



Policy and Education Committee

14 October 2020

The implementation of the Osteopathic Practice Standards: follow up research by Professor Gerry McGivern and team on exploring and explaining the dynamics of osteopathic regulation

Classification	Public
Purpose	For discussion
Issue	The implications, impact and next steps for our future activities indicated by the findings of the report 'GOsC Regulation Survey 2020' by Professor Gerry McGivern, Professor Tina Kiefer, Dr Sonja Behrens and Dr David Felstead, of Warwick Business School.
Recommendation	To consider the issues raised in the follow up research by Professor Gerry McGivern and team on exploring and explaining the dynamics of osteopathic regulation.
Financial and resourcing implications	This research was funded by a grant from Warwick University for £11,772. GOsC provided in house staff support in liaising with the research team and communications support.
Equality and diversity implications	The findings of the surveys were analysed in relation to age and gender but not in relation to other protected characteristics. The findings showed that female osteopaths were more likely to demonstrate 'fear-based compliance and understanding regulations'. 'Older osteopaths were more likely to be pro-regulator but less likely to report fear-based compliance or be pro-evidence-based practice. Longer qualified osteopaths appear less likely to report compliance with regulation and older osteopaths are less likely to worry about harming patients.' As we further develop our activities in response to these findings, we will need to ensure that we seek specific feedback on these groups to ensure that there were no unintended consequences as well as groups who have other protected characteristics not reported on in this piece of research.
Communications implications	GOsC will publish the report before the end of 2020 / early 2021 when it has been finalised and Professor Gerry McGivern has offered to disseminate the findings to



stakeholders in due course. We will publish and promote the report itself to all key stakeholders. The findings of the report are already influencing our future communications and engagement plans. We are also considering how to interrogate the findings more and to get more in depth understanding about their implications.

Annex

Private: GOSc Regulation Survey 2020 (draft)

Author

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Background

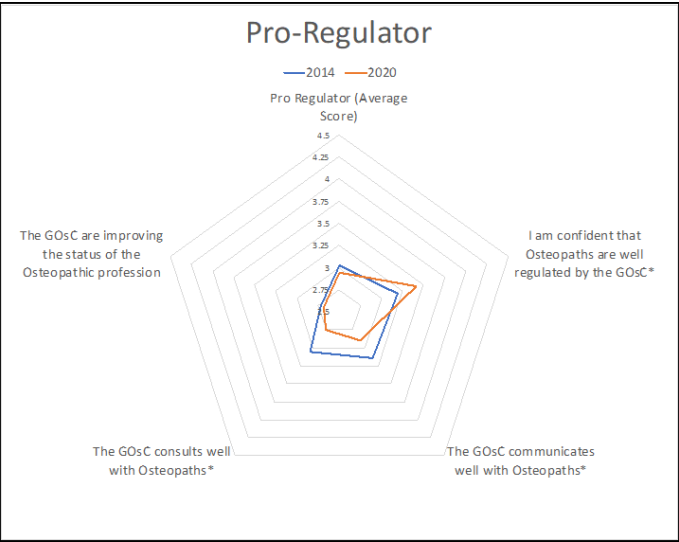
1. As a regulator, we want osteopaths to practise in accordance with our standards. We spend resources engaging with our stakeholders to make sure that our standards are the right ones yet they are only effective if they are implemented in practice.
2. Gerry McGivern's research is important as it helps us to understand how regulation can effectively support the embedding and embodying of standards. The research is 'framed by theory about 'responsive regulation'' (Ayres and Braithwaite, 1992). This theory suggests that by engaging with regulatees (in our case, registrants), explaining why regulations and compliance are a good idea, and improving regulations in response to feedback, regulators can persuade most to comply. However, a minority will only comply with regulations if they fear punishment for non-compliance. Regulators therefore also need to engage with regulatees (in our case, our registrants) to evaluate levels of compliance and rebalance their use of persuasion and punishment to maximise compliance.' The research builds on a number of factors to help us to measure compliance as a response to regulation. There is also an overview of compliance. These factors are:
 - a. 'Pro regulator' - a positive view of the GOsC and its regulation;
 - b. 'Pro-evidence-based practice' - a positive view of evidence-based practice in osteopathy;
 - c. 'Inappropriate regulation' - viewing osteopathic regulation as inappropriate for osteopathic practice;
 - d. 'Understanding regulations' - having a clear understanding of the Osteopathic Practice Standards (OPS) and sense of whether complying with them;
 - e. 'Fear-based compliance' - complying with regulation due to the fear of being punished by the GOsC or sued by a patient for not doing so.
3. Through McGivern's research we can measure the changes in these factors from 2014 to 2020. This can help us to think about activities that we do that were or are effective in promoting compliance with standards, activities which were or are less effective and any gaps or insights that may inform our future activities. Further additional insights are provided about emotional responses to regulation which in summary can be barriers to compliance to regulation and indicate that an approach based on engagement, listening, hearing, dialogue and trust is important to increase compliance across our diverse registrant base.
4. At the Committee's meeting of 10 June 2020, a summary of the research undertaken by Professor Gerry McGivern and team, published in 2015, was provided (Public item 11 – available at: <https://www.osteopathy.org.uk/news-and-resources/document-library/about-the-gosc/pec-june-2020-item-11-mcgivern-research-reading-room-item-final/?preview=true>). This research aimed at exploring the following questions and the paper outlined our response to it:

