



**General
Osteopathic
Council**

Osteopathic Practice Standards

comprising the *Standard of Proficiency* and
Code of Practice for osteopaths

CONSULTATION QUESTIONNAIRE

INTRODUCTION

The General Osteopathic Council (GOsC) is seeking the views of osteopaths, patients and the public on a revised set of practice standards for the osteopathic profession.

ABOUT US

The GOsC regulates and develops osteopathic practice in the United Kingdom. Our purpose is to protect the public by ensuring high standards of education, practice and conduct amongst osteopaths.

OSTEOPATHIC PRACTICE STANDARDS

Osteopathic practice standards are currently set out in the *Code of Practice* for osteopaths (May 2005) and *Standard 2000 – Standard of Proficiency* (1999). We have recently conducted a comprehensive review of these standards to ensure they are up to date and fit for purpose.

OUR PROPOSALS

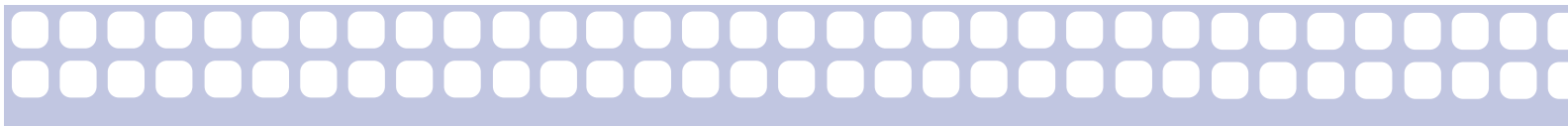
The proposed Osteopathic Practice Standards document offers a revised set of standards and, for the first time, brings together the *Code of Practice* and the *Standard of Proficiency*.

THE CONSULTATION PROCESS

We are seeking the views of osteopaths, patients and the public on these revised standards of osteopathic practice and on the proposed format of this draft document.

Timings: the consultation will run for 12 weeks: from 1 September to 30 November 2010.

Process: the consultation is being conducted on behalf of the GOsC by independent consultants Hewell Taylor Freed & Associates.



Respondents are invited to complete the questionnaire booklet and return it to Hewell Taylor Freed & Associates directly by emailing it to: osteosurvey@gmail.com.

In the unlikely event that you are unable to return the questionnaire electronically, you can print it and complete it by hand and then return it by post to:

Osteo Survey
Hewell Taylor Freed & Associates
PO Box 1210
Hemel Hempstead
HP1 9EY.

Please **do not** send consultation responses to the GOsC.

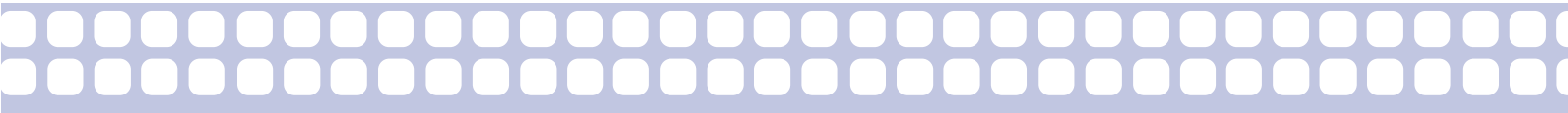
Should you require a printed copy of the questionnaire, please email your request to Hewell Taylor Freed & Associates at: denisetaylor.htp@virgin.net or call 01442 834 021.

COMMENTS ON THE CONSULTATION PROCESS ITSELF

If you have concerns or comments you would like to make relating specifically to the consultation process itself, please contact Denise Taylor at Hewell Taylor Freed & Associates on 01442 834 021 or email: denisetaylor.htp@virgin.net

CONFIDENTIALITY OF INFORMATION

The information you provide will be used by Hewell Taylor Freed & Associates only for the purposes of analysing the consultation responses. Reports published relating to this consultation exercise will not identify any respondent. Personal data will be collated and a report provided to the GOsC only. The collated data may be presented in the final consultation report. Hewell Taylor Freed & Associates is registered with the Information Commissioner's Office in regard to the Data Protection Act 1998 and complies with that Act.



