

GENERAL OSTEOPATHIC COUNCIL
PROFESSIONAL CONDUCT COMMITTEE

Case No: 890

Professional Conduct Committee Hearing

DECISION

Case of:	Simon Baron
Committee:	Andrew Harvey (Chair) Robert Thomas (Osteopath) Jacqueline Telfer (Lay)
Legal Assessor:	Peter Steel
Representation for Council:	Andrew Faux
Representation for Osteopath:	Simon Connolly
Clerk to the Committee:	David Bryan
Date of Hearing:	16 December 2025

Summary of Decision:

Stage One

Decision on Facts

The Registrant admitted the allegation in its entirety. The Committee therefore found the allegation proved.

Stage Two

Summary of Finding on Unacceptable Professional Conduct

Unacceptable Professional Conduct found proved.

Stage Three

Sanction

The Committee imposed a sanction of admonishment.

Allegation and Facts:

The allegation [~~as amended in red~~] is that Mr Simon Baron ("the Registrant"), has been guilty of unacceptable professional conduct, contrary to section 20(1)(a) of the Osteopaths Act 1993, in that:

1. From 5 July 2022 to 5 April 2023, inclusive of both dates ("the Relevant Period"), the Registrant:

a. was registered and/or practised as an osteopath; and

Admitted and found proved

b. failed to obtain and maintain insurance cover required by Rule 3 of the General Osteopathic Council (Indemnity Arrangements) Rules Order 2015 ("the Order");

Admitted and found proved

2. During the Relevant Period, the Registrant:

a. knew that in holding yourself out to the public as a registered osteopath, he was required to hold professional indemnity insurance; and/or

Admitted and found proved

b. treated patients despite not having appropriate professional indemnity insurance, thereby acting to the potential detriment of such patients and placing them at risk;

Admitted and found proved

3. The Registrant's conduct as set out at paragraph 1 ~~(b) and/or paragraph 2(b):~~

~~a. was misleading and/or~~ demonstrated a lack of integrity.

Admitted and found proved

4. ~~The Registrant's conduct as set out at paragraph 2:~~

~~a. was misleading and/or~~

Admitted and found proved

~~b. demonstrated a lack of integrity.~~

Admitted and found proved

Preliminary Matters:

Declarations

1. The parties and the Committee introduced themselves.
2. Prior to the commencement of a hearing, each member of the Professional Conduct Committee (PCC) is required to declare that they know of no reason why they should not sit upon the case. This declaration is intended to ensure that fairness is done and is seen to be done to all parties.
3. Each member of the PCC made this declaration.

Bundles

4. The Chair took the parties through the documentation to ensure everyone had the same material.

Amending the Allegation

5. Mr Faux, acting on behalf of the Council, applied to amend the allegations as marked in red under the heading **"Summary of Decisions"** above. Mr Faux submitted that the intention behind the amendments was to clarify the Council's case, and to facilitate admissions by the Registrant.
6. In particular, Mr Faux said that the amendments sought to make clear that failing to maintain insurance while registered (as alleged in particular 1) was solely a matter of integrity, whereas holding oneself out as a registered osteopath and treating patients (as alleged in paragraph 2) was both misleading and lacking in integrity. He said that such clarification, and making economic use of the time of the Committee, were clearly in the public interest. This amendment was agreed by the Registrant.
7. The Committee accepted the advice of the Legal Assessor about its ability to permit amendment of the allegation under Rule 24 of the General Osteopathic Council Professional Conduct Committee (Procedure) Rules Order of Council 2000 (the Rules).

8. Having considered the proposed amendments and the oral representations the Committee concluded that there would be no injustice in acceding to the application, which had been agreed by the Registrant. The Committee accepted that the effect of the amendments was to clarify the GOsC's allegation, about which the Registrant was already aware, and to facilitate admissions. It therefore concluded it was desirable to permit the amendments as set out above.

Admissions

9. Mr Connolly, appearing on behalf of Mr Baron, indicated at the outset of the hearing that the allegation was admitted in its entirety. The Committee therefore found the allegation proved.

Decision:

Background

10. Mr Baron was first registered with the GOsC on 27 June 2017.
11. It is a legal requirement that registrants have appropriate indemnity cover in place when they practise. The General Osteopathic Council (Indemnity Arrangements) Rules Order of Council 2015 ("the Order") states:

"Obligation to have an indemnity arrangement"

3. An osteopath must have in force in relation to that osteopath an indemnity arrangement which provides appropriate cover, for not less than the prescribed amount, in respect of claims for any of the prescribed risks."

