

National Council for



Osteopathic Research

**Types of concerns and complaints raised about
osteopaths and osteopathic services in 2013 to 2020**

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Summary

The pandemic during 2020 had an impact on both the number and nature of concerns and complaints raised in 2020.

Complaints were made about 103 osteopaths compared to the 7 years' average of 153.

There were only 115 concerns and complaints raised (including false/misleading advertising) in 2020 compared with the 7 year mean of 274 (212 without the false/misleading advertising complaints).

Male osteopaths are the most likely to be complained about (77% are males: 2.9% of registered males compared to 0.9% of registered females).

61% of osteopaths complained about were between the age of 41 and 60 years (59/97) with 62% of these being between 51 and 60 years (37/59).

Osteopaths with between 3-5 years of experience are proportionately more likely to receive a complaint against them (2.5% in 2019 and 2.2% in 2020).

Notable areas of concerns and complaints related to COVID -19 were:

- Complaints about 'conduct bringing the profession into disrepute' (7 year mean 6, 2020= 13).
- 'Not controlling the spread of communicable diseases' (7 year mean <1, 2020 = 6)
- 'Health of the osteopath to deliver care (7 year mean 2, 2020 = 4).

Persisting areas of complaints were those relating to 'sexual impropriety' (7 year mean 12, 2020 =14,) and 'conducting a personal relationship with a patient' (7 year mean 4, 2020 = 5,).

When the concerns and complaints are mapped against the Osteopathic Practice Standards (OPS) we can see that 'Professionalism' remains the area of most concerns.

There is still room for improvement in professionalism, respecting patient rights, quality and standards of clinical practices and the Environment (hygiene, Infection Prevention and Control).

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Introduction

Concerns and complaints made by patients about health care practitioners are crucial to understand in order to prevent issues around poor practice in the future. We have been collecting data about concerns and complaints made by the general public about osteopaths and osteopathy since 2013. These data are analysed each year and informs policy, practice and the education of osteopaths.

Stakeholders and interested parties contributing to this project are the osteopathic regulator, the General Osteopathic Council (GOsC), the osteopathic professional body, the Institute of Osteopathy (iO), and three insurance companies who provide cover for osteopaths.

Classification System

We use a modified version of the Healthcare Complaints Analysis Tool (HCAT) (Reader T, Gillespie A, Roberts J. Patient complaints in healthcare systems: a systematic review and coding taxonomy. *BMJ Qual Safety*. 2014; 23:678-689) to classify concerns and complaints. We collect raw frequency data only; we do not rate the concerns and complaints by severity of harm or the problem raised.

There are six distinct categories we use to classify the concerns and complaints:

1. Clinical concerns and complaints sub-divided into Quality and Safety issues.
2. Management: Environment (Problems in the facilities, services, clinical equipment, and staffing levels), Business/Processes (Problems in bureaucracy, waiting times, and accessing care).
3. Relationships sub-divided into Communications, Humaneness/Caring and Patient rights.
4. Use of adjuvant therapies.
5. Criminal convictions and cautions
6. Regulation specific issues.

We used all the 36 subcategories recommended in the HCAT as these matched and mapped well onto the original classification system used between 2013 and 2018.

The classification system adopted in 2019 has sub categories that are more fully described so there is less potential for overlap.

Methods

Data were collected between January 1st 2020 to December 31st 2020.

Contributors include the regulator (General Osteopathic Council, GOsC), the osteopathic professional body (The Institute of Osteopathy, iO) and three insurers of osteopaths.

Data are logged and recorded directly as a result of patients and the public informing the contributing organisations of a concern or complaint they would like to report. This can be by telephone, email or letter correspondence.

Data were collected and input onto a standardised excel spreadsheet. All potentially identifiable data were removed and the spreadsheets were submitted to the National Council for Osteopathic Research for independent analysis.

Descriptive data are presented and year on year comparisons are made.

The data were analysed in two sections with details about the profile of those complained about and the types of concerns and complaints that were received over the 12 month period.

Overall data are provided and then more detailed data by subcategory is given. Raw data are contained in the Appendix 1.

Sub categories have been mapped against the Osteopathic Practice Standards which can be found in Appendix 2.

Profile of those complained about

Over the last four years there has been a consistent decline in the number of osteopaths who have complaints made against them. Since 2016 the numbers of osteopaths receiving complaints about them has nearly halved, from 203 people to 103, this is a reduction from 3.9% of registered osteopaths to 1.9%.

In the previous 4 years the mean number of osteopaths complained about was 153.

In 2020 three quarters of those complained about were male, in previous years it has been around two thirds male (79 males vs 24 females).

Table 1. Number of people who had concerns and complaints raised against them and their gender

Year (number of GOSc registrants)	Total number of osteopaths complained about (% of register)	Males (% of total) (% of registered males)	Females (% of total) (% of registered females)
2016 (Total 5,200, Males 2,563 Females 2,637)	203 (3.9%)	130 (64%) (5.1%)	73 (36%) (2.8%)
2017 (Total 5,288, Males 2,618 Females 2,670)	169 (3.2%)	106 (63%) (4%)	63 (37%) (2.4%)
2018 (Total 5,334, Males 2,629, Females 2,705)	127 (2.4%)	82 (65%) (3.1%)	45 (35%) (1.7%)
2019 (Total 5,457, Males 2,684, Females 2,773)	113 (2.1%)	78 (69%) (2.9%)	35 (31%) (1.3%)
2020 (Total 5,443, Males 2,656 Females 2,787)	103 (1.9%)	79 (76.7%) (2.9%)	24 (23.3%) (0.9%)

Most of the osteopaths that are complained about come from England but this reflects the larger number of osteopaths practising in England.

Table 2 Location of work of those complained about

Country	Number of osteopaths complained about
England	95
Northern Ireland	1
Scotland	6
Wales	0
Other (non UK)	1

Gender and age

Table 3 and Figure 1 show the age and gender distribution of osteopaths on the GOsC register in 2020. Males made up 49% of registrants in 2020 (2,656/5443) but 77% of all those complained about (79/103). Females outnumber males in all age bands under 51 years. Despite this the complaints against males are still disproportionately higher than females in each age band (Table 3 and Figure 1).

The GOsC register indicated that in 2020, 700 registrants were 61 years or over, 2,919 were between 41 and 60 years old and the remaining 1,824 were 40 years or below. The age profile of osteopaths (Figure 1) showed that 61% of osteopaths complained about were between the age of 41 and 60 years (59/97) with 62% of these being between 51 and 60 years (37/59).

Table 3. Age and gender distribution of total GOsC registrants and those complained about in 2020

Register	Age Bands	20-30	31-40	41-50	51-60	61-70	71+	Total
Gender	M	276	499	682	758	362	79	2,656
	F	394	655	766	713	232	27	2,787
Total		670	1154	1448	1471	594	106	5,443
Complained about	M	6	13	20	27	7	2	75
	F	1	7	2	10	0	2	22
Total		7	20	22	37	7	4	97*

*Missing data n=6

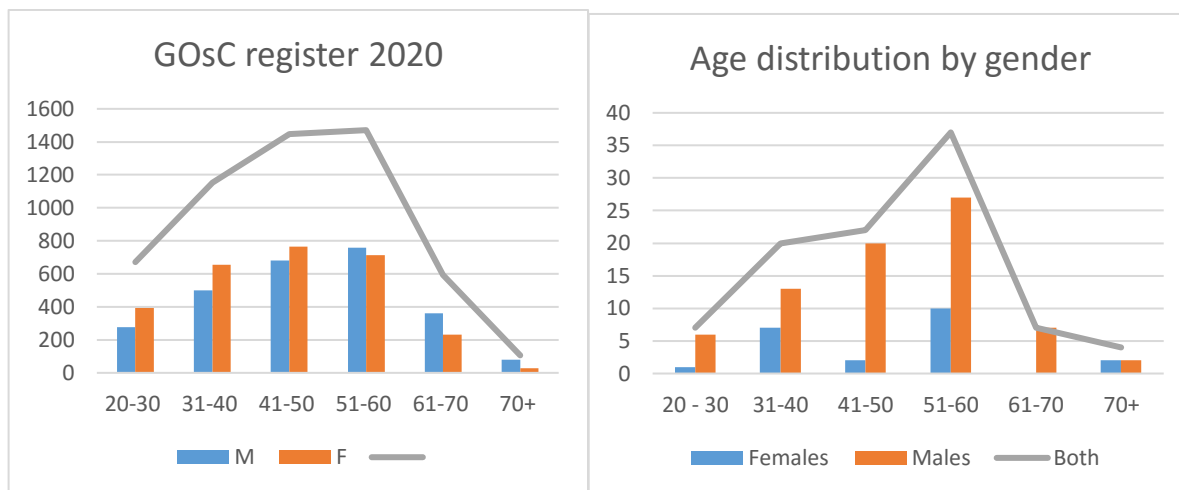


Figure 1. Age and gender distribution of osteopaths and those complained about

Years of Experience (years post-registration)

In the last 8 years the data have shown that osteopaths with more than 10 years of experience were most likely to have concerns and complaints raised about them but we had not compared the numbers as a proportion of the total osteopaths registered by years of experience. In 2019 we were able to do this for the first time.