- a. Which regulatory activities best support osteopaths to be able to deliver care and to practise in accordance with the Osteopathic Practice Standards
 - b. What factors inhibit osteopaths from practising in accordance with the Osteopathic Practice Standards?
 - c. What factors encourage osteopaths to practise in accordance with the Osteopathic Practice Standards?
5. This paper aims to explore the GOsC Regulation Survey 2020 in more detail, and provides the opportunity for more detailed discussion and insights on the areas raised in our current context.

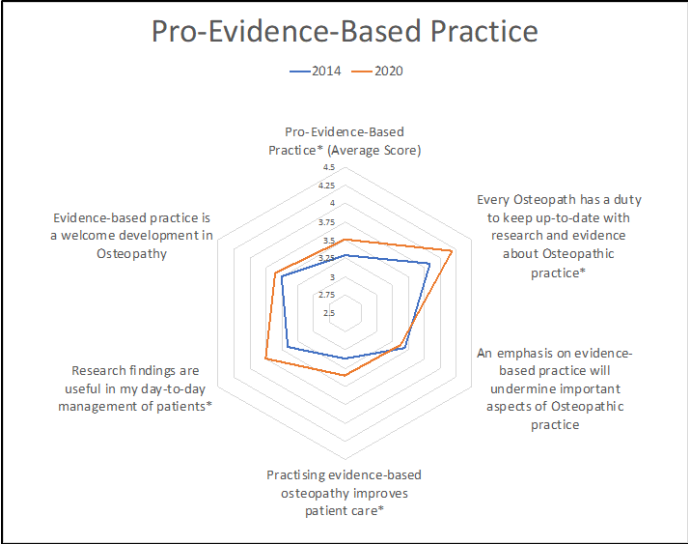
Discussion

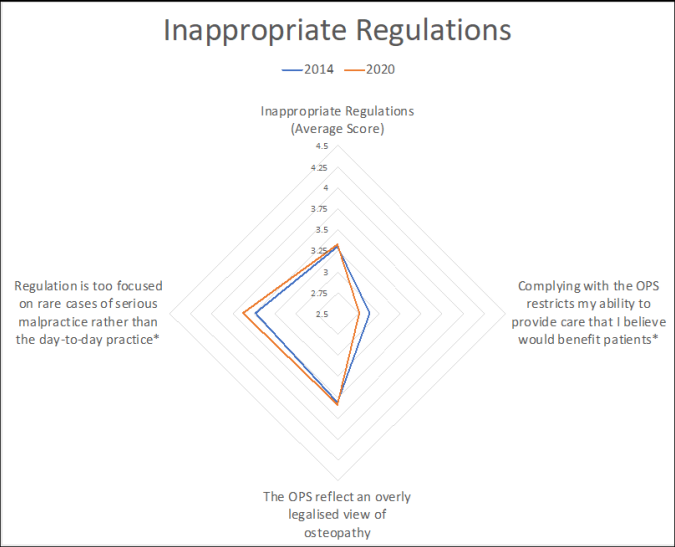
6. The 2020 Osteopathic Regulation Survey took place in 2019/20 after a series of follow-up interviews. The questions were a mixture of some of the questions used in the original research and others designed to develop understanding around compliance with regulation and the embedding and embodying of the Osteopathic Practice Standards.
7. Below, we outline again the key findings from the draft report of the Osteopathic Regulation Survey 2020, together with some early commentary to support Committee discussion:

