



Equality Impact Assessment Template

Step 1 – Scoping the EIA

Title of policy or activity	
Development of guidance note on the application of the Osteopathic Practice Standards (OPS) in relation to the application of adjunctive therapies, non-osteopathic treatments or other work undertaken by osteopaths.	
Is a new or existing policy/activity?	
This is a new policy in relation to the development of guidance to clarify the application of the Osteopathic Practice Standards in relation to approaches which may be adjunctive to osteopathy, non-osteopathic or other work.	
What is the main purpose and what are the intended outcomes of the policy/activity?	
This guidance supplements the OPS. It explores some of the challenges around implementing the OPS for osteopaths who practise other forms of care and adjunctive therapies, or undertake other activities or work. Using case scenarios, it highlights some of the issues that arise, and considers the key factors that an osteopath might need to pay attention to when deciding how to respond to those issues. The intended outcome is to provide clarity around the application of the OPS for osteopaths, patients, educators and others.	
Who is most likely to benefit or be affected by the policy/activity	
The guidance is for osteopaths to use when considering how the OPS apply to all aspects of their work. It is also for members of the public and patients to illustrate how osteopaths approach their obligations under the OPS across the different forms of care and treatment they provide. The guidance will act as a reference for Fitness to Practise Committees when considering concerns that osteopaths have failed to apply the OPS in their practice.	
Who is doing the assessment?	
The process will be led by the Policy Manager, Professional Standards team and overseen by the Director of Education, Standards and Development	
Dates of the EQIA	
• When did it start?	August 2021
• When was it completed?	
• When should the next review of the policy/activity take place?	

Useful information

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What information would be useful to assess the impact of the policy/activity on equality?
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We have undertaken an equality, diversity and inclusion audit in 2020 which is considered, among other issues, how we collect and analyse our data to explore unintended impacts any groups with particular protected characteristics. Data specification, classification and beginning analysis is incorporated into our Business Plan for 2021. We will have more comprehensive population data about osteopaths rather than a sample that we have at the moment. We are currently working on the specification of the data categories for a population survey and this is planned for later in 2021.

Is there data relating to people with any/each of the protected characteristics?¹

We have some data about certain protected characteristics for a sample of osteopaths on the register. (KPMG data). We are currently specifying more precisely more protected characteristics on our register to prepare for a registrant survey about protected characteristics later in 2021.
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Where can we get this information and who can help?
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Step 2 – Involvement and consultation

If you have involved stakeholders, briefly describe what was done, with whom, when and where. Please provide a brief summary of the response gained and links to relevant documents, as well as any actions.

We held a workshop in March 2019 to explore the issue of osteopaths with dual qualifications or undertaking adjunctive or novel therapeutic approaches, and the application of the OPS in such circumstances. Stakeholders included:
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| <ul style="list-style-type: none">• Members of the Professional Conduct Committee• The Council of Osteopathic Educational Institutions• Patients• The Institute of Osteopathy |
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This used case scenarios to explore some of the issues in relation to the implementation of the OPS, the challenge of finding appropriate expert witnesses where complaints related to novel-approaches, and perceptions as to the applicability of the OPS in given cases.

¹ The nine protected characteristics in the Equality Act 2010 which applies in England, Scotland and Wales are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. We also take account of the Equalities legislation in Northern Ireland including duties around religious and political discrimination.

The outcome was an agreement that more explicit guidance in relation to the application of the OPS would be helpful to PCC members, osteopaths and the public in understanding how standards are applied.

Draft guidance was developed and reported to the Policy Advisory Committee (now the Policy and Education Committee (PEC)) in [March 2020](#). A revised development plan was proposed to the PEC in [June 2021](#), with an agreement to share the draft with stakeholders before reporting back with a final draft for consideration in October 2021. This will then be reported to Council for sign off prior to formal consultation.

Step 3 – Data collection and evidence

What evidence or information do you already have about how this policy might affect equality for people with protected characteristics under the Equality Act 2010?

Please cite any quantitative (such as statistical data) and qualitative (such as survey data, complaints, focus groups, meeting notes or interviews) relating to these groups. Describe briefly what evidence you have used.

Our knowledge of EDI issues within the osteopathic profession is incomplete, and as referenced above, we are developing an EDI survey to explore this with registrants.

