009.

Osteopathic Practice Framework

Introduction

- 1** This framework is intended as guidance for those with an interest in what is involved in osteopathic practice. It provides a shared reference for osteopaths and those outside the profession – such as patients, other healthcare professionals and commissioners of health services, in particular – as to what might be expected from osteopathic healthcare. The framework is not intended to be a detailed list of all aspects of osteopathic procedures, nor is it a prescriptive scope of practice for osteopathy. It sets out general principles for the osteopathic perspective on healthcare and indicates the potential types of approach to clinical practice that may be encountered, and in doing so provides information on the osteopathic approaches more commonly used and those less so.
- 2** The framework aims to convey what the typical experience of osteopathic practice is likely to be while allowing the possibility of a broad range of practice. This flexibility is important to permit development and innovation in osteopathic practice. However, it is the responsibility of osteopaths to ensure that they are practising within their limits of competence and that patients are fully informed of the approach to practise that is being taken.
- 3** From a regulatory perspective, this framework permits flexibility in the range of osteopathic practice while affording protection and reassurance to the patient. It requires osteopaths to be explicit about their proposed treatment, particularly where it is one that may be less familiar, and to be vigilant in ensuring that patients have understood the treatment proposed.

Osteopathy

- 4** Osteopathy is an independent system of primary contact healthcare that focuses on the diagnosis, management, treatment and prevention of musculoskeletal and other related disorders without the use of drugs or surgery. It is a patient-focused, rather than a condition / disease-centred approach to healthcare.
- 5** Osteopaths, in close collaboration with the patient, seek to identify the causes of impaired health and restore the optimum functioning of the body, aiding its own intrinsic ability to heal. Diagnosis involves the use of a combination of specific osteopathic and conventional medical examination procedures. A particularly well-developed skill for osteopaths is the use of touch (palpation) to evaluate the state and motion of tissues and joints, and the ability to monitor changes in these.

- 6 Treatment is based on the skilled application of osteopathic manipulative techniques tailored to the individual person and reinforced by other self-help measures, such as guidance on diet, lifestyle, coping strategies and exercise. This approach emphasises the integration of the musculoskeletal system with other body systems and the influence that the impaired function of each has on the other. It also seeks to empower patients in assisting their own recovery to good health.
- 7 Some important features of the osteopathic profession are that:
 - i It is a distinct healthcare profession, recognised by Parliament in the Osteopaths Act 1993, whose practitioners are highly trained to practise autonomously in a primary contact setting (patients may consult them directly without being referred by another healthcare professional such as a doctor). It is a profession that has statutory regulation to ensure the safety of patients and whose practitioners commit to providing healthcare with high standards of practice and conduct (see the GOsC's *Osteopathic Practice Standards* and *Code of Practice*). In the UK, only those registered with the GOsC are permitted to use the title osteopath and to practise accordingly
 - ii It is a system of healthcare that focuses on the patient as an individual and respects their dignity and views, involving them closely in decisions about their care
 - iii Osteopaths practise as autonomous professionals so that they take full clinical responsibility for the care of their patients. However, it is important for the benefit of patients that osteopaths collaborate with other healthcare professionals when it is appropriate. Osteopaths recognise when this is required and seek appropriate advice from, and refer to, other healthcare professionals when it is in the best interest of their patient.

Osteopaths

- 8 Osteopaths need to be able to demonstrate the qualities of an autonomous patient-focused practitioner who is caring, empathetic, competent, reflective, trustworthy and professional, and who has a high level of practical skills and problem solving ability.
- 9 They need to possess a highly developed knowledge and clinical ability to integrate multiple factors when taking a comprehensive overall approach to the health needs of an individual. Osteopaths also need to exhibit the responsible professional attitudes consistent with being a primary contact healthcare practitioner.
- 10 Osteopaths have a commitment to evaluating effectively any risks associated with osteopathic care, practising within their limitations, continuing to learn and develop professionally, and maintaining high-quality care that is well informed by evidence.