Table illustrating key findings, implications, potential impact and next steps


Key findings	Implications	Potential impact and next steps
<p>1. Pro-regulator</p>  <p>The 2020 survey suggests that osteopaths' views of the GOsC (Pro-Regulator) have become more mixed and polarised since 2014. More osteopaths (56% versus 44% in 2014) agreed or strongly agreed they are 'confident that osteopaths are well regulated by the GOsC'. ... However, fewer osteopaths (35% in 2020 versus 43% in 2014) agreed or strongly agreed that the GOsC communicates well with osteopaths'</p>	<p>It is encouraging that more osteopaths in the latest survey compared to 2014 feel that they are confident that osteopaths are well regulated, but this seems to contrast with the fact that fewer osteopaths in the latest survey felt that the GOsC communicates well with them. Our initial expectation would be that it is through our communications with osteopaths that they are able to form an opinion as to how well the profession is regulated, at least to some extent. It would be interesting to understand if there are any particular aspects of our communications that are less well received, is it our main corporate communication channels such as our websites, ebulletins and magazine; or our webinars; our emails and letters; or is it other channels? Is it the transactional communications or is it about tone or frequency or vehicles of communication? Or is any of this more reflective of the actual messages rather than the method/approach? And what is the difference in context between 2014 and 2020, how has the external environment changed?</p> <p>During 2014, we invested a lot of time in seeing almost 800 osteopaths face to face and less in terms of electronic communications. We spoke at almost all local regional groups. During 2017/18, we also undertook extensive consultation including face to face and</p>	<p>As part of our communications and engagement strategy, we could consider:</p> <ul style="list-style-type: none"> - Diversifying our communication mechanisms - Further work to understand how osteopaths like to be communicated with, what we are doing well, less well (see also below a more granular understanding of pathways to compliance which indicate that different communications and engagement strategies may be important for different groups of osteopaths). - Increasing clarity about our contemporary role as regulator with

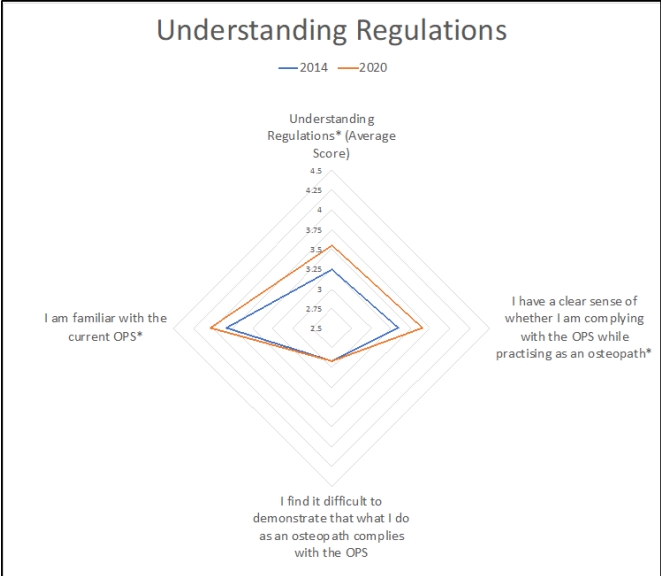
Key findings	Implications	Potential impact and next steps
	<p>electronic in a successful consultation on the Osteopathic Practice Standards among other things.</p> <p>However, also from 2014 to 2020, our external context has changed in that the British Osteopathic Association has changed to the Institute of Osteopathy with a consequent change of strategic approach and direction. The iO has increased its profile and work with osteopaths and external stakeholders and secured allied health professional status for osteopaths in England in 2017. We have also seen other osteopathic organisations strengthen and clarify their roles which has potentially left a smaller role for GOsC. (These evolutions fit with our statutory development role which is about supporting an evolving and maturing profession.)</p> <p>In some ways, one might argue that if other organisations are taking on roles around promotion and engagement that this might be a sign of success of our engagement strategy.</p>	<p>engagement and communication on this.</p>