We do not have data to suggest whether minority ethnic osteopaths, for example, are more likely to be the subject of concerns or complaints, or the outcomes of these, though are working on this and towards collating EDI data for registrants that have been subject to FTP.

In terms of osteopaths undertaking adjunctive therapies, we know from the Institute of Osteopathy survey data that many do employ other approaches within or in addition to their osteopathic practice:

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iO Survey 2017 – data on osteopaths using other modalities	
Massage	37%
Western acupuncture/dry needling	36%
Classical acupuncture	6%
Applied kinesiology	5%
Reflexology	2%
Pilates	22%
Naturopathy	12%
Electrotherapies	16%
Other	11%

We have no data to suggest whether protected characteristics impact on the types of adjunctive therapies undertaken.

What additional research or data is required to fill any gaps in your understanding of the potential or known effects of the policy? Have you considered commissioning new data or research?

We will continue to gather data in relation to our EDI policy and our general function, but do not anticipate specific research solely in relation to the development or implementation of this particular guidance.

Step 4 – assessing impact and strengthening the policy

What does the data reviewed tell us about the people the policy/activity affects, including the impact or potential impact on people with each/any of the protected characteristics?
This is a guidance note aimed at clarifying issues around the application and implementation of the Osteopathic Practice Standards, rather than the implementation of a new policy. We will ensure during formal consultation that we seek feedback specifically relating to impact on those with protected characteristics.
Are there any implications in relation to each/any of the different forms of discrimination defined by the Equality Act?
We are not aware of any such implications at this stage.
What practical changes will help to reduce any adverse impact on particular groups?
We will explore this during the consultation phase.
May 2022: we explored this as a specific question within the consultation, including with two focus groups. No specific issues were raised in this regard.

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Although one respondent suggested that without ensuring that people with a variety of protected characteristics had considered the guidance, we could not be certain of any implicit biases. There was a mix of responses (13 overall) with some feeling the guidance was clear and accessible, and others thinking it was a little 'wordy'. One suggested exploring the development of an easy read version, which we will do once finalised. Another suggested supplementing the guidance with a video for greater accessibility. We will explore further ways of making this as accessible as possible when approved for publication. We are also seeking specific advice and guidance to take account of the implicit bias point and any other matters that have been overlooked during the development process.

Changes made to the draft post consultation include:

- Reworded the introduction to provide greater clarity as to the role of the GOsC.
- Clarity that the guidance relates to all work undertaken by osteopaths including non-therapeutic activities.
- Extra wording to explain what is meant by 'adjunctive therapies'.
- Extra wording regarding the provision of information that patients need to inform decision making.
- Extra wording to conclude at the end of the guidance
- A final summary of key messages

What could be done to improve the promotion of equality within the policy?

The focus of the guidance is around the application of standards in relation to therapeutic and other work undertaken by osteopaths which might be classified as 'non-osteopathic'. We have tried to ensure that the case scenarios included within the draft are representative of the osteopathic profession.

Step 5 – making a decision

Summarise your findings and give an overview of whether the policy will meet the GOsC's objectives in relation to equality.

No specific issues were raised in relation indicating that the GOsC objectives in this regard would not be met.

What practical actions do you recommend to reduce, justify or remove any adverse/negative impact?

As above, we will look at developing an easy read version and possibly a video to explain the background and key messages of the guidance.

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We are also seeking the advice of an equality consultant to ensure that we have no implicit biases built into the guidance and to ensure that we have considered a variety of approaches and perspectives prior to approval by Council.

What practical actions do you recommend to include or increase potential positive impact?

As above.

Step 6 – monitoring, evaluation and review

How will you monitor the impact/effectiveness of the policy/activity?

We will monitor and evaluate the impact of the guidance within fitness to practise decision making as our data in this area develops further.

What is the impact of the policy/activity over time?

To be reviewed as set out above.

Where/how will this EIA be published and updated?

The EIA will be published alongside the published guidance on our website.

Step 7 – action planning

Please detail any actions that need to be taken as a result of this EIA

Action	Owner	Date
Review in relation to the consultation process and its outcomes	Policy Manager	May / June 2022
Seek advice of equality consultant to ensure that implicit biases are identified and that there are no perspectives missed	Policy Manager	June 2022
Develop easy read version of the guidance.	Policy Manager	March 2023
Develop videos or other ways of bringing guidance and case studies to life	Policy Manager	March 2023