



**Policy and Education Committee**

**15 June 2021**

**Fitness to Practise: Osteopathic Practice Standards and Adjunctive Therapies**

<b>Classification</b>	Public
<b>Purpose</b>	For decision
<b>Issue</b>	Protecting patients and supporting other stakeholders in understanding the application of the Osteopathic Practice Standards to the breadth of practice undertaken by osteopaths.
<b>Recommendation</b>	To agree the plan to disseminate the draft guidance more widely over the summer, to inform the development of a final draft to be reported to the October Committee meeting.
<b>Financial and resourcing implications</b>	Consultation and engagement costs are included in our 2021/22 budget.
<b>Equality and diversity implications</b>	Equality and diversity issues are a key component of this work and the proposed informal consultation will inform part of an equality impact assessment to be reported to the Committee at its October meeting.
<b>Communications implications</b>	The draft will be shared with stakeholders to seek feedback to inform the development of a final draft for consultation.
<b>Annex</b>	Annex - Draft guidance note for osteopaths: 'The Osteopathic Practice Standards and their relationship to the breadth of osteopathic practice, adjunctive therapies and other forms of care and treatment provided by osteopaths'
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## Key messages from the paper

- This paper updates the Committee on plans in regard to the development of draft guidance to support osteopaths engaged in adjunctive or complementary therapies in relation to the Osteopathic Practice Standards.
- We propose a wider dissemination of the current draft with stakeholders over the summer, to seek input in order to develop a further draft for reporting to the Committee at its October meeting.

## Background

1. We reported to the Committee at its [March 2020](#) meeting on work that had been undertaken to develop draft guidance to support osteopaths engaged in adjunctive or complementary therapies in relation to the application of the [Osteopathic Practice Standards](#).
2. This development work included a seminar with osteopaths, lay people with experience of fitness to practise processes and patients to explore some of the issues relating to the application of the Osteopathic Practice Standards in the context of adjunctive therapies.
3. The draft guidance we developed as a result of this engagement, including case examples illustrating the breadth of the challenges experienced by patients and osteopaths, was shared with the Committee, and is included again as the annex to this paper.
4. At the March 2020 meeting, we outlined plans for a further roundtable event incorporating input from patients, other regulators, Professional Conduct Committee panel members and the Institute of Osteopathy, osteopaths and those practising adjunctive therapies or professions to further develop the guidance. The onset of the coronavirus pandemic, however, meant that this was delayed.
5. The Committee's discussions at the March 2020 meeting included:
  - A welcome of the draft guidance note as a means of clarifying the position on adjunctive therapies to the profession.
  - There was a concern that the guidance and some of the scenarios given might imply the GOsC was moving beyond its statutory remit as the competent authority for osteopaths. Care should be taken in setting the criteria and admitting complaints that should be dealt with by another authority.
  - It should be clear in applying the Osteopathic Practice Standards, whether the criteria in question was generic or specific to the practise of osteopathy. It was agreed this was a difficult issue in defining what would be relevant to each health professional/practitioner and it may vary depending on the context of the particular circumstances.

- It was agreed that multidisciplinary practise was becoming more common amongst health and care practitioners and would require further consideration.
  - It was agreed that the comments put forward by the Committee would inform the discussions at the roundtable event.
6. In this paper we propose a strategy for progressing this project, sharing the draft guidance with a greater range of stakeholders over the summer, and reporting back to the Committee at its October 2021 meeting with a final draft for consultation.

## **Discussion**

7. As was originally reported in March 2020, the guidance note at the Annex, uses fictional case examples to explore the issues that arise for osteopaths and patients when applying the Osteopathic Practice Standards in different contexts. This acknowledges the diversity of treatment approaches within the profession and clarifies the requirement for a patient-centred approach and adherence to the Osteopathic Practice Standards across all aspects of an osteopath's practice. It recognises that applying the standards of professionalism to all areas of an osteopath's practice presents few difficulties, but notes that there are potential challenges in understanding how to apply some of the other standards.
8. The guidance explores how the standards might be applied in the following circumstances:
- a. Where an osteopath is also a member of another regulated profession and therefore subject to a different set of standards in addition to the Osteopathic Practice Standards
  - b. Where the osteopath provides professional services other than osteopathy, either within or outside the healthcare context.
  - c. Where an osteopath seeks consent from a patient for a novel form of care or treatment.
9. The purpose of this draft document is to provide a starting point for further exploratory discussion with stakeholders about the application of the Osteopathic Practice Standards to adjunctive therapies and other areas of osteopaths' practice.
10. Our proposal now, is rather than hold a specific one-off event at this time when we are also consulting on the review of Guidance on Osteopathic Pre-registration and Standards for Education and Training, is to share the draft guidance with key stakeholders and seek feedback and insights on this. This will enable us to gain some external perspectives in a less formal way, and enable us to use such feedback to develop a final draft for reporting to the Committee at its October meeting, before submitting to Council for approval for a wider formal consultation.

11. Key stakeholders would include:

- The Osteopathic Development Group (made up of the Institute of Osteopathy, The Osteopathic Alliance, NCOR and the Council for Osteopathic Education Institutions).
- Patients, via our patient group.
- Members of our Investigating Committee and Professional Conduct Committee.

12. It is worth noting that we were recently contacted by the Society of Homeopaths, who say that they have more members who are now practising an additional therapy, and felt that they needed to provide some guidelines on adjunctive therapies for members. They had found our own draft guidance and particularly liked the case study scenarios, and asked whether they might use our draft as a model for developing their own guidance. They have now done this, and expect to publish the guidance on their website for members soon. They are happy to pass on any useful feedback from their members, which again, may inform our own consultation draft. It is encouraging, however, that another organisation has already found our draft helpful enough to model their own guidance on (using very similar scenarios).

**Recommendation:** To agree the plan to disseminate the draft guidance more widely over the summer, to inform the development of a final draft to be reported to the October Committee meeting.