Questions about the format of the document

1. Do you agree that it is useful to have the *Standard of Proficiency* and the *Code of Practice* combined into one document? (Tick appropriate box)

Yes No

If **no** please provide your reasons below:

2. Do you like the format of the Osteopathic Practice Standards document?

Yes No

3. What (if anything) is it that you particularly like about this proposed format?

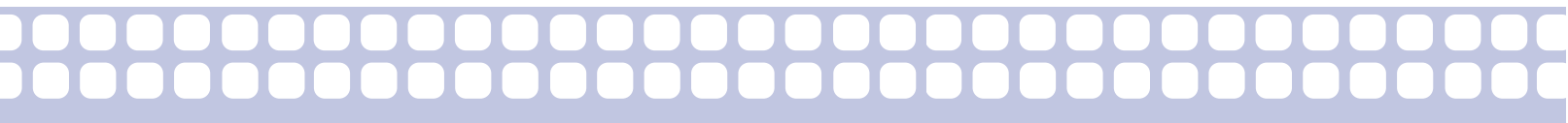
4. What (if anything) is it that you particularly dislike about this proposed format?

Questions about about the standards

5. Do you think that the revised standards are adequate to ensure public and patient safety?

Yes No

If **no** please provide your reasons below:



6. Are the standards clearly worded?

Yes No

If **no** please provide full details below of any and all aspects which are not clearly worded:

Questions about the guidance

7. Do you think the guidance provided in the document is adequate?

Yes No

If **no** please provide full details below:

8. Is the guidance clearly worded?

Yes No

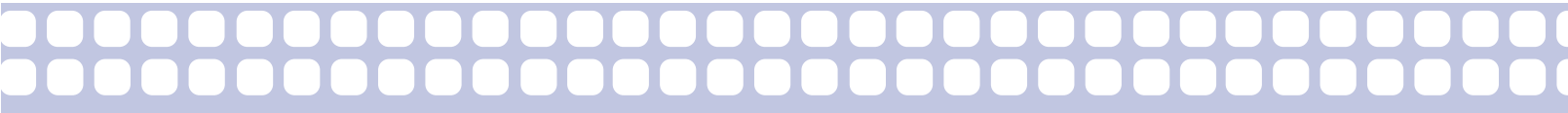
If **no** please provide full details below of any and all aspects which are not clearly worded:

General questions

9. Are there any other suggestions you can make which you feel would improve the clarity of the document?

Yes No

If **yes** please provide full details below:



10. In your opinion, is there anything in the document that could be interpreted differently (either by osteopaths or by patients)?

Yes No

If **yes** please provide full details below:

11. Is there anything in the document you consider is not required?

Yes No

If **yes** please provide full details below:

12. In your opinion is there anything missing from the document?

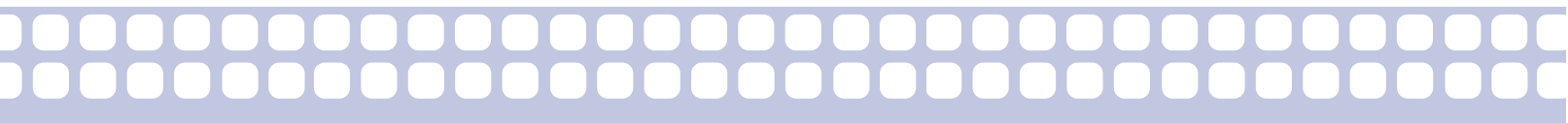
Yes No

If **yes** please provide full details below:

13. Once finalised, the revised Osteopathic Practice Standards will set the standards of practice expected of all osteopaths. With that in mind, are there any requirements included within the document that you think will adversely affect either osteopaths or members of the public in relation to gender, race, disability, age, religion or belief, sexual orientation or any other aspects of equality?