12. On 13 April 2023, Mr Baron emailed the GOsC Registration department to report that he had had a lapse in his insurance. He set out that this lapse was not deliberate, but he understood the seriousness of it and that it had come about due to pressure in his personal life. Mr Baron emailed the GOsC again later that day stating:

"I was made aware that my insurance had lapsed from June of last year. I am writing to regrettably inform you that I continued to practise without knowledge of being uninsured. The oversight understandably is my fault. I am aware of the seriousness of the matter and how inexcusable it is. As soon as I became aware I have since contacted and

organised insurance with Balens (with whom I was previously insured with) and can confirm that I am insured, yet they informed me that they are unable to backdate the insurance. I would like to add that this oversight was not as a result of sheer carelessness, however it was made possible due to personal life matters that I have been going through regarding marital difficulties combined with [redacted]. I have been attending [redacted]. I know this doesn't excuse the omission of meeting regulatory standards but I wanted to express how important it is and how highly I value being above board and meeting standards of practice."

13. Mr Baron's previous insurance policy had expired on 4 July 2022. Mr Barron told the GOsC that he had first realised that he was not insured on 2 February 2023, but had been under the impression that he had a "holding cover insurance" due to the fact that he understood his insurers, Balens, would backdate his cover.
14. However, having missed emails asking him to pay for the cover, Mr Baron finally realised that on 3 April 2023 he was uninsured and stopped holding himself out to patients. He put a new insurance policy in place by 5 April 2023.

Evidence

15. As a result of Mr Baron's admissions, the facts of the case were not in dispute.
16. The Committee had nonetheless read all the evidence provided to it in the GOsC bundle consisting of 120 pages, and in the Defence bundle consisting of 48 pages including in particular:
 - The witness statement of Lorraine Palmer, a Registration Officer at the GOsC dated 13 June 2023 and exhibits;
 - The witness statement of Josh Balen, Managing Director of Balens Limited dated 18 October 2023;
 - The witness statements of Mr Baron dated 27 February 2024, 29 October 2025 and exhibit, and 9 December 2025; and
 - The various testimonials and medical records provided on behalf of Mr Baron.

Submissions of the Parties on Unacceptable Professional Conduct ("UPC")

17. Mr Faux told the Committee that the GOsC accepted that Mr Baron had been unaware that he was practising uninsured and that he had taken appropriate action, including reporting himself to GOsC, when he realised that he had practised uninsured. He said that Mr Baron deserved some credit for his self-reporting and subsequent admissions.
18. Mr Faux reminded the Committee of the relevant law. He submitted that practising without insurance in any circumstances, even unwittingly, was a serious matter, in that it put patients at risk. An ordinary, intelligent member of the public would undoubtedly agree that such conduct was morally blameworthy and attracted a degree of opprobrium.
19. Mr Faux said that patients and the Council had been misled as to the Registrant's insurance status, and this was something that could amount to UPC. As regards Mr Baron's admitted lack of integrity, Mr Faux said that this too was a serious matter. The Registrant's failure to comply with the fundamental professional requirement and legal duty to maintain insurance was clearly conduct that was morally blameworthy and capable of amounting to UPC.
20. Mr Connolly accepted on behalf of Mr Baron that the admitted facts amounted to UPC.

The Committee's Findings on UPC

21. The Committee accepted the advice of the Legal Assessor. The Committee bore in mind that there is no standard of proof and that a determination as to whether the threshold for UPC has been reached is a matter of judgment. The Committee had regard to Section 20 of the Osteopathic Act 1993, which defines UPC as conduct which "*falls short of the standard required of a registered osteopath*". It considered guidance from the Council and the matters set out in *Spencer v General Osteopathic Council* [2012] EWHC 3146 (Admin) that Unacceptable Professional Conduct is conduct which implies some degree of "*moral blameworthiness*". It bore in mind the case of *Shaw v General Osteopathic Council* [2015] EWHC 2721 (Admin), which indicated that although conduct had to be serious to reach the required threshold, it did not need to be so serious that imposing an admonishment would be too lenient.
22. The Committee took into account Mr Baron's concession that the facts found proved amounted to UPC. It nonetheless considered the question independently. The facts of the case demonstrated a serious departure

from the standards required of an osteopath in that Mr Baron had practised for some 9 months without indemnity insurance, thereby exposing patients to an unjustifiable risk of harm.

