



General  
Osteopathic  
Council

## Guidance on infection control in osteopathy

**27 March 2025**

This interim guidance is subject to regular review – [see the version history for information about updates to this document.](#)

# Contents

Introduction .....	3
What the Osteopathic Practice Standards say about infection control .....	3
• Health and safety considerations .....	3
• Your own health .....	4
Infection control .....	4
• Assessing the risks .....	5
• Reducing the risk of transmission of infections .....	5
Keeping up to date – helpful resources .....	9
Version history .....	10
Annex: Infection control guidance implementation: Overview of the key Osteopathic Practice Standards .....	14

## Introduction

The General Osteopathic Council (GOsC) originally issued this interim guidance on infection control in light of the COVID-19 pandemic in March 2020. It has since been updated to take account of current advice on infection control in healthcare settings across the United Kingdom.

This guidance has been updated regularly as advice and the context changed across the four countries of the UK and continues to be subject to change.

This guidance sets out principles, and aims to enable osteopaths to inform their professional judgement in relation to the particular situation at hand. These judgements should be made by osteopaths in discussion with their patients taking into account relevant government and professional guidance on infection control.

The guidance signposts links to relevant guidance across the UK. Other sources of information to inform the exercise of professional judgement include the credible advice of colleagues and other health professionals.

## What the Osteopathic Practice Standards say about infection control

The [Osteopathic Practice Standards](#) (OPS) provide a framework for practice, helping to inform professional judgement and shared decision making. The OPS set out the expectations of osteopaths as regulated healthcare professionals. Patients must be able to trust osteopaths with their health. To justify that trust, osteopaths must meet the standards expected in the Osteopathic Practice Standards.

Osteopaths are personally accountable for their professional practice and must always be prepared to justify their decisions and actions, explaining how they have exercised their professional judgement and the advice and that they have taken in order to inform this.

Patient protection is important. If an osteopath's approach to infection control and patient care departs from expected standards, then the osteopath will be expected to be able to explain and justify why the guidance had not been applied and how risks to patients and others were mitigated to protect patients. Failure to do so could put patients, osteopaths and others at risk, and may also put the osteopath's registration at risk in cases where patient safety or public confidence is affected.

Specific standards and associated guidance in the OPS which might particularly apply in relation to infection control include the following health and safety considerations, and considerations in relation to your own health.

### Health and safety considerations

[Standard C5](#) states: 'You must ensure that your practice is safe, clean and hygienic, and complies with health and safety legislation.'

The associated guidance states that:

1. Your practice premises must be clean, safe, hygienic, comfortable and appropriately equipped.
2. There are detailed requirements in law for health and safety in the workplace. Further details can be found on the website of the UK Health and Safety Executive.
3. You must have adequate public liability insurance.
4. You should ensure that you have appropriate procedures in place in the event of a medical emergency.
5. You should take all necessary steps to control the spread of communicable diseases.

## **Your own health**

[Standard D11](#) states: 'You must ensure that any problems with your own health do not affect your patients. You must not rely on your own assessment of the risk to patients.'

The associated guidance states:

1. If you know or suspect that your physical or mental health is impaired in a way that might affect the care you give to patients, you must:
  - 1.1. seek and follow appropriate medical advice on whether you should modify your practice and in what way
  - 1.2. if necessary, stop practising until your medical adviser considers you fit to practise again
  - 1.3. inform the GOsC.
2. If you are exposed to a serious communicable disease, and you believe that you may be a carrier, you should not practise until you have received appropriate medical advice, and you should follow any advice you are given about suspending or modifying your practice. You should take all necessary precautions to prevent transmission of the condition to patients.

These, and further OPS standards which might particularly apply in relation to the implementation of this guidance are set out in the [Annex](#) towards the end of this document.

## **Infection control**

Osteopaths may work in a range of settings including the NHS, and should follow the infection control guidance in place in their setting, ensuring that they also continue to follow the Osteopathic Practice Standards.

All health professionals, including osteopaths in independent practice must follow appropriate infection control guidance to inform their approach to infection control in order to practise in accordance with the Osteopathic Practice Standards.

## Assessing the risks

In the context of osteopathic practice, assessing the risks means that you need to undertake, record, and review regularly an updated health and safety at work assessment.