In 2019, osteopaths with 2 years or less experience were the least likely to be complained about (0.9%) compared with 2.5% of osteopaths with between 3 –5 years of experience, 2% between 6 - 10 years and > 10 years of experience 2.2%. In 2020, we can see a similar trend (Table 4), this shows, as a proportion, those with 3-5 years of experience have slightly more complaints raised against them (2.2%), but these figures are very low and have a small range (1.5 – 2.2%). Figures 2 and 3 show the raw data distribution by years in practice.

Table 4. Distribution of complaints and practitioners years of practice

Characteristics	Number of osteopaths (% of total complained about by years experience)					GOsC registrants 2020	% of osteopaths on register complained about	
	2016	2017	2018	2019	2020		2020	2019
Years post- registration								
0-2	3 (1%)	8 (4%)	0	7 (6%)	10 (10%)	533 (10%)	1.9%	0.9%
3-5	38 (19%)	23 (13%)	22 (17%)	18 (16%)	15 (15%)	670 (12%)	2.2%	2.5%
6-10	31 (15%)	37 (20%)	11 (9%)	15 (14%)	17 (16.5%)	1014 (19%)	1.7%	2%
>10	130 (63%)	89 (48%)	85 (67%)	71 (45%)	48* (47%)	3226 (59%)	1.5%	2%
Missing data	3 (1%)	27 (15%)	9 (1%)	2 (2%)	23 (22%)			
Total	205	184	127	113	103	5443 (100%)		

***28/48 had more than 21 years of experience post-registration**

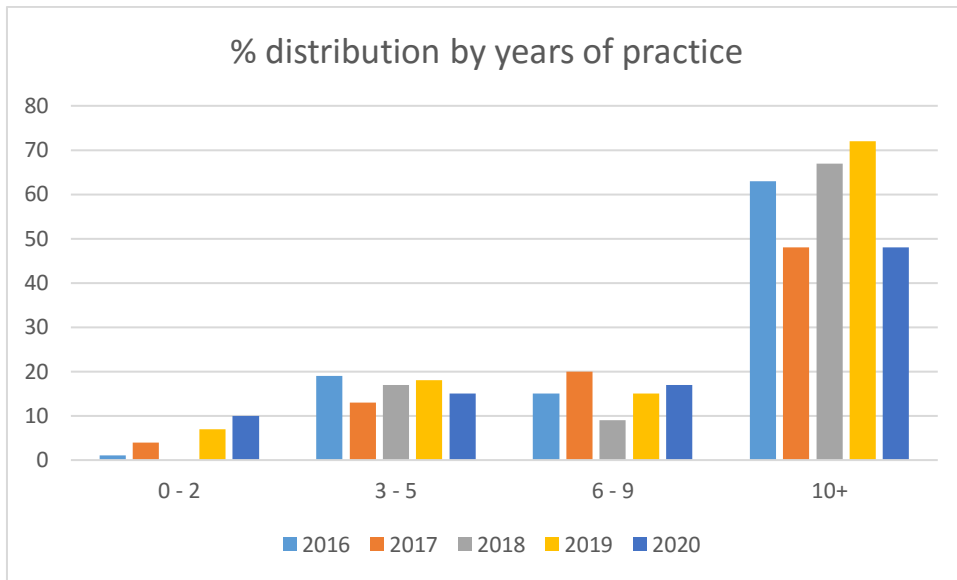


Figure 2. Distribution of complaints by osteopath years of practice 2016-2020

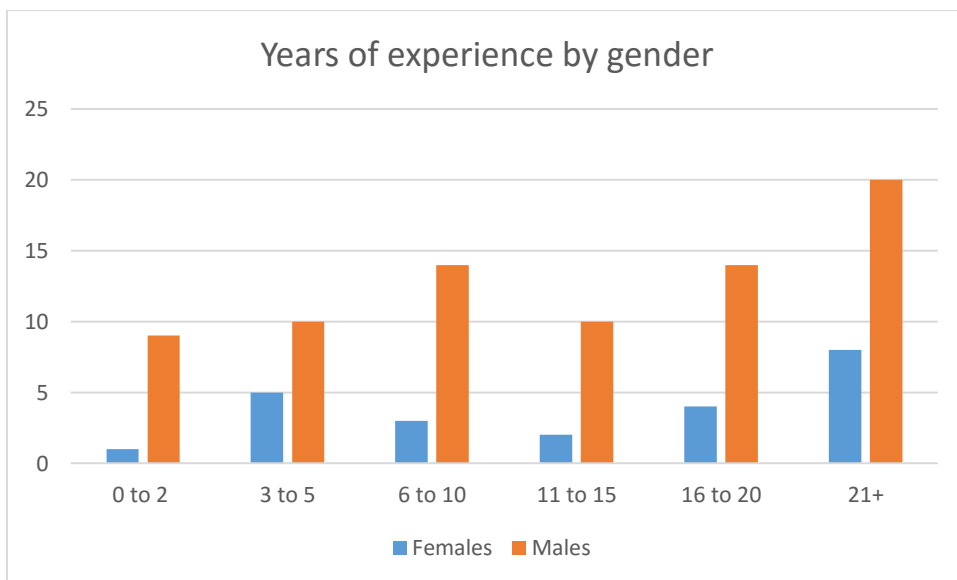


Figure 3. Numbers of males and females complained about by years of experience 2020

Types of concerns and complaints

In 2020, the number of concerns raised dropped to 115, nearly halved from the previous year and the lowest number to date. This may, in part, be due to the pandemic and many clinics closing during the first and second national lockdowns where UK citizens were asked to isolate and avoided non-emergency care (March 2020 and October /November 2020). However, 2020 showed a disproportionately high number of complaints about regulation specific issues. Complaints in this domain have increased since we started collecting data in this field from 0 complaints to 34 in 2019. Proportionately these represent 0 complaints in 2015 rising each year (except 2018) respectively to 0.4%, 8.9%, 8.1%, 15.9% to 17.5% in 2020. Concerns raised about clinical care and relations still make up around a third each of all complaints (Table 5).

The mean total number of complaints from 2013 – 2019, including false advertising was 274 and without the false advertising was 212.

Table 5. Overall numbers of concerns and complaints raised each year by theme

	2013	2014	2015	2016	2017	2018	2019	2020
Clinical Care Issues (relating to quality and safety of clinical and osteopathic care provided)	83	137	104	128	97	71	70	33
Management Issues (relating to the environment and organisation within which healthcare is provided)	32	37	28	26	17	28	30	17
Relations Issues (relating to the behaviour towards the patient or their family/friends)	81	65	79	75	56	67	74	33
Adjuvant therapies / Professions	2	3	1	2	2	1	2	3
Criminal convictions / Police cautions	3	6	1	1	2	2	4	4
Regulation specific issues			0	1	17	15	34	17
Subtotal	200	248	213	233	191	184	214	107
False/misleading advertising*	3	9	156	177	80	4	5	8
Total	203	257	369	410	271	188	219	115

Figure 4. shows the data in graphical form which clearly show a drop in the number of concerns and complaints over the last 5 years since 2016.