Osteopathic practice

- 11** Osteopathic practice seeks to blend a philosophical approach with intellectual and practical skills, using a tailored 'package of care' most suited to assisting an individual's return to health. It is characterised by the following distinctive philosophical and practical features:
- i Emphasis is on the patient and not on their disease. This has been a long-standing principle that informs the whole of the osteopathic approach to patient care. It is about seeing a person not as someone simply with a disorder but as someone who is seeking the restoration of their optimum health. It involves viewing the person as having an integrated blend of factors that combine to influence their health. Osteopathy seeks to identify and address the key influences that will lead to restored health and well-being
 - ii The intention to enhance the intrinsic health-maintaining and health-restoring capabilities of the individual person. This involves the consideration of a broad range of factors to identify and resolve the causes of impaired health
 - iii Individually tailored intervention and advice encompassing a range of specific technical treatment techniques and approaches. These may include specific osteopathic manipulation techniques, exercise advice, lifestyle advice, nutritional advice, coping strategies, and other guidance to enable the patient to understand the causes and contributing factors of their impaired well-being
 - iv An approach that emphasises the integration of the musculoskeletal system with other body systems, the impact of impairment of function, and the adverse effects such impairment may have on the health of an individual
 - v Close collaboration between the patient and osteopath to identify the factors contributing to the patient's impaired well-being, and to determine the clinical and other changes needed for recovery and restoration of health
 - vi Enabling the patient to understand and implement measures to take responsibility for assisting their own recovery and enhancing their health
 - vii Using critical reasoning to apply knowledge and skills in an integrated and informed manner.

Typical experience

- 12** Osteopaths may practise in a variety of settings, including as a single practitioner in an independent clinic, as part of a group practice with other osteopaths or healthcare practitioners, and as part of an NHS provision.
- 13** Wherever osteopaths practise, there are certain fundamental principles that will inform the experience a patient seeking osteopathic healthcare will have, and the following describes how these might be typically applied in the consultation process with an osteopath.

BEFORE THE CONSULTATION

- 14 Patients will have access to relevant information about the osteopath and the practice before making an appointment, such as fees and relevant qualifications.

CASE HISTORY

- 15 The osteopath will ask the patient for the details of the presenting problem and a comprehensive past health history in a way that allows the patient to express their version of events and thoughts, with occasional prompting to focus on and elicit further detail in important areas.
- 16 A range of relevant questions is asked, prioritised according to the individual patient, in order to:
 - i Eliminate potentially serious pathology and to explore possible diagnoses, and
 - ii Consider the details of factors that may have led to the problem, such as occupational or recreational activities.
- 17 The osteopath will maintain a comprehensive written record of the consultation and subsequent contact with the patient. This, and any other information arising from consultation with the patient, will be treated as strictly confidential.

OSTEOPATHIC CLINICAL EXAMINATION

- 18 Based on the case history, a range of possible diagnoses is generated. A relevant and detailed osteopathic clinical examination, prioritised and tailored to the individual patient and their problem, is performed in order to explore these.
- 19 This examination will usually involve a combination of specific osteopathic examination techniques and clinical examination techniques widely used by other healthcare practitioners. Thus, an osteopath might use observation; palpation (the use of the hands to detect changes in the tissues); evaluation of the movement of joints, muscles and other soft tissues; and clinical examinations of the nervous system and the circulatory and respiratory systems.
- 20 This will lead to a diagnosis of what the osteopath judges to be causing the problem. The osteopath will then determine the most relevant options for dealing with this and communicate these to the patient.

A NOTE ON DIAGNOSIS

Diagnosis can be viewed as taking a complex set of findings and using these to identify a single disease, condition or 'syndrome'. This is useful in communicating well-understood pathology, signs and symptoms, and treatment options in a shorthand way. However, when the diagnostic picture is more complex, the osteopath will strive to achieve a more comprehensive understanding and provide a detailed explanation of the various factors involved rather than simply providing a convenient label as a diagnosis.

INFORMING AND INVOLVING THE PATIENT

- 21 It is very important that the patient is given an explanation that they understand for the osteopath's diagnosis and suggested course of action, and for the different treatment options available.
- 22 The approach to osteopathic care for the patient depends on the priorities determined by the preceding questioning and osteopathic clinical examination. It may be that these suggest the patient needs referral for further investigations such as blood tests, X-ray, magnetic resonance imaging (MRI) or ultrasound examination, or for an opinion from another healthcare practitioner.
- 23 It may be that osteopathic treatment is not the most appropriate primary means for managing the patient's impaired health, although it could possibly be used in conjunction with other treatment.
- 24 If osteopathic treatment is advised, the osteopath will explain what is involved and the likely outcomes and timescales. The potential side effects and risks will also be explained in a way that the individual patient is able to understand and give consent for.
- 25 The patient is asked for consent before any treatment commences.