Yes No

If **yes** please provide full details below:



14. Are there any other comments regarding this document that you would like to make at this time?

Yes No

If **yes** please provide full details below:

Questions about you

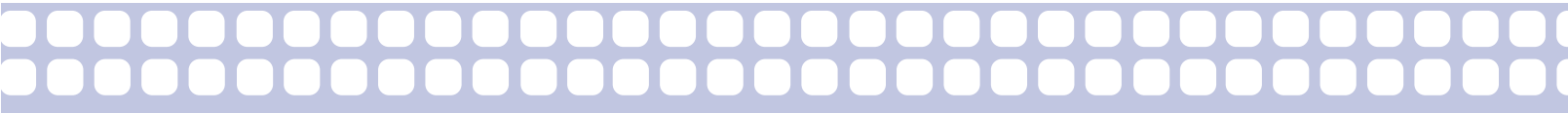
The GOsC is committed to promoting equality and diversity. In order to do this successfully, it is important that consultation exercises are as inclusive as possible. The following questions ask you to provide a small amount of personal information, which will be anonymised, to help the GOsC in a number of ways, including:

- > understanding the demographics of the osteopathic profession;
- > enabling the GOsC to prioritise actions to support protected groups under the definitions set out in the Equality Act 2010; and
- > forecasting development needs for the profession over a period of time.

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Should you not wish to answer any particular aspects of the equality and diversity section, please tick the 'Do not wish to state' box.

Some of the initial questions are for osteopaths only so that we can understand the environment in which they currently work.



15. Are you responding:

- (a) As an individual Please go to question 17
(b) On behalf of an organisation Please go to question 16

16. Please tick the category which best describes your organisation:

- (a) Osteopathic education provider
(b) Osteopathic professional association
(c) Other professional association
(d) Statutory regulatory body
(e) Public/patient representative body
(f) Other

Please specify:

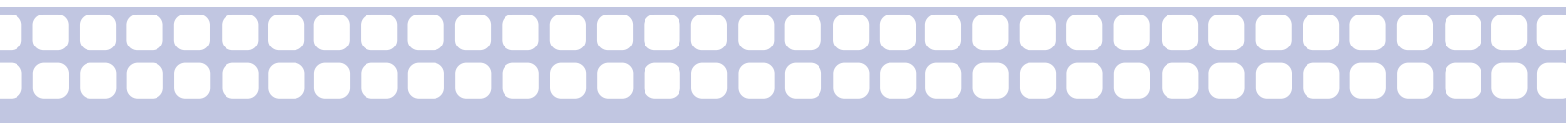
If you are responding on behalf of an organisation, there are no more questions for you to complete. Thank you for your views.

17. Please tick the category which best describes you:

- (a) Osteopath Please go to question 18
(b) Patient Please go to question 22
(c) Member of the public Please go to question 22
(d) Other Health Professional Please go to question 22
(e) Other Please go to question 22

Please specify:

The next section is for individual respondents and osteopaths. If you are not an osteopath, please go to question 22.



For osteopaths only

18. As an osteopath do you mainly work in:

- Your own sole practice
- A group setting with other healthcare professionals
- A group osteopathic practice owned by someone else
- A group osteopathic practice owned by you
- A group osteopathic practice owned by you and others

19. As an osteopath, please specify:

a. How many hours each week you:

- Practise (enter 0 for non-practising)
- Do academic work, either teaching or studying osteopathy
- Provide other healthcare services
- Work in an unrelated field
- Work on financial matters related to osteopathy
- Work on marketing osteopathy
- Work on general administration relating to osteopathy
- Other

Please specify:

b. Thinking about the total number of hours you have said you practise osteopathy, how many of those hours are:

- In a sole practice setting
- A group setting with other healthcare professionals
- In other settings