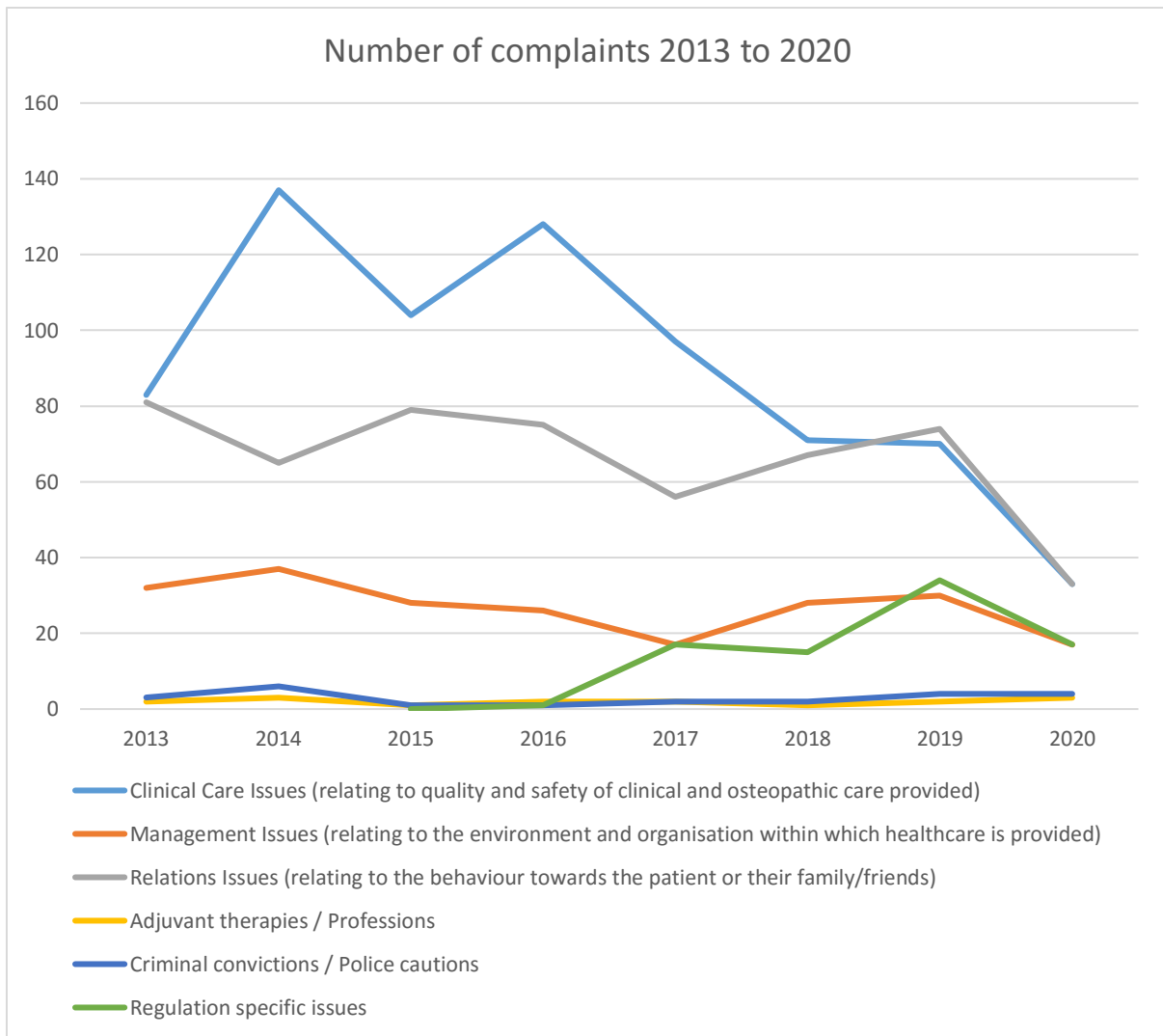


Figure 4. Overall numbers of concerns and complaints raised each year by theme

Table 6 shows the mean values of the previous years of data and allows us to compare 2020 data with the average over time for each theme and sub-theme. Significant reductions of concerns and complaints around quality and safety of clinical practice, business processes and relations are shown. Despite the overall halving of concerns and complaints in 2020, above average complaints were received about the environment, adjuvant therapies, criminal convictions and regulation specific issues, but all were in previous ranges recorded.

Table 6. Overall comparison with previous years

Theme	Mean 2013-2019 (range)	2020
Clinical Care Issues		
Quality of clinical practices	21 (range 15-32)	10
Safety of clinical practice	77 (range 51-115)	23
Management		
Environment	6 (range 2-9)	9
Business /Processes	84 (range 27-198)	16
Relations Issues		
Listening and Communication	39 (range 28-49)	13
Respect and Patient rights	32 (range 26-42)	20
Adjuvant therapies / professions	2 (range 1-3)	3
Criminal convictions and Police Cautions	3 (range 1-6)	4
Regulation specific (2015-2019)	13 (range 0-34)	17

Table 7, shows the overall data year on year.

Table 7. Number of Concerns and complaints per year: 2013 to 2020

	2013	2014	2015	2016	2017	2018	2019	2020
Clinical Care Issues (relating to quality and safety of clinical and osteopathic care provided.)								
Quality of clinical practices (Clinical standards of behaviour)	20	22	15	25	32	17	19	10
Safety of clinical practice (Errors, incidents, and staff competencies)	63	115	89	103	65	54	51	23
Management Issues (relating to the environment and organisation within which healthcare is provided (e.g. administrative, technical, facilities and management of staff))								
Environment (Problems in the facilities, services, clinical equipment, and staffing levels)	7	9	7	3	5	2	8	9
Business /Processes (Problems in bureaucracy, waiting times, and accessing care)	25	28	21	23	12	26	22	16
Relations Issues (relating to the behaviour towards the patient or their family/friends)								
Listening and Communication (Disregard or do not acknowledge information from patients. Absent or incorrect communication to patients)	47	34	37	49	28	39	42	13
Respect and Patient rights (Disrespect or violations of patient rights)	34	31	42	26	28	28	32	20
Other								
Adjuvant therapies / Professions	2	3	1	2	2	1	2	3
Criminal convictions / Police cautions	3	6	1	1	2	2	4	4
Regulation specific issues			0	1	17	15	34	17
Subtotal	200	248	213	233	191	184	214	107
False/misleading advertising**	3	9	156	177	80	4	5	8
Total	203	257	369	410	271	188	219	115

Detailed breakdown of concerns and complaints by sub-categories

The following show the data graphically over time, the actual numerical data used for the graphs can be found in Appendix 1. These data enable us to examine the categories that make up the themes shown earlier.

Clinical Care

Clinical care issues relate to quality of clinical practice and safety of clinical practice. Interestingly in previous years ‘treatment causes new or increased pain or injury’ was the most common complaint in this theme, but in 2020, most concerns were received about the ‘Health of the osteopath to deliver care’. This is contextual relating to the pandemic of the COVID -19 virus and risks of transmission.

Examples of clinical care complaints include: using a HVT technique when not justified and/or treatment that causes lasting pain to a patient, inappropriately/incompetently providing treatment to a pregnant patient, administering an acupuncture needle during osteopathic treatment through a patient’s jeans, alcohol abuse, poor record keeping and a failure to wear PPE or uphold clean premises during the height of the COVID-19 pandemic.

Safety of clinical practice complaints are specific to injuries and these are the lowest ever, again perhaps explained by the pandemic and low patient numbers.