OSTEOPATHIC TREATMENT AND MANAGEMENT

- 26 When the patient has consented to osteopathic treatment, a range of osteopathic manual techniques may be used combined with health advice. This may involve the manipulation of soft tissues, such as muscles and ligaments; the specific application of movement to, or positioning of, joints to improve the range and quality of their movement; the specific and controlled rapid manipulation of joints; and other manual techniques to assist the recovery of function in soft tissue and skeletal and visceral structures.
- 27 This treatment will usually be accompanied by advice to the patient, which may involve the recommendation of exercises, lifestyle adjustment, nutritional advice and strategies for coping with their health problem. The osteopath will aim to help the patient gain a greater understanding of their problem to assist their recovery and return to normal activity.

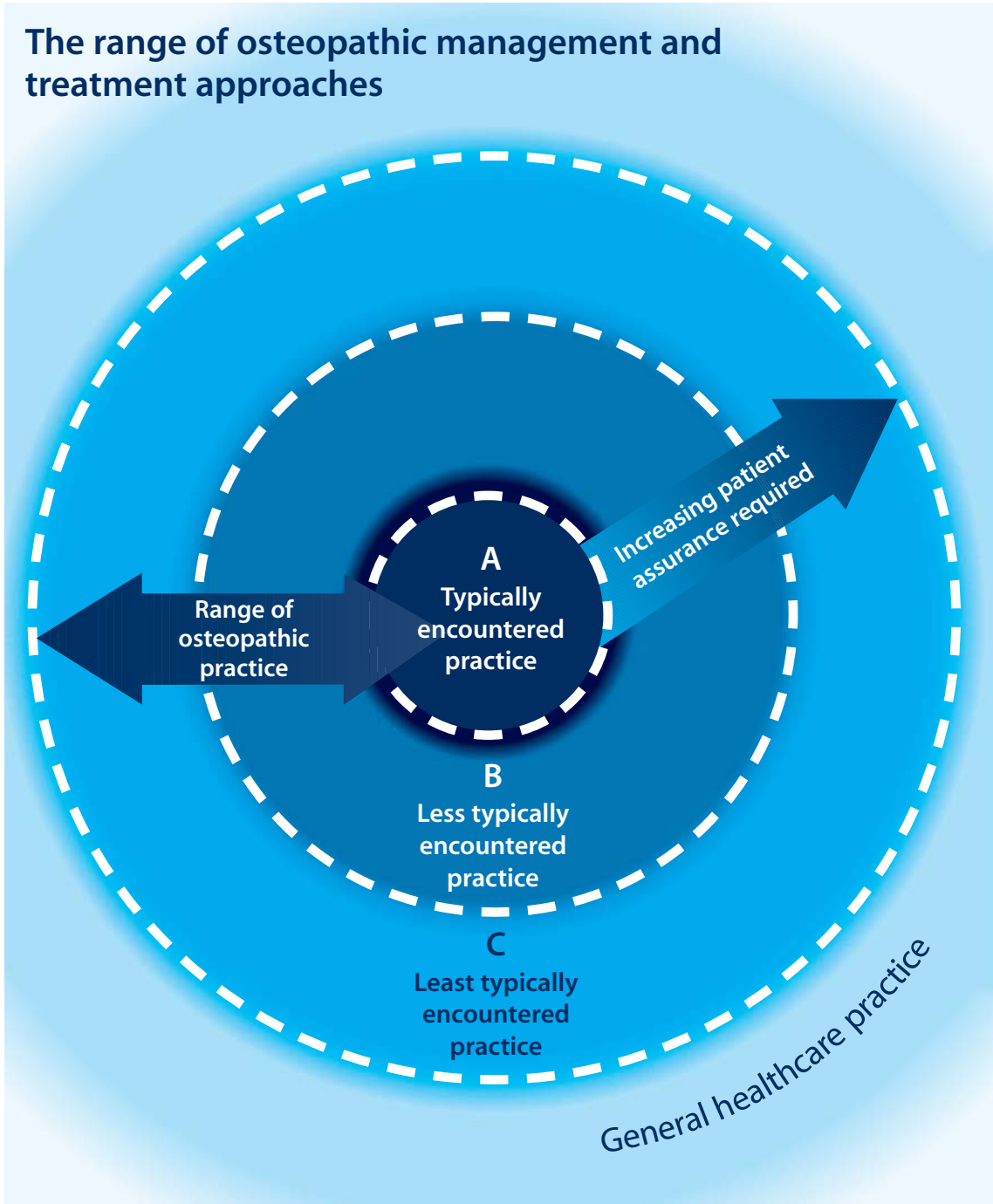
CONTINUING REVIEW OF DIAGNOSIS, TREATMENT AND MANAGEMENT

- 28 In following treatment sessions the osteopath will ask questions of and re-examine the patient to assess their progress and to confirm the initial 'working diagnosis'. It is important that osteopaths continually reflect on their treatment decisions and check that the patient is responding to treatment as expected. If this is not the case, the osteopath may revise their initial diagnosis or refer the patient for further clinical investigation or opinion from another healthcare professional if appropriate.
- 29 The number of treatments and length of time this will take will vary depending on the individual patient and their problem. However, the patient will be kept informed of the osteopath's rationale for continuing care and will be able to discuss changes in the planned treatment and whether other treatment options would be preferable.

Osteopathic treatment approach

- 30** The treatment and management of a patient's health problem will depend on the needs of that particular individual. There are many treatment approaches in osteopathy and there might be some variation according to the training and experience of the particular osteopath providing treatment. It is not appropriate to prescribe specific treatments for specific conditions as this is contrary to the principle of tailoring osteopathic care to individual need. It is also not helpful to dictate a limited scope of practice for osteopaths as they will practise according to their training and competence using their clinical judgement and skills.
- 31** Nevertheless, it helps patients' expectations and understanding of osteopathic treatment if a broad outline of the types of procedures commonly used and those less common is provided. The information provided in this section is intended to act as a guide to these procedures so that patients and osteopaths may have a shared understanding of the range of osteopathic treatment approaches that might be used.