23. The Registrant had misled the Council and patients as to his insurance status over an extended period, albeit unknowingly, and had failed to show the steady adherence to the OPS that both the profession and the public would expect from a registered osteopath. The Committee had no doubt that viewed overall, both the public and fellow members of the profession would view this with a significant degree of moral opprobrium.
24. The Committee considered there had been a clear breach of Standard D1 of the OPS in respect of the matters it had found proved. It was cognisant of the fact that a breach of the OPS does not automatically constitute unacceptable professional conduct. However, in this case there had been a clear and significant failure by the Registrant to protect patients and himself in failing to maintain his insurance.
25. The Committee was clear that by his conduct the Registrant had failed to uphold the reputation of the profession and appropriate professional standards. Having regard to the overarching objective, the Committee was of the opinion that a finding of unacceptable professional conduct was justified on the grounds it was necessary to protect the public, maintain confidence in the profession and promote proper standards of conduct.
26. In the Committee's judgment, the conduct of the Registrant fell seriously short of the standard required of an osteopath. It therefore found that the facts proved amounted to unacceptable professional conduct.

Evidence of Mr Baron

27. Mr Baron gave evidence on affirmation. Mr Baron explained that in 2023 he had left his practice in Knaresborough, in order to develop his career at the other practice where he worked in Wakefield and cope with his parental and personal responsibilities. He said that he currently worked 4½ days a week because of his childcare arrangements, and he saw between 10 and 12 patients a day.
28. Mr Baron said that his work consisted of osteopathic treatment, as well as dry needling, shockwave therapy and kinesiology. He had taken courses in acupuncture and kinesiology. Mr Baron said that he aimed to deliver patient – centred care, in which he considered patients as more

than the injury they have presented with. This involved careful listening and ensuring that the patient was comfortable with the treatment offered. Mr Baron confirmed that he had no previous disciplinary history with the GOsC.

29. Mr Baron accepted that it was misleading to have practised without insurance, because insurance was a statutory obligation, and a prerequisite in order to practise as an osteopath. The public therefore expected osteopaths to be insured.
30. Mr Baron also accepted that he had acted without integrity, because as an osteopath it was his responsibility to manage his own affairs. In failing to meet the required professional standards Mr Baron said he had not been as patient – centred as he thought he was and had brought his own competence into question.
31. Mr Baron said that his failings had been serious, raising patient safety issues. He had failed in his requirement to be professional at all times and thus accepted he was guilty of UPC.
32. Mr Baron said he had learned a lot from the experience. Whereas once he might have shied away from clerical issues such as checking emails, he now understood how important it was to keep on top of this. When treating patients, Mr Baron said he now made sure they were fully aware of his role so that he did not extend beyond his remit.
33. Mr Baron told the Committee that the GOsC proceedings had had a two-fold impact on him. On the one hand, he had realised the full extent of his professional responsibilities, but on a personal level it had been a very daunting procedure to go through. He said he had felt “*suspended in limbo*” and had suffered some anxiety.
34. The process had also made Mr Baron reflect on the situation that led him to be before the GOsC. Mr Baron said he had resolved to put things in place so that such infractions did not happen again. It had also made him realise that he was in a very privileged position and that as an osteopath he was trusted to be responsible for people’s lives.
35. Mr Baron referred to his upbringing in Mormon faith, with its requirement to act in a virtuous way, and explained the effect of the Mormon Church on his outlook and social history. He had subsequently left the Church.

36. At the time of the events in question Mr Baron told the Committee that he had been experiencing marital difficulties and his marriage eventually broke down. Associated with this was pressure from family members who were still Mormons.
37. Mr Baron said that these issues had occurred at a period of time when events were reaching a crescendo, and it had been difficult for him to organise matters within his family situation. He was now divorced and the pressures he was experiencing at the time of these matters had reduced. Mr Baron assessed that the risk of failing to maintain his insurance in the future as a result was "zero".
38. In addition, at the same time Mr Baron's son had experienced serious illness, which had been another distraction. There remained some concerns about his son's health, but Mr Baron said that in the future he would not try to manage as many things as he had done at the time of these events, and would delegate better. If he recognised any risk to his professionalism, he would stop practising immediately.
39. Mr Baron said that he had always prided himself on his desire to face things head on, and "*break the chains of his past*" in order to care for others. His failings in professional matters had therefore caused him to reflect deeply on his own conduct. The failings were very much out of character for him, and carried huge weight in his thinking.
40. In answer to a question from Mr Faux, Mr Baron said that he had reported himself to the GOsC because of his respect for and understanding of professional standards and to allow justice to take its course.