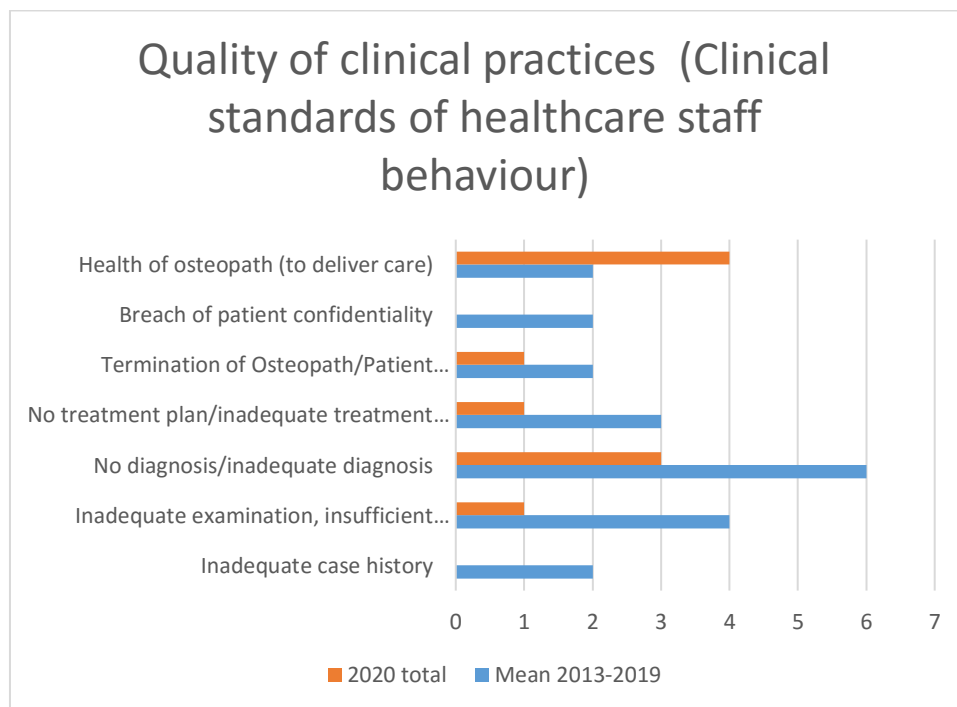


Figure 5a. Clinical Care Issues (relating to quality of clinical and osteopathic care provided).

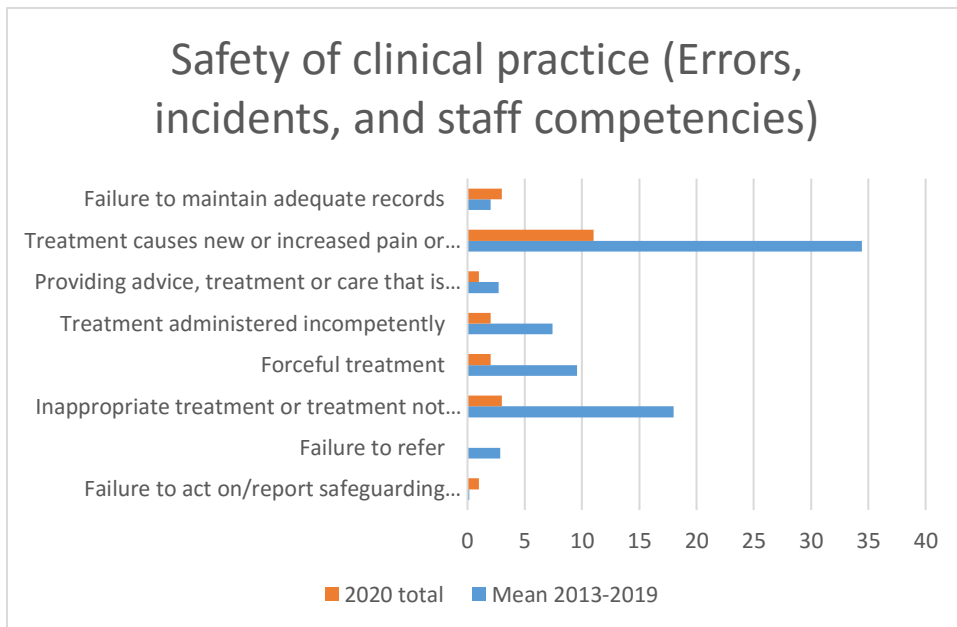


Figure 5b. Clinical Care Issues (relating to safety of clinical and osteopathic care provided).

Management

This theme records complaints about the practice environment such as problems in the facilities, services, clinical equipment, and staffing levels, and business processes and procedures such as problems in bureaucracy, waiting times, and accessing care.

The most common concerns or complaints raised in this category last year were about value for money, business disputes and failure to maintain adequate insurance (See Figures 6a and 6b). In 2020 the graph shows ‘not controlling the spread of communicable diseases’ had the most concerns and complaints about the environment, again this reflects the COVID-19 pandemic and concerns about transmission. False/ misleading advertising was still identified as an issue in business and processes.