- 32** The application of osteopathic care is broad and it may be used to influence a patient's return to their optimum health where it has been impaired due to a wide variety of problems. It is not intended to give an exhaustive list of conditions or diseases where osteopathic treatment may help, but the following broad areas of problems are included as a general guide to the types of presenting problems that osteopaths may treat:
- i Problems relating to the musculoskeletal and nervous systems such as pain affecting, and impaired function, of muscles and joints and their associated structures. This may be across the age range from young children to those of advanced years
 - ii Sports -related injuries
 - iii Work-related injuries
 - iv Impaired function of body systems which may present as digestive problems, breathing problems and circulatory disturbances
 - v The effects of tension and stress on the body
 - vi Pain and impaired function of the musculoskeletal system and closely related structures during pregnancy.
- 33** Osteopaths treat a wide range of people of different ages, from babies and young children to the elderly. It is not appropriate to prescribe a particular type of osteopathic treatment for a specific condition or type of person. This lies with the clinical judgement of the osteopath.
- 34** It is important to remember that osteopathy may not be the only treatment that patients will receive for their health problem. In many cases osteopathic treatment alone will be sufficient, but in others osteopathic care will be provided in conjunction with other healthcare, such as that given by doctors.

FIGURE 1



--- Dashed lines indicate changing boundaries

- 35** To assist with communicating the type of approach that may be taken in osteopathic practice, the range of osteopathic management and treatment approaches has been divided into three broad categories (see figure 1, page 9):
- > **A.** Typically encountered osteopathic practice – the features of the typical experience most likely to be had by patients when seeing the majority of osteopaths.
 - > **B.** Less typically encountered osteopathic practice – the features of osteopathic practice that may be experienced when seeing osteopaths who practise using treatment techniques less commonly used.
 - > **C.** Least typically encountered osteopathic practice – this may involve much less frequently practised approaches, new emerging areas of treatment or an osteopath practising in a specific area only. It may be related to the type of patient, the type of treatment used or the type of problem seen.

ASSURANCE FOR PATIENTS

- 36** The diagram on page 9 illustrates that as the area of osteopathic practice becomes increasingly less associated with core practice, there is an increasing need for greater assurance to the patient regarding the credibility, safety and rationale of the approach.