Key findings	Implications	Potential impact and next steps
<p>2. Pro-Evidence Based Practice</p>  <p>Pro-Evidence-Based Practice</p> <p>— 2014 — 2020</p> <p>Pro-Evidence-Based Practice* (Average Score)</p> <p>4.5 4.25 4 3.75 3.5 3.25 3 2.75 2.5</p> <p>Evidence-based practice is a welcome development in Osteopathy</p> <p>Research findings are useful in my day-to-day management of patients*</p> <p>Practising evidence-based osteopathy improves patient care*</p> <p>Every Osteopath has a duty to keep up-to-date with research and evidence about Osteopathic practice*</p> <p>An emphasis on evidence-based practice will undermine important aspects of Osteopathic practice</p> <p>Osteopaths have become significantly more positive about evidence-based practice (EBP) since 2014. For example, 50% of osteopaths in 2020 agreed or strongly agreed that 'practising evidence-based osteopathy improves patient care', compared to 38% in 2014.</p>	<p>This welcome shift to a more positive attitude to evidence-based practice may be for a number of reasons. Perhaps the nature of osteopathic education means that newer graduates, for example, have a more positive attitude towards research, and this will continue to increase as they join and progress through their careers. Perhaps osteopaths are more open generally to evidence informed approaches, and able to navigate with more confidence the translation of research in informing practice. In this period, also, the National Council of Osteopathic Research (NCOR) has produced a range of materials aimed at supporting osteopaths in engaging with research along with a number of accessible summaries about practice in a range of areas.</p> <p>We can speculate that our work around the new CPD scheme which aimed to ensure that practice and CPD are informed by external sources through the objective activity and peer discussion review may have contributed to this finding.</p> <p>The GOsC also worked together with the Institute of Osteopathy and the Advertising Standards Authority to clarify the evidence base for certain conditions that osteopaths can advertise under ASA regulations during 2016. We also led a campaign to ensure that osteopaths were aware of the guidance and the relevant evidence base.</p>	<p>It would be useful to explore with osteopaths the types of evidence that they access to inform practice so that we can continue to promote access to this along with continued work with other stakeholders. Although we also need to take account of pathway 2 to (non) compliance (see below) essentially about osteopathic identity being more internal than external and ensure that our messages to this group resonate to achieve our common desired outcome of good patient care and patient safety in accordance with commonly agreed standards.</p>

Key findings	Implications	Potential impact and next steps
<p>3. Inappropriate regulations</p>  <p>Overall, osteopaths' views of whether the OPS and regulation are inappropriate are relatively unchanged but responses to individual questions are mixed. More osteopaths both agree and disagree that 'complying with the OPS restricts my ability to provide care that I believe would benefit patients', while overall osteopaths have become significantly more positive about this. However, significantly more osteopaths believe that 'Regulation is too focused on rare cases of serious malpractice rather than the day-to-day practice'.</p>	<p>A key finding in this section relates to 'Regulation is too focused on rare cases of serious malpractice rather than the day-to-day practice' and it might be argued that this reflects a traditional 'complaints' based perception of regulation'.</p> <p>We have done a lot of work over the past six years to focus on the promotion of good practice and embedding of standards. See, for example, our work on implementation of the Osteopathic Practice Standards, our continuing professional development scheme and also our values work. This is alongside enhanced communications and engagement which has sought to develop a sense of trust, listening, being responsive, meeting needs rather than a more formal broadcast approach perhaps traditionally associated with regulators. Some of this work is summarised in this presentation: https://www.professionalstandards.org.uk/docs/default-source/conferences/presentation/2019-conference/browne.pdf?sfvrsn=e29a7420_2</p> <p>It is worth noting here that there have been a number of fitness to practise cases where high profile members of the profession were subject to decisions that they were not happy with and subsequently publicised their cases resulting in a negative impact on attitudes to the GOsC.</p> <p>Over the past few years there has been a need to focus in our communications on the introduction of the CPD</p>	<p>There is potential for further development of knowledge, understanding and engagement about our fitness to practise processes, which is underway together with work to develop messages around the integrity of the profession is in the interests not only of the regulator but crucially of patients, the profession and others.</p>