Submissions of the Parties on Sanction

41. Mr Faux said that in this case, and unusually, the GOsC wished to make representations on sanction. Mr Faux submitted that the proportionate sanction in this case was one of admonishment. The GOsC had previously communicated to Mr Baron that it was appropriate to dispose of the matter under Rule 8 of the Rules by way of an admonishment.
42. Mr Faux said that the GOsC considered that the matters that had led the Rule 8 application to be rejected had been addressed in the course of these proceedings and Mr Baron's evidence. These were: the need to be assured about the circumstances in which he failed to renew his insurance; Mr Baron's degree of insight; and the extent of his remediation.

43. In the light of all the available evidence, Mr Faux said that an admonishment was clearly the proportionate outcome.
44. Mr Connolly referred to the submissions contained in his skeleton argument on behalf of Mr Baron and said that, since Mr Faux had helpfully touched on all the issues he would raise on behalf of his client, he had nothing further to add.

The Committee's Determination on Sanction

45. The Committee had regard to the submissions of the parties and accepted the advice of the legal assessor on sanction. The Committee took into account the guidance in the Council's Hearings and Sanctions Guidance.
46. It noted the following mitigating features in this case:
 - a. The Committee had received convincing evidence of the extenuating circumstances at the time of the events underlying the allegation;
 - b. Mr Baron clearly recognised the seriousness of his conduct and had demonstrated a significant degree of reflection on and insight into his behaviour;
 - c. Mr Baron had taken prompt remedial action when he belatedly realised that he did not have insurance in place;
 - d. He had taken steps to avoid any similar problem in the future;
 - e. There was no evidence before the Committee of harm to patients during the period in question;
 - f. Mr Baron had provided supportive testimonials from patients and fellow professionals; and
 - g. He had engaged fully with the GOsC and had been transparent and helpful throughout these undoubtedly stressful proceedings.
47. The Committee considered that the length of time that Mr Baron had practised without insurance cover was an aggravating feature in the case.

48. The Committee recalled that, as the legal assessor had advised, the purpose of a sanction is not to be punitive, although it may have that effect. Rather, its purpose is to protect patients and the wider public interest. The Committee bore in mind the necessity for any sanction to be proportionate, taking into account both the Registrant's interests and the need to uphold the public interest, including confidence in the profession and the maintenance of appropriate professional standards.
49. The Committee first considered whether to admonish the Registrant. It noted that the mitigating factors listed above engaged many of the factors listed at paragraph 64 of the Hearings and Sanction Guidance as suggesting that an admonishment might be appropriate. The Committee noted in particular that there was no evidence that the Registrant presented any danger to the public. He had demonstrated insight into his failings by his admissions and the steps he had taken to address the problem. The failure to obtain adequate indemnity insurance had been an isolated and unintentional failing within his professional practice, which had not been repeated. Lastly, there had been no repetition of any similar issue since the matters came to light.
50. The Committee considered whether any more restrictive sanction, such as an order for conditions or suspension would nonetheless be appropriate looking at the case as a whole. However, it considered that to go beyond an admonishment would be disproportionate and punitive, given the circumstances presented to it.
51. The Committee therefore determined to admonish the Registrant. This decision will take effect in 28 days from the date notification of this decision is served on the Registrant unless there is an appeal against the decision.

Under section 31 of the Osteopaths Act 1993 there is a right of appeal against the Committee's decision.

The Registrant will be notified of the Committee's decision in writing in due course.

All final decisions of the Professional Conduct Committee are considered by the Professional Standards Authority for Health and Social Care (PSA). Section 29 of the NHS Reform and Healthcare Professions Act 2002 (as amended) provides that the PSA may refer a decision of the Professional Conduct Committee to the High Court if it considers that the decision is not sufficient for the protection of the public.

Section 22(13) of the Osteopaths Act 1993 requires this Committee to publish a report that sets out the names of those osteopaths who have had Allegations found against them, the nature of the Allegations and the steps taken by the Committee in respect of the osteopaths so named.