The following indicates the themes that may need to be considered in providing increased assurance to patients as practice becomes less 'core', with differing emphasis given depending on the particular individual circumstances:

- i Decreasing familiarity of osteopathic practice needs increasing explanation of the rationale for its use
- ii Extra vigilance may be required to ensure that the patient understands the proposed treatment and is able to reflect on it in order to provide informed consent. The importance of allowing the patient increased time to consider the information before reaching a decision is emphasised where treatment may be less familiar
- iii Increasing reassurance of the osteopath's education and training may be necessary
- iv Increasing reassurance required to provide sound and plausible rationale based in evidence as far as possible (this recognises the difficulty in the early stages of the development of a new practice). This is linked with the necessity to clearly explain and evaluate the risks compared with the benefits of the suggested approach
- v Particular care in explaining alternative options may be required, especially in the case of newer areas of practice
- vi Particular care may need to be taken that professional indemnity insurance sufficiently covers the area of practice
- vii There may be an increasing need to communicate to patients that the osteopath is tending to narrow their practice to a more limited range of potential treatments, patients or types of problem. This is to avoid a mismatch between patient expectations with the likely treatment to be given
- viii Increasing awareness by the osteopath of the need to treat in a way that is more expected or to refer to an osteopath practising in a manner more familiar to the patient if necessary

- ix Care needs to be taken to ensure that patients and the public are not misled into believing osteopathy is something it is not, or that an osteopathic qualification entitles the osteopath to practise another profession, unless they are also qualified and licensed to practise that profession
 - x A need to follow good practice guidance provided by a responsible body of expert opinion
 - xi Recognition that in areas of new or extended osteopathic practice, another profession may possess expert opinion to inform that practice
 - xii Increasing vigilance may be required to ensure that practice complies with legislation, that it is reasonable and could be seen by the osteopathic profession as being clearly linked to the principles of osteopathic practice.
- 37** It is important to realise that an osteopath's practice may incorporate aspects of each of the three broad categories outlined on page 10. There will be a spectrum where some osteopaths will encompass the wider range of osteopathic practice while others may focus within a particular area. Whatever management and treatment approaches practised by individual osteopaths, they must be able to recognise limitations in their competence and practise within these limits.
- 38** Osteopathic practice will continually develop and what is regarded as unfamiliar now may become a frequently used osteopathic approach in the future. The dotted lines in the diagram on page 9 emphasise that osteopaths' practice is not constrained to one area. There are likely to be changing boundaries where less familiar practice might become core, or that the frontiers of current osteopathic practice may in future extend into using approaches currently associated with other healthcare professions. These approaches may also be entirely innovative.

A. TYPICALLY ENCOUNTERED OSTEOPATHIC PRACTICE

- 39** The following outlines the features of the typical approach that may be experienced by the majority of patients during consultation with, and treatment by, an osteopath:
- i The consultation will mainly follow the pattern described above in the 'Typical experience' section on page 5
 - ii Osteopaths may use the same clinical examination tools as other healthcare professionals in order to examine body systems such as the heart and lungs, nervous system and eyes, or for measuring blood pressure, for example. These may be familiar to many people and will be used in conjunction with specific osteopathic examination techniques
 - iii Techniques may be used to influence changes in soft tissues, such as reducing muscle tension and improving function. These are usually a range of manual techniques involving manipulation of the soft tissues and joints
 - iv Techniques may be employed to improve the range of motion of joints by their repeated movement (mobilisation / articulation)
 - v Techniques may be applied using the patient's effort in contracting muscle, often against resistance, to reduce muscle tension and to improve the range of motion of joints. This is commonly referred to as muscle energy technique (MET)

- vi Techniques may be applied to reduce muscle tension and pain, and to improve the motion and function of joints, by placing parts of the body in a position of ease or moving joints in such a way as to achieve this. These techniques are commonly referred to as facilitated positional release, myofascial release, functional technique, strain and counterstrain, and fascial-ligamentous release
- vii High-velocity low-amplitude manipulative techniques may be used where rapid, controlled and specific motion is applied to a joint in order to improve its function and range of movement. This might involve areas of the spine, limbs or other joints and is often accompanied by an audible 'clicking' sound that is thought to be the result of releasing air around the joint (or a vacuum effect) and is not harmful
- viii It may be intended that the treatment will have an indirect effect on other regions of the body, such as in the musculoskeletal system away from the site of treatment or on visceral structures, for example. Osteopaths will explain their rationale for applying this kind of treatment to their patients in a way they can understand and give consent for
- ix Techniques to improve the functioning of the lymphatic system (lymphatic manipulative techniques) may be used
- x Advice may be provided to the patient in order to assist their recovery and return to normal activity. This may involve the recommendation of exercises and lifestyle adjustment, nutritional advice and strategies for coping with their health problem.