Key findings	Implications	Potential impact and next steps
<p>Another finding in the report which touches on fitness to practise is: 'we also note a significant drop in osteopaths' reported understanding of and confidence in GOSC's disciplinary processes. For example, in 2020 only 35% (vs 43% in 2014) agreed or strongly agreed they 'fully understand the GOSC's process for handling complaints made against osteopaths by patients or the public'. Even fewer (only 16% in 2020 vs 23% in 2014) osteopaths agreed or strongly agreed that they are 'confident that the GOSC's disciplinary procedures produce fair outcomes', with 54% in 2020 (vs 27% in 2014) disagreeing or strongly disagreeing'.</p>	<p>scheme and the updating of the OPS so there has been less communication about fitness to practise. We have recently begun to address this, for example a webinar took place on 28 September 2020 with others planned and outreach to students is also being further developed.</p> <p>We are taking steps to enhance understanding of our fitness to practise processes. The regulator and osteopaths have a common interest in ensuring that standards are upheld</p>	

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<p>4. Fear based compliance</p>  <p>More osteopaths reported complying with regulation due to fear (Fear-based compliance): 61% (vs 45% in 2014) agreed or strongly agreed that they 'comply with the OPS to avoid getting into trouble with the GOsC'. This compares with 43% in 2020 agreeing or strongly agreeing that they 'comply with the OPS because they reflect what it means to be a good osteopaths'.</p> <p>The research also identified a factor called 'Worry about Harming Patients'. This factor was identified as distinct from fear based compliance. In relation to</p>	<p>This is a large rise in self-reported compliance due to fear, and exceeds the increase reported in awareness of the standards overall. Perhaps the increased references to and focus on standards in our communications in the past couple of years has, in part, also generated a level of anxiety regarding osteopaths' abilities to meet these standards, and the consequences of not doing so. There has also been an increase in online forums over the past few years, which provide an opportunity for osteopaths to raise queries and seek feedback from colleagues. As much as these might help support the delivery of the standards and good practice, some might find the discussions highlight areas where they may not be implementing the guidance appropriately, leading to more fear.</p> <p>It is worth adding though, that since the 2014 study, the law relating to data protection and management changed with the introduction of GDPR. This was a high-profile change in rules that registrants would have found difficult to ignore, and which, again, might have led to a substantial degree of fear and anxiety as to whether standards in this respect were being met sufficiently.</p> <p>In relation to the findings about worry about harming patients. These could be demonstrated in the increased</p>	<p>Further work required to explore emotional responses to regulation and our regulatory messages.</p> <p>It will also be important to explore further the worry about harming patients to see what we might do to support osteopaths to reduce that anxiety and in theory increase pathways to compliance with standards.</p> <p>In relation to this finding, a focus group might be a useful way to further understand what might generate such feelings, and to understand the issues/challenges osteopaths are facing.</p>

