

**The General Osteopathic Council consultation on continuing professional development: proposals for assuring the continuing fitness to practise of osteopaths: a summary document**

**January 2015**

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**Introduction**

1. This consultation sets out the General Osteopathic Council's proposals for a new CPD scheme (the CPD scheme) which provides assurance to the public of the continuing fitness to practise of osteopaths.
2. There are two consultation documents. One main version sets out the full background and detail of our proposals for completion by any interested person. There is also a shorter summary version designed specifically for patients and members of the public to encourage a variety of responses – however, we welcome responses from all to either version of the consultation.
3. This consultation runs from January 2015 to May 2015. During the consultation there will be a range of listening events taking place across the UK primarily facilitated by regional groups, educational institutions, the Institute of Osteopathy and other osteopathic organisations. The GOsC will also have a programme of listening events for other stakeholders including patients and the public and other regulators and health professionals.
4. The General Osteopathic Council is committed to ensuring that this consultation is as accessible as possible to all to encourage diverse responses. Please contact us if you require any help in reading, understanding or responding to this consultation. If you would like to discuss any aspect of your response, or if you have any questions, please also contact us.

**Contact details:**

Fiona Browne  
Head of Professional Standards  
Email: [fbrowne@osteopathy.org.uk](mailto:fbrowne@osteopathy.org.uk)  
Tel: 020 7357 6655 x239

**Background**

5. The proposals in this document represent a milestone in a six year programme<sup>1</sup> of work undertaken by the General Osteopathic Council to develop an appropriate and effective continuing professional development (CPD) scheme that:
  - a. supports osteopaths to demonstrate that they are up to date and fit to practise and
  - b. provides assurance to the public that osteopaths are up to date and fit to practise.
6. The proposals outline a new CPD scheme designed to provide the public with assurance that osteopaths practise in accordance with the *Osteopathic Practice Standards*, our core standards for registration (providing assurance of continuing fitness to practise).
7. Initially, this work programme was driven by government expectations and also through a report of the Professional Standards Authority, the body overseeing all health professional regulators in the UK.
8. However, by working closely with osteopaths and patients, we developed a better CPD scheme both for osteopaths and patients.
9. Our proposals build on what most osteopaths are already doing, enhancing the role of colleagues within the learning process focussing on the development of a respectful learning community supporting continual enhancement of practice.
10. This consultation document is about how we assure patients and the public that osteopaths, as regulated health professionals, are up to date and fit to practise.
11. It is designed to respond to the question *'how can I know that the osteopath looking after me is up to date and fit to practise?'*

**Regulation**

12. In the UK healthcare practitioners in a number of recognised professions are covered by a system of legal regulation meaning that a professional must be registered in order to practise.
13. Regulated health professionals include doctors, nurses, dentists, opticians, osteopaths, chiropractors and physiotherapists.
14. Regulation means that the individuals have completed a proper course of education and training and are expected to meet certain minimum standards in

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<sup>1</sup> Further information about the programme of development and research which has informed our proposals is available in our Background Booklet available at [www.osteopathy.org.uk](http://www.osteopathy.org.uk).

their practice. It also means that when complaints are made about them they can be disciplined and in serious cases even prevented from practising at all. For osteopaths their regulator is called the General Osteopathic Council, usually abbreviated to the GOsC.

15. Traditionally, once entered on to a register of professionals no further checks were made on the individual's suitability to continue in practice unless a complaint was made about them.
16. More recently most healthcare regulators have been exploring ways in which professionals can be checked periodically to ensure that they remain up to date and should continue to practise. For doctors, this process is known as 'revalidation' but across the health professions it is also referred to as 'continuing fitness to practise'.
17. There are also other professions where individuals have to undergo periodic checks, particularly in safety-critical areas, for example airline pilots and gas installers.

### **Osteopathy**

18. Osteopathy is a system of diagnosis and treatment for a wide range of health conditions. Osteopaths use touch, physical manipulation, stretching and massage to increase the mobility of joints, to relieve muscle tension, to enhance the blood and nerve supply to tissues, and to help the body's own healing mechanisms. Osteopaths may also provide advice on posture and exercise to aid recovery, promote health and prevent symptoms recurring. Osteopathic patients often report very high levels of satisfaction with both their osteopath and their treatment.
19. Osteopathy is a relatively safe healthcare practice compared for example to interventions that involve surgery or drugs, but it is equally important that osteopaths keep their knowledge and skills up to date. This is particularly important as many patients see an osteopath without being referred by a doctor and the osteopath must be able to identify wider concerns about a patient's health. The majority (but not all) osteopathic practice is private rather than NHS, and in addition many osteopaths practise on their own rather than with other osteopaths or healthcare professionals.
20. In order to maintain their registration, each year every osteopath must complete a minimum amount of study or other activity known as 'continuing professional development' or 'CPD'. At the moment this is based on a time requirement of 30 hours of CPD, half of which must take place with others so as to reduce the risk of osteopaths becoming isolated from their peers.