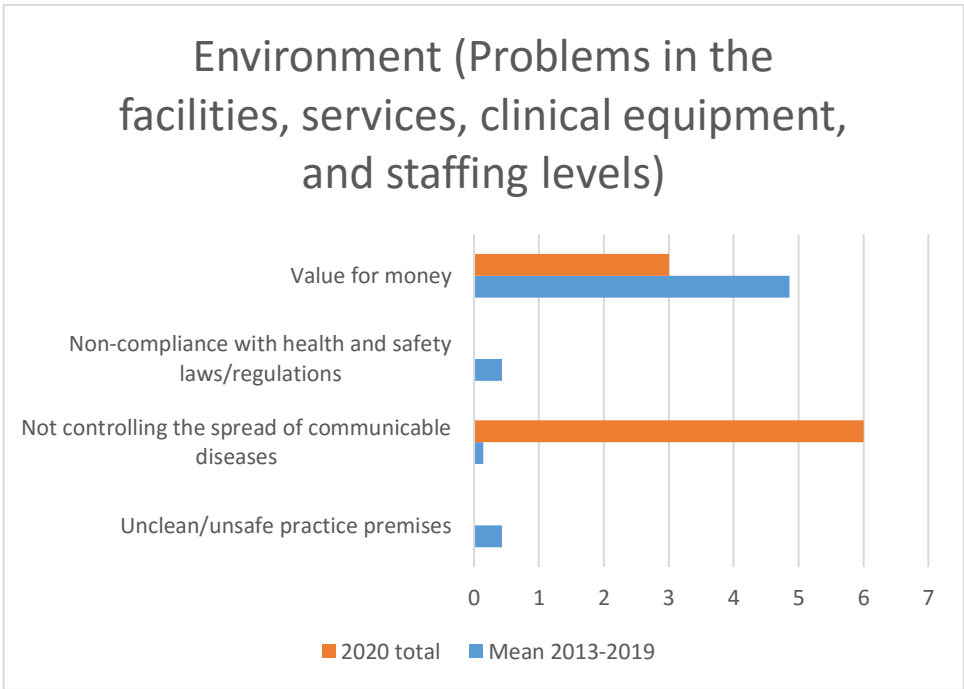


Figure 6a. Management Issues relating to the environment

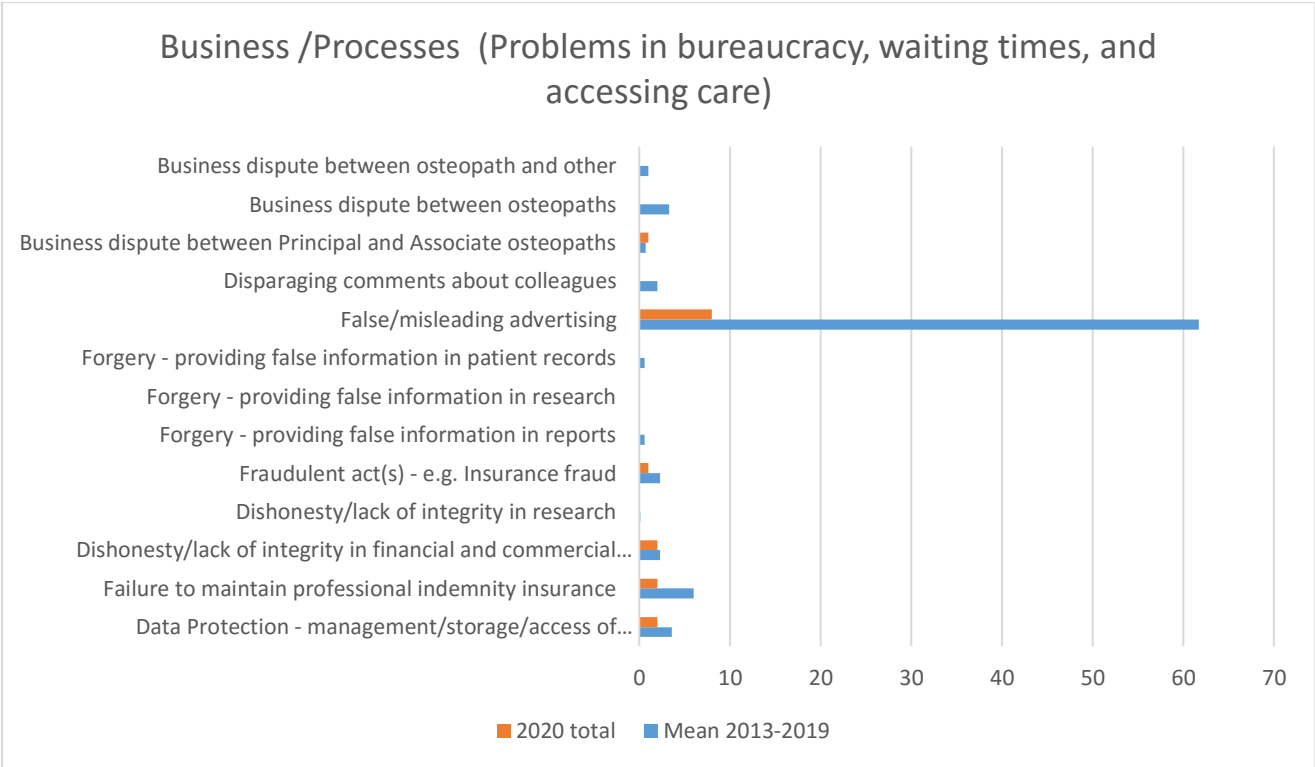


Figure 6b. Management Issues relating to the organisation within which healthcare is provided

Relations Issues (relating to the behaviour towards the patient or their family/friends)

This theme consists of two sub-themes: Listening and Communication such as disregarding or not acknowledging information from patients and absent or incorrect communication to patients, and Respect and Patient rights such as disrespecting or violating patient rights. There are 10 sub-categories.

Sexual impropriety was the most common complaint in 2020 in this domain, with 14 issues raised, this is above the previous years' average of 12 complaints. Failure to communicate effectively is the second highest domain but is well below the average for the previous years. Conducting a personal relationship with a patient is also above average but this links into concerns and complaints raised with sexual impropriety which is also higher than normal.

Examples of sexual impropriety and conducting inappropriate relations with patients include: having a sexual relationship with the patient, asking the patient on a date (whether in person or via social media), inappropriate physical contact with the patient during treatment, massaging a patient's breasts, moving a patient's underwear without consent and using sexually explicit language towards the patient.

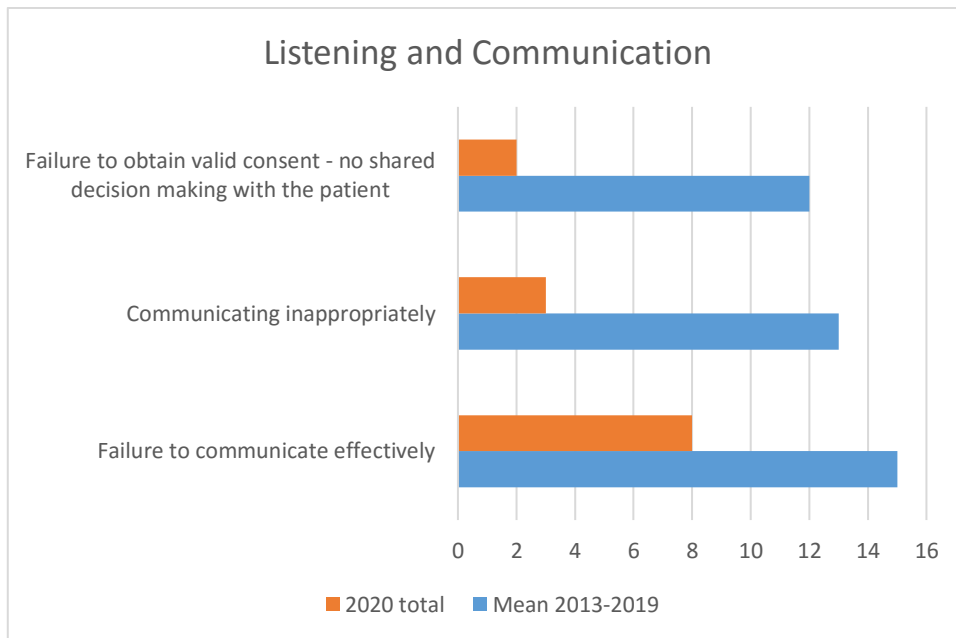


Figure 8a Listening and Communication (Healthcare staff disregard or do not acknowledge information from patients. Absent or incorrect communication from healthcare staff to patients)

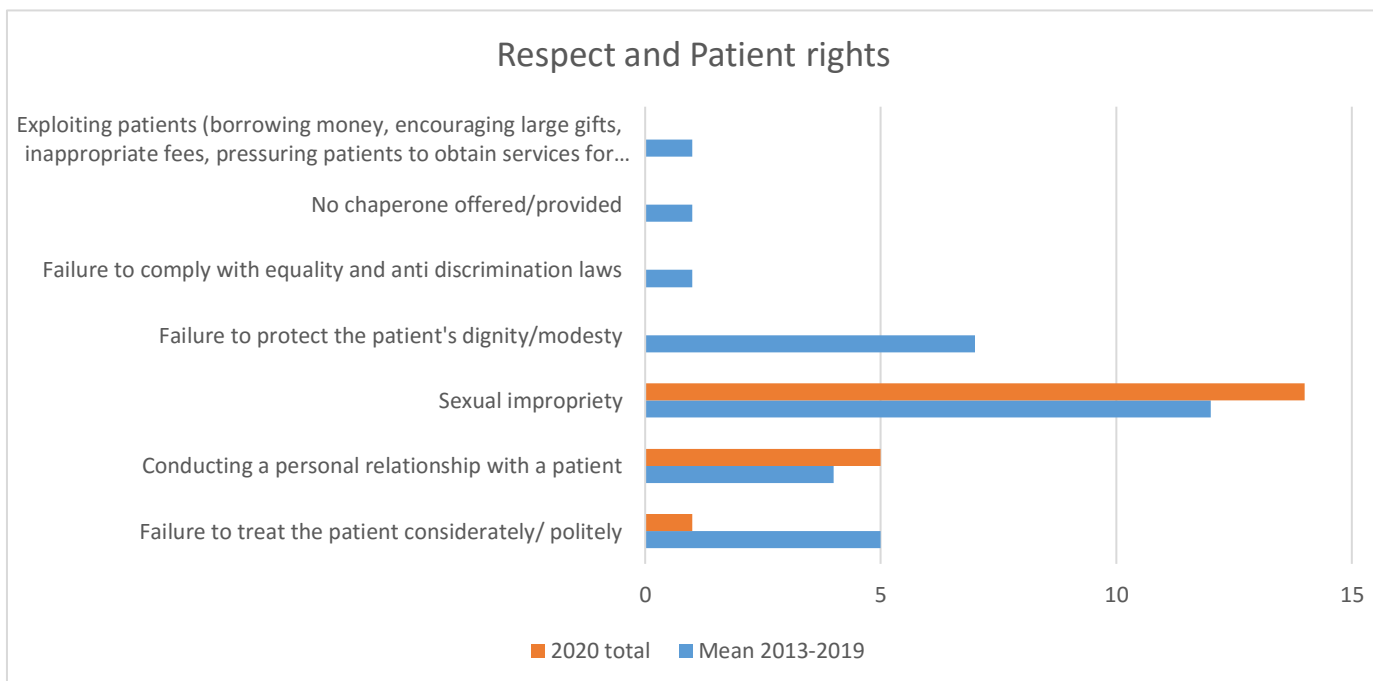


Figure 8b Respect and patient rights (Disrespect or violations of patient rights)

Adjuvant therapy

The number of concerns and complaints in this area remain very small and focus on acupuncture and dry needling.