Key findings	Implications	Potential impact and next steps												
<p>these findings, more osteopaths agreed with these statements than disagreed:</p> <ul style="list-style-type: none"> - I am concerned about making a mistake that could harm a patient - I am scared about making a mistake that negatively affects a patient - I feel anxious about making a mistake that could harm a patient <p>Further analysis on this would be beneficial.</p>	<p>anxiety to regulation – see pathway 3 to compliance below.</p>													
<p>5. Understanding regulation</p>  <table border="1"> <caption>Understanding Regulations - Average Scores</caption> <thead> <tr> <th>Statement</th> <th>2014 Score</th> <th>2020 Score</th> </tr> </thead> <tbody> <tr> <td>I am familiar with the current OPS*</td> <td>~3.2</td> <td>~3.5</td> </tr> <tr> <td>I have a clear sense of whether I am complying with the OPS while practising as an osteopath*</td> <td>~3.0</td> <td>~3.3</td> </tr> <tr> <td>I find it difficult to demonstrate that what I do as an osteopath complies with the OPS</td> <td>~2.8</td> <td>~3.0</td> </tr> </tbody> </table>	Statement	2014 Score	2020 Score	I am familiar with the current OPS*	~3.2	~3.5	I have a clear sense of whether I am complying with the OPS while practising as an osteopath*	~3.0	~3.3	I find it difficult to demonstrate that what I do as an osteopath complies with the OPS	~2.8	~3.0	<p>Since 2014, the OPS have been updated, with the revised standards implemented from September 2019. The updating process was carried out collaboratively with a Stakeholder Reference Group and broad consultation, the feedback from which was broadly positive. The new CPD scheme was also introduced from October 2018 which requires osteopaths to record activities against the four themes of the OPS. Much of our communication, in ebulletins, The Osteopath magazine, webinars, face-to-face meetings and written guidance/workbooks, has been focussed on demonstrating the OPS as a framework to support practice and decision making. It is encouraging that overall familiarity has increased, but particularly the increase from 49% to 63% in the agree/strongly agree category that they have a clear sense of whether they are complying with the OPS.</p> <p>That said, the fall in respondents agreeing/strongly agreeing that the OPS reflect what it means to be a</p>	<p>Potentially building on continued awareness of the Osteopathic Practice Standards.</p> <p>But further work to be undertaken on what it means to be a good osteopath. This could potentially be a useful piece of co-production work with patients and osteopaths (as well as potentially with other health professions).</p>
Statement	2014 Score	2020 Score												
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<p>'Osteopaths' understanding of regulation and compliance (Understanding regulation) has increased. In 2020, 80% of osteopaths (compared to 76% in 2014) agreed or strongly agreed they are 'familiar with the Osteopathic Practice Standards (OPS)'; ... 63% (versus 49% in 2014) agreed or strongly agreed that they have a 'clear sense of whether they are complying with the OPS'; ... However, in 2020, only 25% of osteopaths (vs 44% in 2014) agreed or strongly agreed that the 'OPS reflect what it means to be a good osteopath'</p>	<p>good osteopath is disappointing, given the work undertaken in relation to OPS and CPD support, as outlined above. For some, perhaps it is the case that being a 'good osteopath', relates to technical skills, professional knowledge and its application, and something more 'holistic' with the perception that the OPS as a regulatory requirement sits somewhere outside of this. Again, it would be interesting to understand in more detail what does reflect being 'a good osteopath' particularly aspects which are not reflected in the OPS</p>	
<p>6. Compliance</p> <p>'Overall levels of reported compliance remain similar. In 2020, 41% (vs 45% in 2014) agreed or strongly agreed that what they do as an osteopath always fully complies with the OPS (20% in 2020 disagreed or strongly disagreed vs 18% in 2014)'</p> <p>In 2020, the McGivern team explored the relationship of emotions about regulation and compliance. (See p32 to 37 of the Report at the Annex) using factor analysis. They explored 'feeling <i>positive</i> [about regulation] (including questions about feeling <i>inspired, proud, enthusiastic, neutral</i> [about regulation] (including questions about feeling <i>indifferent and neutral</i>) and two negative emotion factors; feeling <i>angry</i> (including questions about feeling <i>irritated, cynical, fed-up, angry</i> and <i>frustrated</i>) and <i>anxiety</i> (including questions about</p>	<p>Four new questions were included in the 2020 survey to assess compliance, as set out on page 22 of the draft report:</p> <ul style="list-style-type: none"> • I make sure my practice is always in line with the current OPS • I don't comply with all aspects of the OPS all of the time • I sometimes ignore some of the OPS • At times I am unable to comply with some OPS <p>It is interesting to see that, given this additional layer of detail, the comparison between the 2014 and 2020 responses demonstrates such similarities. It is not clear what some of the reasoning behind the responses may be, however. Perhaps a greater awareness and understanding of standards and reflection on these,</p>	<p>As part of our communications and engagement strategy we could reflect more fully on the pathways to compliance as a way of understanding more clearly the diversity of our registrants.</p> <p>Possible actions (to be tested through engagement with osteopaths in each of these groups) could include:</p> <ul style="list-style-type: none"> - Continued promotion of the OPS and CPD scheme through