It is the responsibility of the self-employed person or the employer to ensure that activities do not expose risks to health and safety.<sup>1</sup> This risk assessment should take into account risks to patients and the public, the osteopath, staff, and any others who come into contact with the practice. The osteopath should then consider ways to mitigate these risks.

Specifically, the risk assessment should be informed by current public health guidance, as well as other infection control procedures. The risk assessment should be regularly reviewed and updated as guidance changes.<sup>2</sup> It should also ensure that appropriate professional indemnity and public liability insurance is in place.<sup>3</sup>

## Reducing the risk of transmission of infections

Osteopaths should implement appropriate risk mitigations including infection control policies and procedures (informed by National Infection Prevention and Control guidance issued by the relevant government, and where relevant any UK public health guidance and professional guidance) to reduce the transmission of any diseases with face-to-face appointments.

In relation to COVID-19, even with the lifting of restrictions, osteopaths may choose to continue to utilise masks or other personal protective equipment (PPE) in response to their own risk assessments as a general policy, or on a case-by-case basis. This will be a matter for their own professional judgement.

The UK Health Security Agency (UKHSA) issued [guidance on Managing healthcare staff with symptoms of a respiratory infection or a positive COVID-19 test result](#) (updated 31 March 2023). Although aimed at staff and managers in the NHS and NHS commissioned services, this provides advice on the management of patient-facing healthcare staff with symptoms of a respiratory infection including COVID-19, or who have tested positive for COVID-19. Key elements of this update include:

- most healthcare staff who have symptoms of a respiratory infection are no longer asked to test for COVID-19
- healthcare staff who test positive for COVID-19 are no longer required to have two negative lateral flow tests for COVID-19 before they return to work

---

<sup>1</sup> See for example, s3(2) Health and Safety at Work Act 1974 (as amended), s4(2) of the Personal Protective Equipment and at Work Regulations 1992, and the Health and Safety at Work Order 1978 in Northern Ireland. Further information about health and safety is available from the [Health and Safety Executive](#) and also the [Health and Safety Executive for Northern Ireland](#).

<sup>2</sup> NB Review of current UK public health guidance and profession guidance is good CPD for osteopaths and meets the requirements of Theme A: Communication and patient partnership; B: Knowledge, skills and performance; C: Safety and quality and D: Professionalism of the Osteopathic Practice Standards

<sup>3</sup> See standards C5 and D1 of the [Osteopathic Practice Standards](#)

- healthcare staff whose job primarily involves providing direct care to inpatients who are severely immunosuppressed, should take a lateral flow test if they develop symptoms of a respiratory infection, in line with locally decided protocols
- healthcare staff whose job primarily involves providing direct care to inpatients who are severely immunosuppressed and who have a positive COVID-19 test should return to work in line with locally decided protocols.

### **Personal protective equipment in osteopathic practice**

Personal protective equipment (PPE) may be part of infection control procedure, as outlined in public health guidance from time to time in any or all of the four UK nations, or may be used as part of a general practice policy, or on a case-by-case basis within your particular practice as a reflection of your own risk assessments and professional judgement.

Where personal protective equipment such as a face mask is required, there may be occasions when an osteopath and/or patient is unable to wear one (or other PPE):

- **If an osteopath is unable to wear PPE**, due to health reasons, they must consider [Standard D11](#) of the OPS, which states that: ‘You must ensure that any problems with your own health do not affect your patients. You must not rely on your own assessment of the risk to patients’.

If an osteopath is unable to protect patients by wearing appropriate PPE when the guidance requires this taking into account their risk assessment informed by UK public health guidance then they may not be able to practise.

- **If a patient is unable to wear a face mask when requested or required to do so:** As well as following infection control guidance and undertaking a risk assessment, when considering treating a patient, osteopaths are also expected to continue to use professional judgement. When making decisions, it is right that osteopaths should consider the needs and wishes of patients, including the risks and wishes of other patients.

We would encourage osteopaths to discuss these matters with the patient and to raise any concerns about managing infection control and explore together how a face-to-face contact can be made safe. Osteopaths could take into account the following from [Theme C: Safety and quality in practice](#) of the Osteopathic Practice Standards and [Theme D: Professionalism](#).

Osteopaths must deliver high-quality and safe healthcare to patients. Theme C sets out the standards in relation to the delivery of care, and this includes safeguarding of patients, and public health:

C5.5: You should take all necessary steps to control the spread of communicable diseases.