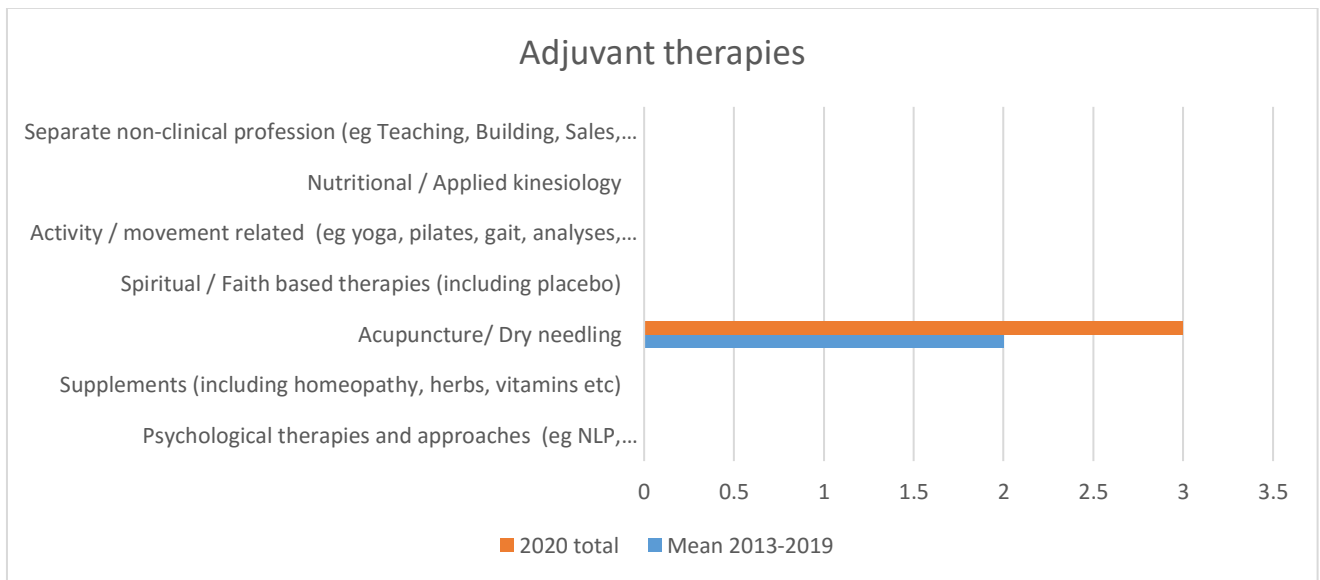


Figure 9. Adjuvant therapies and professions

Criminal convictions and police cautions

These remain very low, the maximum recorded in any one year over the last seven years has been three. There were four during 2020.

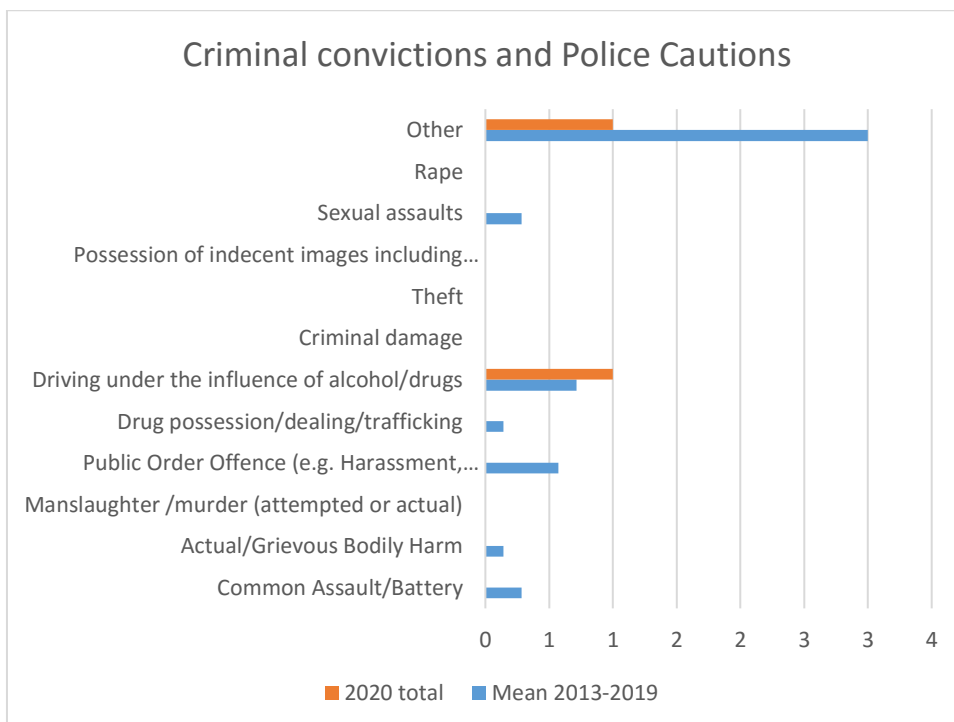


Figure 10. Criminal convictions and police cautions

Regulation specific

Most concerns raised about conduct are about bringing the profession into disrepute. In 2020 there were 17 concerns raised in comparison to previous years where the average number was 6. These concerns were mainly about professional behaviour with regards to the pandemic, COVID 19 virus and vaccination.

Specific examples include: providing misleading claims on websites and/or social media about qualifications, attending illegal gathering(s) in lockdown, providing mis-information to a patient regarding the COVID 19 vaccine and mocking colleagues and/or health professionals about the COVID-19 vaccination online (via social media).

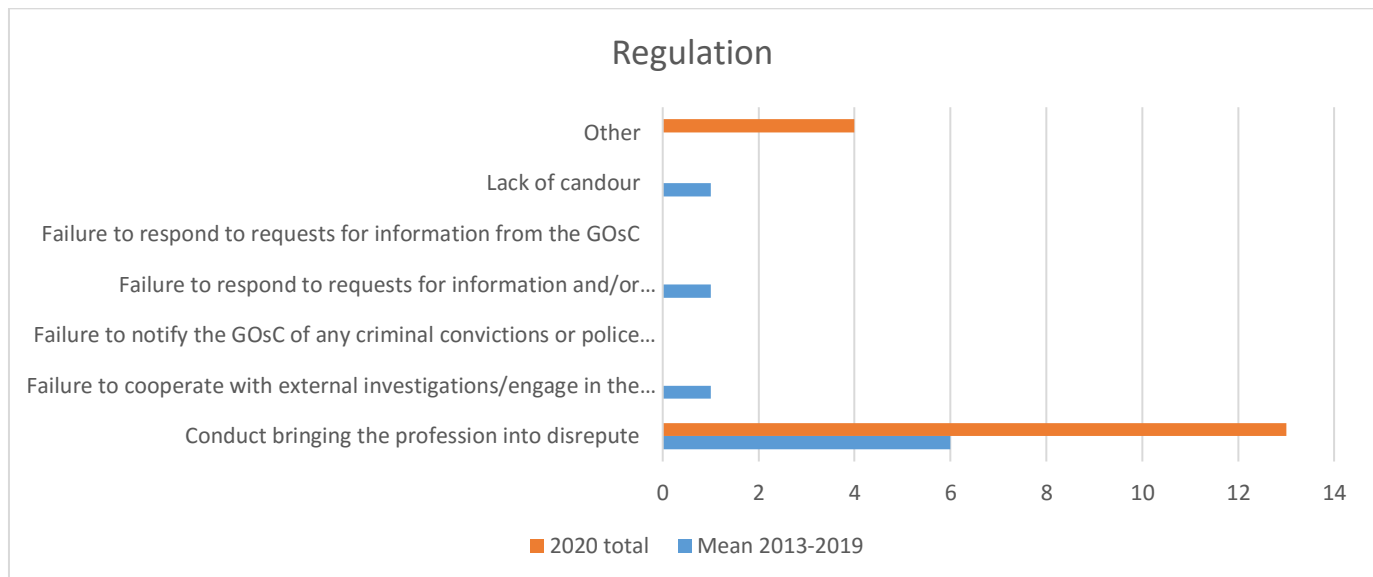


Figure 11. Regulation specific concerns and complaints

Implications for meeting Osteopathic Practice Standards (OPS)

In terms of the OPS, safety and quality is the area where we see the most concerns and complaints over the last seven years, but they have reduced significantly over the last three years to levels seen in the other OPS themes. Theme D, Professionalism does not include the misleading advertisement data but we can observe an increase in recent years in this area. This is, in part, due to additional regulation category, in particular bringing the profession into disrepute (Table 7 and Figure 12).