Key findings	Implications	Potential impact and next steps
<p>feeling <i>anxious</i> and <i>worried</i>), ...The mean responses were 2.30 for positive emotions, 2.87 for neutral emotions, 2.94 for anxiety and 3.04 for angry. (In this case, 'the five point scale was 1 = never or almost never and 5 = very often').</p> <p>The findings enabled the team to find the following pathways to compliance:</p> <p>'Pathway 1: WANTING TO COMPLY (compliance via understanding and accepting regulations): The strongest levels of overall compliance are reported by osteopaths who are most positive about evidence-based practice (Pro-EBP) and the GOsC (Pro-Regulator). We speculate that these osteopaths believe that drawing upon a scientific underpinning evidence-based and being statutorily regulated enhances their professional legitimacy and practice. These osteopaths are, in turn, more likely to understand and have internalised regulations, so show stronger levels of compliance in practice.</p> <p>Pathway 2: DISAGREEING WITH REGULATIONS (via anger): Disagreeing with evidence-based practice (disagreeing with Pro-EBP) or regulation (disagreeing with Pro-regulator) is strongly associated with Anger about regulation. This pathway implies a rejection of regulation and evidence-based practice providing a sensible way to organise and guide osteopathic practice. Osteopaths on this pathway may be keen to protect and</p>	<p>causes some registrants to overly question whether they are fully compliant.</p> <p>It is also of note that the new CPD scheme enables osteopaths to reflect much more fully on their CPD and practice in relation to the four themes of the OPS.</p> <p>In terms of the pathways to compliance, there are key differences in feelings about regulation and these have been shown to be important in supporting compliance. We should take account of each of these pathways and reflect on what we are doing to support these.</p> <p>In relation to pathway 1 – wanting to comply: compliance via understanding and accepting regulations), the emphasis is on professional legitimacy and practice. For this group, continuing our messages about the Osteopathic Practice Standards, professional judgement, CPD and evidence based practice, working with other health professionals will continue to be positive.</p> <p>In relation to pathway 2 – disagreeing with regulations (via anger), the emphasis appears to be on identity and the essence of traditional approaches for osteopathy, the legitimacy for which derives from themselves and specific approaches to osteopathy rather than external legitimacy in the way that pathway 1. For this group we may need to more explicitly acknowledge this issue and continue to ensure that we recognise identity for these osteopaths and ensure that they are heard but also</p>	<p>accessible, straightforward and supportive resources.</p> <ul style="list-style-type: none"> - Hearing and acknowledging the voices of groups with a strong traditional osteopathic identity, emphasising inclusiveness in our approach - Being sensitive to emotional responses to regulation, increasing knowledge about our values and goals being about good patient care and not being out 'to get' osteopaths. Increasing visibility in terms of knowledge and support. <p>We have speculated above as to some of the possible reasons behind these findings. They emphasise the need for continued high quality communication and resources around</p>

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<p>maintain 'traditional approaches' to osteopathy within their profession, which they believe may be compromised by an over-emphasis on evidence-based practice or formal regulation. The following extracts from interviews about osteopathic regulation, conducted in 2019, illustrate different views of evidence-based practice within the osteopathy profession, which we believe may impact compliance today:</p> <p><i>"There seem to be a lot of... osteopaths who think that evidence is something to be afraid of... that others are going to use it to try and control the way that we practice... or limit our scope. And there are others who think that evidence should guide and inform everything that we do and that actually we should stop doing most of what we are doing because there isn't any evidence to support it."</i></p> <p><i>"That schism [within osteopathy] is growing, because... the push for an evidence-based approach is almost drawing certain individuals to disregarding a lot of the traditions of osteopathy... It is not just that there is no evidence for it, but there is evidence against it... which upsets the osteopaths who have embraced the more traditional approaches to osteopathy, to the point that I have been in meetings now where they can't have a conversation with each other.... It's become very bitter... We [osteopaths] don't have such a clear common goal."</i></p>	<p>that they feel heard, and that the approach to regulation and standards is inclusive and supports their approach rather than being a more 'us and them' approach. Such messaging may need to operate more in the realms of dialogue, engagement and emotions and feelings. We have seen some of this dialogue take place in the context of the Guidance for Osteopathic Pre-registration Education review.</p> <p>In relation to pathway 3: worrying about compliance: via anxiety. We could speculate that major changes in relation to the CPD scheme combined with the new Osteopathic Practice Standards could lead to anxiety until those changes are embedded and osteopaths are confident. There is also the possibility that osteopaths may feel concerned that complaints may be made against them (even if they are trying their best) and that mistakes may lead to their fitness to practise being questioned.</p> <p>We might expect that this particular pathway to compliance may become even more prevalent on the context of the coronavirus which may be argued to have increased anxiety across the board because there are a range of new requirements for practice which are changing frequently.</p> <p>It might be suggested that acknowledging these concerns, the context of rapid change and continued</p>	<p>areas that registrants perceive as fear, anxiety or anger inducing. We also need to continue to focus on gaining insight into the specific areas that osteopaths find challenging and the barriers they might be facing, plus to focus on our communications and engagement across the piece to ensure we are being consistent in our tone and approach.</p> <p>These matters could be explored further with our stakeholders and developed as part of our communications and engagement strategies.</p>