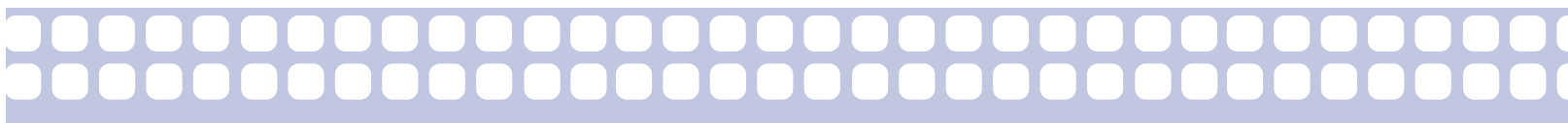
Please specify:

20. Would you describe the location of your main practice as:

- Urban
- Rural

21. What proportion of your practice is funded by:

- | | | |
|--------------------------|----------------------|---|
| The patient | <input type="text"/> | % |
| Private medical insurers | <input type="text"/> | % |
| NHS | <input type="text"/> | % |
| Other third parties | <input type="text"/> | % |
| Not paid for | <input type="text"/> | % |



For all individuals

- AGE** **22. Are you:** Under 21 21–30 31–40
 41–50 51–60 61–70
 71–80 81–90 90+
 Do not wish to state

- GENDER** **23. Are you:** Female Male
 Transgender Do not wish to state

ETHNIC ORIGIN

Please select **one** box from the **first** category and **one** box from the **second** category

24. Are you: **Category 1**

- | | |
|----------------------------------|--|
| <input type="checkbox"/> White | Mixed - |
| <input type="checkbox"/> Black | <input type="checkbox"/> White & Black Caribbean |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White & Black African |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> White & Asian |

Any other background:

Category 2

- | | |
|------------------------------------|--------------------------------------|
| <input type="checkbox"/> English | <input type="checkbox"/> African |
| <input type="checkbox"/> Irish | <input type="checkbox"/> Indian |
| <input type="checkbox"/> Scottish | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Welsh | <input type="checkbox"/> Bangladeshi |
| <input type="checkbox"/> Caribbean | <input type="checkbox"/> Chinese |

Any other white background:

Any other black background:

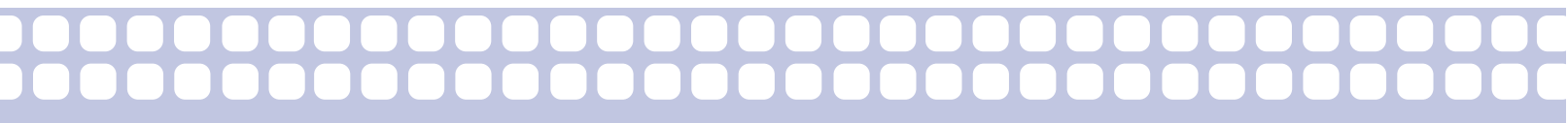
Any other Asian background:

Any other mixed background:

Any other Chinese background:

Any other background:

Do not wish to state



DISABILITY 25. Do you have a disability?

The Disability Discrimination Act (DDA) defines disability as a physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal daily activities. Examples include cancer, diabetes, multiple sclerosis and heart conditions; hearing or sight impairments, or a significant mobility difficulty; and mental health conditions or learning difficulties. People in these circumstances and some others (such as people with a facial disfigurement) are likely to have rights under the DDA to protect them from discrimination.

Yes

Please explain the nature of your disability:

No

Do not wish to state

SEXUAL ORIENTATION**26. Please identify your sexual orientation:**

Bisexual

Gay/lesbian

Heterosexual

Do not wish to state

RELIGION/BELIEF**27. Please identify your religion/belief:**

No religion

Baha'i

Buddhism

Christian

Jain

Jewish

Hindu

Muslim

Sikh

Other

Please state:

Do not wish to state

That completes the questionnaire – thank you for your views.