**The Continuing Professional Development Scheme: providing assurance of continuing fitness to practise**

21. All healthcare professional regulators should introduce some form of continuing fitness to practise scheme in order that healthcare practitioners (and their regulators) can assure patients that they are competent and safe.
22. It is often assumed that the best way to ensure that a healthcare professional is up to date is to make them take a regular test. However, while this approach might be appropriate at the point where a practitioner qualifies, as their practice and career develops it may be less helpful. Therefore, various regulators have explored different ways in which healthcare practitioners can be assessed. For example, doctors' revalidation is based on a series of annual appraisals that take place in the workplace.
23. Many osteopaths practice alone or in very small practices and the GOsC's challenge has been to identify a process that is appropriate to the way in which osteopaths practice, is practical and not too burdensome, supports improvement in osteopathic practice and provides the necessary level of assurance to patients.

**Our approach**

24. The foundation of our approach is the current requirement for CPD by osteopaths. Osteopaths will continue to be required to undertake 30 hours of CPD each year including 15 hours which involves learning with others. We will expect osteopaths to declare each year that they have done this and to keep a record of what they have done over a three year period.
25. One of the things that we have noticed about how osteopaths undertake CPD is that they often focus on the things that most interest them, particularly learning new techniques or refreshing their knowledge of techniques. But we think it is important that CPD covers a wide range of activities and includes keeping up to date in other areas such as communicating effectively with patients, safety and quality, and professionalism. This is why under our new proposals we will seek evidence that over a three year period, each osteopath's CPD covers all of these areas.
26. We also know from the small number of complaints we receive about osteopaths, that the complex issues of communication and consent are sometimes a challenge. This is particularly important because of the physical nature of osteopaths' interactions with patients. We will also expect that every three years that osteopaths will refresh their knowledge in the area of consent.
27. It is also important that osteopaths find ways to seek the views of others or reflect on their practice. That is why we are proposing that at the start of their three year cycle of CPD osteopaths will have to undertake an activity that informs the type of CPD activity they should undertake. This activity could take a number of forms, including:

- Seeking patient feedback, for example using questionnaires
  - Being observed in practice by a peer
  - Discussing elements of their practice or specific cases with colleagues
  - Undertaking an audit of their practice.
28. Finally, there needs to be a mechanism for reviewing and checking that the osteopath has undertaken the required activity.
29. Our approach here is different to that normally used, which involves the checking being done by the regulator or an individual appointed by them to do it. Instead we will be encouraging osteopaths to work with their peers to review what they have done and to identify whether they have done what is expected or if they would benefit from doing more.
30. There are lots of ways in which this review could happen: osteopaths could work with colleagues and review each other; if they have an employer or are affiliated to a college they could undertake the review; or if they are part of a regional society or other special interest group they could be involved. As a fall back, the GOsC could undertake the review.
31. What this doesn't mean is that just because the regulator itself is not checking all individual osteopaths that it is a 'soft' option.
32. If an osteopath fails to engage or doesn't undertake any of the required activities then they will be removed from the register of osteopaths and prevented from practising. If their peer review identifies the need for further development then the osteopath will be expected to undertake this further work to ensure that they meet our standards. The GOsC will also be undertaking checks to ensure that the reviews are working properly and that people are not seeking to avoid the requirements.
33. The reason we have sought to take this overall approach is because we think that the continuing fitness to practice process should be focused on osteopaths improving their practice rather than testing them against basic standards of practice. By giving osteopaths this space to consider how to improve what they do, we think that there is likely to be a better outcome in terms of both safety and quality of practice.

### Consultation questions

Q1 – Do you consider that our approach enables patients to know that the osteopath looking after them is up to date and fit to practise?

Yes / No
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Q2 – What else would help patients to know that the osteopath looking after them is up to date and fit to practise?

Comments:

Q3 – Do you have any other comments?

Comments:

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