It is also important that osteopaths comply with equality legislation. [Standard D6](#) states: ‘You must treat patients fairly and recognise diversity and individual values. You must comply with equality and anti-discrimination law.’

Osteopaths should explore all options with a patient to consider, in partnership with them, how the osteopath may facilitate the patient’s treatment in a way which meets

their needs and maintains a safe environment. It may be necessary to refer the patient or to recommend that the patient seeks advice from [NHS 111](#).

## Vaccinations

Vaccinations are not a precondition of osteopathic practice.

However, the [Green Book](#) recommends that all staff and students providing care to patients should be up to date with vaccinations.

GOsC guidance ([C5.5 of the Osteopathic Practice Standards](#)) states that osteopaths should 'take all necessary steps to control the spread of communicable diseases.

The [Green Book](#) (chpt 12) states that immunisations may:

- protect the individual and their family from an occupationally-acquired infection
- protect patients and service users, including vulnerable patients who may not respond well to their own immunisation
- protect other staff.

## Lateral Flow Tests for COVID-19

Testing is another infection control mitigation which may form part of osteopaths' infection control risk assessment and response in relation to COVID-19.

The latest UKHSA Guidance indicates that healthcare staff (unless providing direct care to severely immune-suppressed patients) are not required to take a COVID-19 test and should follow the [guidance for people with symptoms of a respiratory infection including COVID-19](#). They should stay at home until they no longer have a high temperature (if they had one) or until they no longer feel unwell. Healthcare staff who test positive for COVID-19 are no longer required to have two negative lateral flow tests for COVID-19 before they return to work.

Free lateral flow tests are no longer available for most people in England, including independent healthcare providers. Information on accessing tests is available on the [NHS website](#) with links for those in [Scotland](#), [Wales](#) and [Northern Ireland](#).

## Patient specific risk mitigations

**Triaging patients:** Osteopaths should consider continuing communicating with patients prior to attendance to ensure that they do not have relevant symptoms and that a face-to-face appointment is still appropriate. Where it is decided that a remote consultation is appropriate, please refer to GOsC's [Statement on remote consultations](#).

**Vulnerable patients:** Although the shielding scheme has ended in England, the government continues to publish [guidance for people whose immune system means they are at higher risk](#). Separate guidance is available for people living in [Scotland](#), [Wales](#) and [Northern Ireland](#).



## Keeping up to date – helpful resources

Helpful infection control guidance includes:

- In England: [National Infection Control and Prevention and Control Manual \(updated January 2025\)](#) – ‘This is an evidence-based practice manual for use by all those involved in care provision in England. It should be adopted as mandatory guidance in NHS settings or settings where NHS services are delivered, and the principles should be applied in all care settings.’
- In Scotland: [National Infection Prevention and Control Manual \(updated as at 14 March 2025\)](#) ‘The National Infection Prevention and Control Manual (NIPCM) and Care Home Infection Prevention and Control Manual (CH IPCM) are considered best practice in all health and care settings.’
- In Wales: [National Infection Prevention and Control Manual \(updated as at 14 March 2025\)](#) This e-manual has been adopted for use by all healthcare organisations in Wales and is based on systematic reviews of the literature and policies from Health Protection Scotland and we gratefully acknowledge their work.
- In Northern Ireland: [Northern Ireland Regional Infection Prevention and Control Manual \(updated as at January 2025\)](#) - Healthcare organisations may adopt this advice and guidance in Health and Social Care Trusts, Primary Care, Private Clinics and Voluntary sectors, Independent sectors, Care Homes, and Hospices to achieve IPC standardisation across all healthcare providers and professional groups.
- [UK Health Security Updates and Alerts](#) about infectious diseases
- The Government publishes [Coronavirus \(COVID-19\) guidance](#) (although note that currently at May 2023 there are no COVID-19 restrictions in the UK). Links to regulations in [Scotland](#), [Wales](#) and [Northern Ireland](#) are included on the website. Further [NHS guidance](#) is also available (some operational and organisational details may differ across the four UK nations).