Table 7. Concerns and complaints mapped against the OPS

Osteopathic Practice Standards	2013	2014	2015	2016	2017	2018	2019	2020
Theme A: Communication and Patient partnership	47	34	37	49	28	39	42	13
Theme B: Knowledge skills and experience	4	28	21	19	12	14	9	4
Theme C: Safety and Quality	91	138	116	128	95	67	70	23
Theme D: Professionalism	46	56	42	38	39	58	81	48

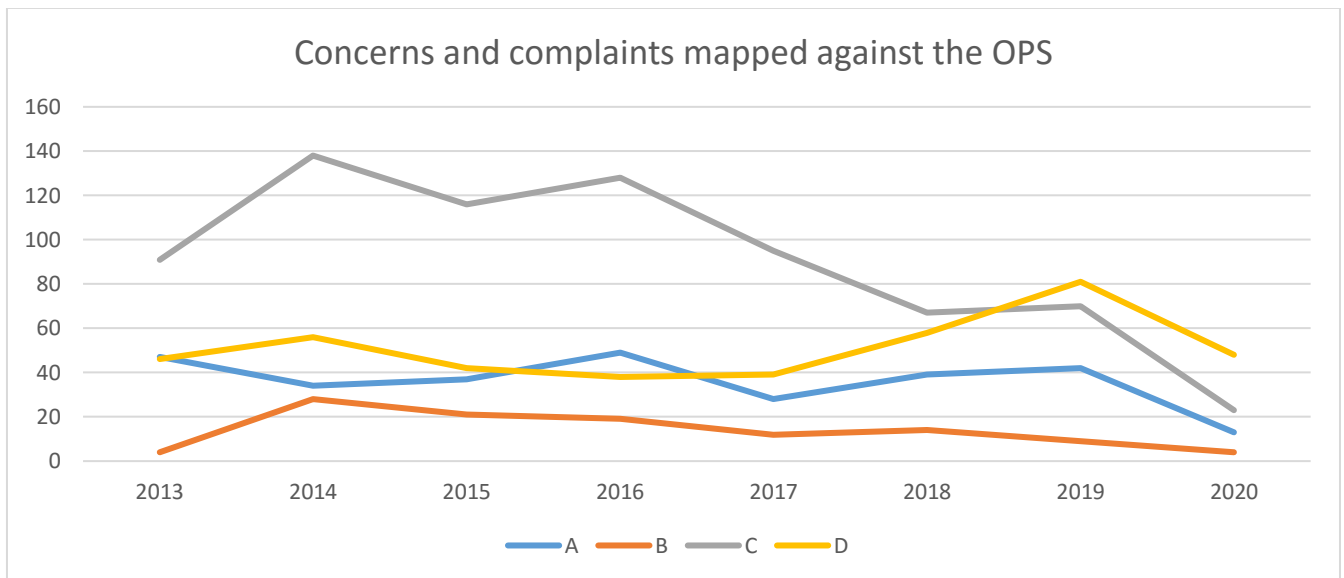


Figure 12. Number of concerns and complaints by OPS categories

- A: Communication and patient partnership
- B: Knowledge skills and experience
- C: Safety and Quality
- D: Professionalism

Discussion and Conclusions

The data for 2020 show a large reduction in both the number of osteopaths complained about and the number of concerns and complaints raised. The average number of osteopaths complained about in the last 4 years was 153 compared to 103 in 2020. The average number of concerns and complaints in the last 7 years has been 274 (with complaints about advertising) and 212 without advertising complaints compared to 115 (with advertising complaints) and 107 without.

This probably reflects the extra-ordinary effects of the COVID-19 pandemic, and the 2 UK lockdowns imposed on the 4 devolved nations. Whilst osteopathic practices could remain open under the lockdown legislation for emergency care, many practices closed their doors to patients after risk and business assessment.

When the raw data about the characteristics of osteopaths are viewed as proportions of the same characteristics on the GOsC register of osteopaths, the data are similar for gender and age as in previous years. Males are the most likely to be complained about, as are those who are in the 51-60 year age band.

What is different compared to previous years is that for 2019 and 2020 we have been able to compare the numbers of osteopaths complained about by years of experience with the GOsC registrant data of the same nature. The raw data in previous years have indicated that the longer the osteopath has been in practice the more likely they are to be complained about. However when we look at the numbers as a proportion in each category for 'years of experience', those with between 3-5 years of experience are proportionately more likely to receive a complaint against them 2.5% in

2019 and 2.2% in 2020. The range was 0.9% to 2.5% in 2019 and 1.5% to 2.2% in 2020 showing that proportionately there is little difference between 'years of experience' and complaints.

The most notable area where complaints are above the combination of years' average, despite the huge reduction in the number of reported complaints, are seen in regulation specific complaints (n=17 mean= 6). Looking at these data in more detail we can see that these complaints centre around 'conduct bringing the profession into disrepute', with many relating to COVID-19 and inappropriate, misleading information. Interestingly some of these have been from the use of social media. It may be useful to consider a social media awareness campaign to reflect on the inappropriate use and implications of using different forms of social media and the appraisal of information to assess its provenance, credibility and quality.

Other areas showing higher than average complaints that are related to COVID 19 are: 'Not controlling the spread of communicable diseases' (mean <1, 2020 = 6) and the 'health of the osteopath to deliver care' (mean 2, 2020 = 4). The issue of infection control has been highlighted during the pandemic and education in this area will remain a priority.

A persisting area of complaints is that relating to 'sexual impropriety' (n=14) and 'conducting a personal relationship with a patient' (n= 5) both were more than the 7 year means by 2 and 1 more complaints respectively.

When the concerns and complaints are mapped against the OPS we can see that 'Professionalism' remains the area of most concerns.

Conclusions

The pandemic highlighted issues surrounding infection prevention and control and some of the pitfalls surrounding the voicing of personal views on social media acknowledging the impact it may have on colleagues and the profession. The best interest of patients must be considered in all aspects of care and delivery and the data show that there is still room for improvement in professionalism, respecting patient rights, quality and standards of clinical practices and the environment (hygiene, infection prevention and control).

Appendix 1

Clinical Care Issues (relating to quality and safety of clinical and osteopathic care provided)

Table A1. Quality of clinical practices (Clinical standards of behaviour)

	2013	2014	2015	2016	2017	2018	2019	2020
Inadequate case history	2	2	2	4	3	1	0	0
Inadequate examination, insufficient clinical tests	2	3	4	8	7	3	3	1
No diagnosis/inadequate diagnosis	10	6	4	4	9	4	4	3
No treatment plan/inadequate treatment plan	1	5	3	4	4	0	4	1
Termination of Osteopath/Patient relationship	2	2	1	2	0	3	2	1
Breach of patient confidentiality	3	4	0	0	3	4	3	0
Health of osteopath (to deliver care)			1	3	6	2	3	4
Totals	20	22	15	25	32	17	19	10

Mean total number of complaints 2013-2019: 21 (range 15-32)

Table A2. Safety of clinical practice (Errors, incidents, and staff competencies)

	2013	2014	2015	2016	2017	2018	2019	2020
Failure to act on/report safeguarding concerns	0	1	0	0	0	0	0	1
Failure to refer	5	4	2	3	4	0	2	0
Inappropriate treatment or treatment not justified	15	27	18	29	16	6	15	3
Forceful treatment	4	14	9	15	5	12	8	2
Treatment administered incompetently	1	22	11	10	3	1	4	2
Providing advice, treatment or care that is beyond the	0	3	6	2	1	5	2	1

competence of the osteopath								
Treatment causes new or increased pain or injury	34	42	42	40	34	29	20	11
Failure to maintain adequate records	4	2	1	4	2	1	0	3
Totals	63	115	89	103	65	54	51	23