B. LESS TYPICALLY ENCOUNTERED OSTEOPATHIC PRACTICE

- 40** This section describes the features of osteopathic practice that a fewer number of patients may experience and is practised less commonly than that described in the 'typically encountered practice' section on page 10. Osteopaths practising in this way need to be able to demonstrate that they have the appropriate education, training and competence in areas listed below:
- i Manual techniques with the intention of directly affecting the tissues influencing various organs. These are often referred to as visceral techniques
 - ii The intention to restore function and optimum health through techniques that involve the cranial and sacral bones and what is referred to as the involuntary mechanism – often called cranial, cranosacral or involuntary mechanism techniques. Osteopaths using these techniques will explain them fully to patients so they can understand them and give their informed consent for their use
 - iii Palpation and identification of tender points in tissues in order to assist with the diagnosis of visceral structure problems (Chapman's reflexes).
 - iv The use of electrotherapy such as ultrasound, interferential or laser
 - v Examination of intimate areas for the purpose of diagnosing problems relating to these areas. Specific treatment techniques may also be applied to these areas where appropriate. This type of examination and treatment could be considered sensitive for sexual or cultural reasons. The osteopath's rationale for such treatment must be clearly explained so the patient understands and is able to give informed consent to proceed. The patient should be offered time to reflect on the information if they wish, before making a decision. There should be no undue pressure exerted to coerce patients into a decision they may not be entirely comfortable with.

C. LEAST TYPICALLY ENCOUNTERED OSTEOPATHIC PRACTICE

41 The following describes the type of osteopathic approach that:

- i may be encountered by a fewer number of patients than that described in sections A and B;
- ii is practised less often by an osteopath than that described in sections A and B; and
- iii is practised by a smaller number of osteopaths than the practices described in sections A and B.

42 Osteopaths may often also follow the osteopathic practice described in sections A and B, but some may choose to confine their practice to a specific area outlined below. Osteopaths practising in these least typically encountered areas need to be able to demonstrate that they have the necessary education, training and skills and follow good practice guidance issued by a responsible expert authority where relevant.

- i Treatment of expectant mothers and the newborn with the supervision of a medical practitioner or a registered midwife. The osteopath would not usually take clinical responsibility for management of the pregnancy itself as this is reserved by law for the practitioners just mentioned.
- ii The use of adjunct techniques to assist the patient's recovery, such as:
 - > Acupuncture needles to either expressly influence the pain and tension in muscles and related structures (Myofascial or Travell trigger points), sometimes referred to as 'dry needling', or applied as in the practice of acupuncture. The use of this treatment and the rationale for selecting it will be explained fully to the patient so that the appropriate informed consent can be given.
 - > Cognitive behavioural therapy (CBT) to address psychological aspects of patients' impaired health
 - > Detailed nutritional and dietetic treatment
 - > Herbal and homeopathic medications
 - > Detailed ergonomic advice.
- iii Focusing on the treatment of specific types of patient or presenting problem. This might include areas such as:
 - > Treatment of children and their specific problems
 - > Problems arising from particular occupational causes
 - > Treating problems affecting particular body systems presenting as gynaecological, respiratory or specific neurological problems, for example
 - > Treatment of elite athletes
- iv Potential emerging areas of treatment such as the use of prescribed medication or surgical techniques
- v Osteopathic care of animals under the supervision of a veterinary surgeon

- 43** Osteopathy is a profession that is constantly evolving, and innovation in diagnosis, treatment and management is necessary for its continued development and for the benefit of patients. In any healthcare system, patients may be unfamiliar with procedures and concepts, and the responsibility lies with practitioners to ensure their patients are well informed. Osteopaths will explain as reasonably as possible their intentions and the rationale for their actions, ensuring the patient understands. The level of understanding of osteopathic procedures and concepts will inevitably vary between different patients, but it is reasonable that extra vigilance will need to be taken by the osteopath to ensure understanding, particularly when less common procedures and approaches are used.
- 44** Although it is essential that osteopathic practice should be grounded in plausible and reasonable evidence, it may sometimes involve the use of techniques that are based on clinical judgement and experience and where the evidence for their use is yet to be fully developed. In such cases, the osteopath must ensure careful explanation is given and take extra care in making sure the patient understands any potential risks and the nature of the treatment they are consenting to.
- 45** Where an osteopath has developed a particular style of practice that has many more similarities with another healthcare profession than it has with osteopathy, the osteopath needs to ensure that patients are not confused and needs to reflect on whether they are practising osteopathy at all. Careful reflection might lead to a decision that a certain way of practising is better suited to a healthcare profession that has the most relevant expert opinion and practice.



If you have any difficulty accessing or reading this document,
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