General Osteopathic Council Interim Guidance

**March 2025**

## Version history

Date	Changes made	Sign off
19 March 2020	Original version	Matthew Redford and Chair of Council
24 March 2020	Additional statement about osteopathic practice in the current context. Guidance updated to incorporate Guidance on Shielding.	Matthew Redford
2 April 2020	<p><b>Additional Guidance: Osteopathic Practice in the COVID-19 section updates</b></p> <p>Additional paragraphs about osteopathic practice in the current context highlighting telephone or video consultations or closure (with signposting to other health care resources for patients) as appropriate options in the current context.</p> <p><b>Additional Guidance: Infection control section updates</b></p> <p>Additional guidance highlighting health and safety obligations and links to further resources.</p> <p>Standard Infection Control Procedures updated in accordance with the updated version (27 March 2020) Guidance for infection prevention and control in healthcare settings Adapted from Pandemic Influenza: Guidance for Infection prevention and control in healthcare settings 2020 Issued jointly by the Department of Health and Social Care (DHSC), Public Health Wales (PHW), Public Health Agency (PHA) Northern Ireland, Health Protection Scotland (HPS) and Public Health England as official guidance.) Additional statement about practitioners who have had and recovered from COVID-19 still following infection control procedures including PPE.</p>	Matthew Redford
8 April 2020	<p><b>Additional Guidance: Infection control section updates</b></p> <p>Updated to take account of COVID-19: infection prevention and control (IPC) published by Public Health England working with NHS England and NHS Improvement, and the Devolved Administrations to review the UK's infection prevention and control recommendations for COVID-19 (7 April 2020).</p>	Matthew Redford

8 May 2020	<p><b>Additional guidance: practising in the COVID-19 pandemic</b></p> <p>Updated to take account of updated Government Guidance on Staying at Home and Shielding.</p> <p>Updated to include additional information from the Osteopathic Practice Standards.</p>	Matthew Redford
12 May 2020	<p><b>Introduction</b></p> <p>Insertion of additional introduction section referring to the exercise of professional judgement.</p> <p><b>Additional guidance: practising in the COVID-19 pandemic</b></p> <p>Updated to take account of updated Government Guidance on Staying at Home across the four UK countries which is now diverging.</p> <p>Updated to take account of varying sources for clinically vulnerable patients across the four countries of the UK.</p> <p><b>Additional Guidance: Infection control</b></p> <p>Inclusion of additional links to the Health and Safety Executive in Northern Ireland. Additional signposting to the importance of appropriate professional indemnity and public liability insurance.</p> <p>Updated guidance about COVID-19: infection prevention and control guidance from <a href="#">This guidance</a> issued jointly by Public Health England, NHS, Public Health Scotland, Public Health Agency (NI), Public Health Wales and Health Protection Scotland (As at 27 April 2020).</p> <p>Additional signposting of the Osteopathic Practice Standards in relation to documenting consultations.</p>	Matthew Redford
24 June 2020	Review of references in the light of updated guidance, including guidance on shielding.	Matthew Redford
16 July 2020	Updated links and referenced local lockdown provisions.	Matthew Redford
5 August 2020	Updated links and references to the pausing of shielding arrangements.	Matthew Redford
20 August 2020	Updated links and guidance in light of updates to government advice on returning to the UK.	Matthew Redford
25 September 2020	Updated links, improved structure and added updates to PHE and iO advice.	Matthew Redford

5 January 2021	Updated links to incorporate new measures introduced in Northern Ireland and Wales (26 December 2020), and Scotland and England (4 January 2021).	Matthew Redford
13 July 2021	Updated to incorporate changes to public health guidance, including updated guidance for clinically extremely vulnerable (CEV) people, and some relaxation of restrictions. Removed detailed information related to listing of COVID-19 symptoms and CEV conditions. Enhanced reference to professional judgement in the introduction drawn from the PPE Statement in February 2021. Merged what was in the PPE guidance into this document. Clarified that our standards remain in place beyond the planned lifting of government restrictions on 19 July. Further Standards referenced from the OPS and added to new Annex, particularly relating to equality and diversity, the importance of discussion with patients and provision of balanced public health advice.	Matthew Redford
12 October 2021	Added reference to lateral flow tests as a potential mitigation process, with a link to the NHS website. Updated links to infection control guidance following replacement of Public Health England with UK Health Security Agency and Office for Health Improvement and Disparities. Updated the vulnerable patients section in line with government updates and moved a few small sections to improve the structure of the document.	Matthew Redford
9 December 2021	Updated to reference latest UKHSA guidance in relation to infection prevention and control in health and care settings, including changes to PPE recommendations. Modified links where necessary to ensure they are up to date.	Matthew Redford
4 April 2022	Updated links and references to latest UKHSA and other guidance, and government's intention to revoke vaccination as condition of deployment.	Matthew Redford
12 April 2022	Updates in relation to further updated UKHSA guidance, new or updated links and changes to availability of lateral flow tests.	Matthew Redford
28 July 2022	Updated to reflect changes to UKHSA guidance and other minor updates.	Matthew Redford
21 November 2022	Updated to reflect changes to external links and the removal of the iO Covid specific guidance as this is now more generic and only available to members.	Matthew Redford
5 May 2023	Updated to reference latest changes in UKHSA guidance and other minor changes including updating links.	Matthew Redford