Mean total number of complaints 2013-2019: 77 (range 51-115)

Management Issues (relating to the environment and organisation within which healthcare is provided (e.g. administrative, technical, facilities and management of staff))

Table A3. Environment (Problems in the facilities, services, clinical equipment, and staffing levels)

	2013	2014	2015	2016	2017	2018	2019	2020
Unclean/unsafe practice premises	0	1	1	0	1	0	0	0
Not controlling the spread of communicable diseases	0	0	1	0	0	0	0	6
Non-compliance with health and safety laws/regulations	0	1	0	0	2	0	0	0
Value for money	7	7	5	3	2	2	8	3
Totals	7	9	7	3	5	2	8	9

Mean total number of complaints 2013-2019: 6 (range 2-9)

Table A4. Business /Processes (Problems in bureaucracy, waiting times, and accessing care)

	2013	2014	2015	2016	2017	2018	2019	2020
Data Protection - management/storage/access of confidentiality data	4	3	2	2	2	6	6	2
Failure to maintain professional indemnity insurance	0	2	6	11	4	12	7	2
Dishonesty/lack of integrity in financial and commercial dealings	1	2	5	4	1	1	2	2
Dishonesty/lack of integrity in research	0	1	0	0	0	0	0	0
Fraudulent act(s) - e.g. Insurance fraud	4	1	3	4	0	0	4	1
Forgery - providing false information in reports	2	1	1	0	0	0	0	0
Forgery - providing false information in research	0	0	0	0	0	0	0	0
Forgery - providing false information in patient records	0	0	1	1	0	1	1	0
False/misleading advertising*	(3)	(9)	(156)	(177)	(80)	(4)	(5)	(8)
Disparaging comments about colleagues	2	3	1	1	4	3	0	0
Business dispute between Principal and Associate osteopaths	2	0	0	0	0	2	1	1
Business dispute between osteopaths	5	14	1	0	1	1	1	0
Business dispute between osteopath and other	5	1	1	0	0	0	0	0
Totals	25	28	21	23	12	26	22	16

*excluded

Mean total number of complaints 2013-2019 (excluding false misleading advertising): 22 (range 12-28)

Relations Issues (relating to the behaviour towards the patient or their family/friends)

Table A5. Listening and Communication (Disregard or do not acknowledge information from patients. Absent or incorrect communication to patients)

	2013	2014	2015	2016	2017	2018	2019	2020
Failure to communicate effectively	12	15	17	18	5	15	20	8
Communicating inappropriately	15	5	12	18	14	15	14	3
Failure to obtain valid consent - no shared decision making with the patient	20	14	8	13	9	9	8	2
Totals	47	34	37	49	28	39	42	13

Mean total number of complaints 2013-2019: 39 (range 28-49)

Table A6. Respect and Patient rights (Disrespect or violations of patient rights)

	2013	2014	2015	2016	2017	2018	2019	2020
Failure to treat the patient considerately/ politely	3	3	4	7	8	8	3	1
Conducting a personal relationship with a patient	5	6	5	4	2	3	2	5
Sexual impropriety	12	13	14	7	11	12	17	14
Failure to protect the patient's dignity/modesty	10	6	11	5	6	4	7	0
Failure to comply with equality and anti-discrimination laws	0	0	4	1	0	0	0	0
No chaperone offered/provided	3	1	3	0	1	1	1	0
Exploiting patients (borrowing money, encouraging large gifts, inappropriate fees, pressuring patients to obtain services for financial gain)	1	2	1	2	0	0	2	0

Totals	34	31	42	26	28	28	32	20
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Mean total number of complaints 2013-2019: 32 (range 26 – 42)

Table A7. Adjuvant therapies / professions

	2013	2014	2015	2016	2017	2018	2019	2020
Psychological therapies and approaches (e.g. NLP, Mindfulness, CBT, Counselling)							0	0
Supplements (including homeopathy, herbs, vitamins etc)							0	0
Acupuncture/ Dry needling	2	3	1	1	2	1	2	3
Spiritual / Faith based therapies (including placebo)							0	0
Activity / movement related (e.g. yoga, Pilates, gait, analyses, podiatry (insoles)							0	0
Nutritional / Applied kinesiology	0	0	0	1	0	0	0	0
Separate non-clinical profession (e.g. Teaching, Building, Sales, Research)							0	0
Total	2	3	1	2	2	1	2	3

Mean total number of complaints 2013-2019: 2 (range 1-3)

Table A8. Criminal convictions and Police Cautions

	2013	2014	2015	2016	2017	2018	2019	2020
Common Assault/Battery	0	1	0	0	0	0	1	0
Actual/Grievous Bodily Harm	0	1	0	0	0	0	0	0
Manslaughter /murder (attempted or actual)	0	0	0	0	0	0	0	0
Public Order Offence (e.g. Harassment, Riot, Drunken and disorderly, and racially aggravated offences)	1	1	0	1	0	0	1	0
Drug possession/dealing/trafficking	0	1	0	0	0	0	0	0
Driving under the influence of alcohol/drugs	1	1	1	0	2	0	0	1
Criminal damage			0	0	0	0	0	0
Theft			0	0	0	0	0	0
Possession of indecent images including child pornography	0	0	0	0	0	0	0	0
Sexual assaults	1	1	0	0	0	0	0	0
Rape	0	0	0	0	0	0	0	0
Other			0	0	0	2	2	3
Total	3	6	1	1	2	2	4	4

Mean total number of complaints 2013-2019: 3 (range 1-6)

Table A9. Regulation Specific

	2015	2016	2017	2018	2019	2020
Conduct bringing the profession into disrepute	0	1	13	9	22	13
Failure to cooperate with external investigations/engage in the fitness to practise process	0	0	1	1	5	0
Failure to notify the GOsC of any criminal convictions or police cautions	0	0	0	0	1	0
Failure to respond to requests for information and/or complaints from a patient	0	0	1	3	3	0
Failure to respond to requests for information from the GOsC	0	0	1	0	2	0
Lack of candour	0	0	1	2	1	0
Other						4
Total	0	1	17	15	34	17

Mean total number of complaints 2013-2019: 13 (range 0-34)

Appendix 2

Concerns and complaints mapped onto osteopathic practice standards

Theme A – Communication and patient partnership

Listening and communication

- Failure to communicate effectively,
- Communicating inappropriately,
- Failure to obtain valid consent-no shared decision-making with patient

Theme B – Knowledge, skills and performance

Safety of clinical practice (errors/ incompetence)

- Treatment administered incompetently
- Failure to treat patient considerably/politely
- Providing advice, treatment or care that is beyond the competence of osteopathy

Theme C- Safety and quality

Quality clinical practice (standards of healthcare)

- No treatment plan/inadequate treatment plan
- No diagnosis/inadequate diagnosis
- Inadequate examination/insufficient clinical tests

Safety of clinical practice (errors/ incompetence)

- Inappropriate treatment or treatment not justified
- Treatment causes new or increased pain or injury
- Forceful treatment
- Failure to refer
- Failure to maintain patient records

Respect and patient's Rights

- Failure to protect patient's dignity/modesty
- No chaperone offered/provided

Theme D - Professionalism

Quality clinical practice (standards of healthcare)

- Breach of patient confidentiality

Business/processes

- Failure to maintain professional indemnity insurance
- Data protection-management/storage/ access of confidentiality data
- False/misleading advertising

- Fraudulent acts e.g. Insurance fraud
- Business dispute between osteopaths
- Dishonesty/lack of integrity in financial and commercial dealings
- Forgery - providing false information in patient records

Respect and patient's Rights

- Sexual impropriety
- Conduct a personal relationship with the patient
- Exploiting patients (borrowing money, encouraging large gifts, inappropriate fees, pressuring patients to obtain services for financial gain)

Criminal convictions

- Common Assault/Battery
- Public Order Offence (e.g. harassment, riot, drunken and disorderly, and racially aggravated offences)

Regulation Specific

- Conduct bringing the profession into disrepute
- Lack of candour
- Failure to respond to requests for information and/or complaints from patients
- Failure to cooperate with external investigations/engage in fitness to practice process
- Failure to notify the GOsC of any criminal convictions or police cautions