Key findings	Implications	Potential impact and next steps
<p><i>And we have got some people working really hard to improve the visibility of osteopathy, the AHP [Allied Health Profession] status... but a huge swathe of the profession has no idea what AHP is. So, they think that... basically they are trying to sell us to the NHS."</i></p> <p>Anger is associated with perceiving a moral wrong and an offence (such as evidence-based practice or regulation undermining the traditional essence of osteopathy), explaining why when regulation elicits anger, compliance levels tend to be lower. Osteopaths who disagree with, and are angry about, the premise of regulations not only appear less likely to comply with regulations but also appear less likely to try to avoid the negative consequences of non-compliance through fear-based compliance.</p> <p>Pathway 3: WORRYING ABOUT COMPLIANCE (via anxiety): Feeling uncomfortable evidence-based practice in osteopathy and regulation can also be associated with anxiety, rather than anger. As couple of osteopaths we interviewed (in 2019) commented:</p> <p><i>"Rationally, I don't think that I ever did do anything [harmful to patients]... but it doesn't take away the anxiety that I might."</i></p> <p><i>"You could be falling short of regulatory standards but without knowing it, and not deliberately."</i></p>	<p>signposting and support both by ourselves and through our stakeholders might be important steps moving forward.</p>	

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<p>Osteopaths who are both negative and anxious about regulation (and related complaints and disciplinary procedures) are likely to be motivated to comply with regulation due to fear of the consequences of non-compliance (Fear-based compliance). Our results show those who respond to regulation with anxiety, also report higher fear-based compliance. However, our analysis of 2020 survey data and explanatory model of compliance pathways suggests that fear, anger and anxiety about regulation (and punishment for non-compliance) may not, per se, enhance compliance levels. By contrast, promoting belief in and understanding of regulation and Evidence-based practice appear to be a more reliable pathway to compliance.</p>		

The effects of COVID-19

8. In addition, it is worth noting that the 2020 responses outlined in the report were sought before the full effect of COVID-19 was experienced. The past few months have been challenging for all healthcare professionals, and many have expressed a degree of frustration or anger with their respective regulators, including the GOsC. To a large extent, this may have arisen due to a lack of understanding of the role of a regulator as opposed to a professional body, and what could reasonably be expected in terms of guidance and other support in such unprecedented and fast-moving circumstances, but one wonders what the results of the survey might be if repeated now.

For consideration

9. Committee members were asked, after the June meeting, to consider and reflect fully on the findings in the draft report in conjunction with their own experience of perceptions of regulation and are asked now to discuss:
- a. What are we as a regulator doing well? (Thinking about our role in terms of developing and regulating the profession of osteopathy; protection of the public and protecting, promoting and maintaining the health, safety and well-being of the public; protecting, promoting and maintaining public confidence in the profession of osteopathy and promoting and maintaining professional standards and conduct for osteopaths.)
 - b. What are we doing less well?
 - c. What should we consider stopping, starting or continuing in response to these findings?
 - d. What are the implications for other stakeholders?

Next steps

10. We intend to publish the draft report at the Annex before the end of the year / early 2021 with a dissemination event to stakeholders to take place in early 2021. The findings from the report will continue to inform our work programmes across 2021/22 and beyond.

Recommendation

To consider the issues raised in the follow-up research by Professor Gerry McGivern and team on exploring and explaining the dynamics of osteopathic regulation.