17 March 2025	Updated to reference infection control generically as well as in relation to COVID-19. Removal of links to outdated guidance. Insertion of generic guidance including the Green Book.	
---------------	---	--

### **Infection control guidance implementation: Overview of the key Osteopathic Practice Standards**

The specific standards from the Osteopathic Practice Standards referenced within this guidance are reproduced below. Also included below are some further standards which may apply in relation to the implementation of infection control guidance. They cover such issues as communication and consent, patient records, equality and diversity, and the provision of public health advice and guidance.

The full standards are available at [standards.osteopathy.org.uk](https://standards.osteopathy.org.uk):

#### **Communication and patient partnership**

- A1:** You must listen to patients and respect their individuality, concerns and preferences. You must be polite and considerate with patients and treat them with dignity and courtesy.
- A2:** You must work in partnership with patients, adapting your communication approach to take into account their particular needs and supporting patients in expressing to you what is important to them.
- A3:** You must give patients the information they want or need to know in a way they can understand.' And the associated guidance which provides that: 'You should discuss care options, encourage patients to ask questions, and deal with these clearly, fully and honestly. You should inform your patients of anticipated benefits as well as any material or significant risks associated with the treatment you are proposing, and confirm their understanding of these. If proposing no treatment, you should explain any potential risks and benefits associated with this.
- A4:** You must receive valid consent for all aspects of examination and treatment and record this as appropriate.'
- A4.18: You must record key elements of your discussion with the patient. This should include information discussed, any particular concerns, expectations or requests for information raised by the patient, how you addressed these, and any decisions made. It is important that such issues are evidenced in the patient records.
- A5:** You must support patients in caring for themselves to improve and maintain their own health and wellbeing.
- A6:** You must respect your patients' dignity and modesty.
- A7:** You must make sure your beliefs and values do not prejudice your patients' care.

#### **Safety and Quality in Practice**

- C5:** You must ensure that your practice is safe, clean and hygienic, and complies with health and safety legislation.
1. Your practice premises must be clean, safe, hygienic, comfortable and appropriately equipped.

2. There are detailed requirements in law for health and safety in the workplace. Further details can be found on the website of the [UK Health and Safety Executive](#).
3. You must have adequate [public liability insurance](#).
4. You should ensure that you have appropriate procedures in place in the event of a medical emergency.
5. You should take all necessary steps to control the spread of communicable diseases.

[C6](#): You must be aware of your wider role as a healthcare professional to contribute to enhancing the health and wellbeing of your patients.

C6.1: You should be aware of public health issues and concerns, and be able to discuss these in a balanced way with patients, or guide them to resources or to other healthcare professionals to support their decision-making regarding these.

### **Professionalism**

[D6](#): You must treat patients fairly and recognise diversity and individual values. You must comply with equality and anti-discrimination law.

[D11](#): 'You must ensure that any problems with your own health do not affect your patients. You must not rely on your own assessment of the risk to patients.'

1. If you know or suspect that your physical or mental health is impaired in a way that might affect the care you give to patients, you must:
  - 1.1 seek and follow appropriate medical advice on whether you should modify your practice and in what way
  - 1.2 if necessary, stop practising until your medical adviser considers you fit to practise again
  - 1.3 inform the GOsC.
2. If you are exposed to a serious communicable disease, and you believe that you may be a carrier, you should not practise until you have received appropriate medical advice, and you should follow any advice you are given about suspending or modifying your practice. You should take all necessary precautions to prevent transmission of the condition to patients.