



General  
Osteopathic  
Council

# Fitness to Practise Report

**2015-16**

**The General Osteopathic Council**

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## Stages of the fitness to practise process

The GOsC has a duty under the *Osteopaths Act 1993* to investigate concerns about osteopaths.

Concerns are referred to us from many different sources, including members of the public, employers, registrants and the police. We may also become aware of a concern through other means, such as the media or the publication of a report. We have a duty to identify whether the concern is a legitimate matter that needs to be investigated.

### Screeners

We conduct an initial assessment, called a triage, of every concern we receive. This enables us to decide if there is sufficient information for a Screener (an osteopath

member of the GOsC Investigating Committee) to determine whether the concern is capable of amounting to an allegation under the *Osteopaths Act*.

For each new concern, we try to gather information (if it has not already been provided) that is detailed enough for a Screener to reach a reasonable opinion. This typically means inviting the complainant or third parties to provide further information. However, how we conduct our investigation will depend on the nature of the concerns: for example, we may need to get an expert report if the concern relates to an osteopath's clinical practice, or an assessment by one of our medical assessors if the concern relates to an osteopath's health.

In reaching a decision, the Screener is able to refer to 'threshold criteria' to help decide whether an activity complained about constitutes unacceptable professional conduct. If the Screener decides that the GOsC has no power to investigate the concern against the osteopath, the case will be closed.

If the Screener decides that the GOsC has the power to deal with the complaint, the case will be referred to the Investigating Committee.

### Investigating Committee

The Investigating Committee meets in private to consider cases on the papers – in other words, it will consider the allegation based upon written information. The Committee considers whether there is a case to answer against the osteopath in question, and takes the threshold criteria into account when making its decision.

If the Investigating Committee decides there is no case to answer, the case will be closed.

If the Investigating Committee decides that there is a case to answer, a hearing will be arranged before the GOsC's Professional Conduct Committee or, if the matter relates to the osteopath's health, before the Health Committee.

### Professional Conduct Committee

Each hearing of the Professional Conduct Committee takes place before three members of the Committee and a legal assessor. There must be at least one osteopath member and one lay member, and the Chair must be a lay member.

#### The GOsC has three statutory committees:

- **The Investigating Committee** carries out the initial scrutiny of complaints about osteopaths, and decides whether the osteopath has a case to answer.
- **The Professional Conduct Committee** hears cases involving criminal convictions or allegations against an osteopath's conduct or competence. If the Committee finds the allegation is well founded, it imposes an appropriate and proportionate sanction on the osteopath.
- **The Health Committee** considers cases where an osteopath is alleged to be in poor physical or mental health. Appropriate action is taken in the interests of the public and the osteopath.

Each committee meeting or hearing is attended by a legal assessor – a legally qualified person who provides the committee with advice on matters of law and procedure.

Any of our fitness to practise committees can impose an 'interim suspension order' on an osteopath, if they feel it necessary to protect the public in a case involving serious allegations.

An interim suspension order suspends the osteopath's registration pending the investigation and outcome of the hearing.

The hearing is usually held in public, unless there is a reason why some or all of it has to be held in private. This means that members of the public, including the press, are able to attend, but they will be asked to leave the hearing room when the hearing goes into private matters.

## **Health Committee**

Health Committee hearings usually take place in private, before three Committee members. There will be at least one osteopath member and one lay member, and the Chair must be a lay member.

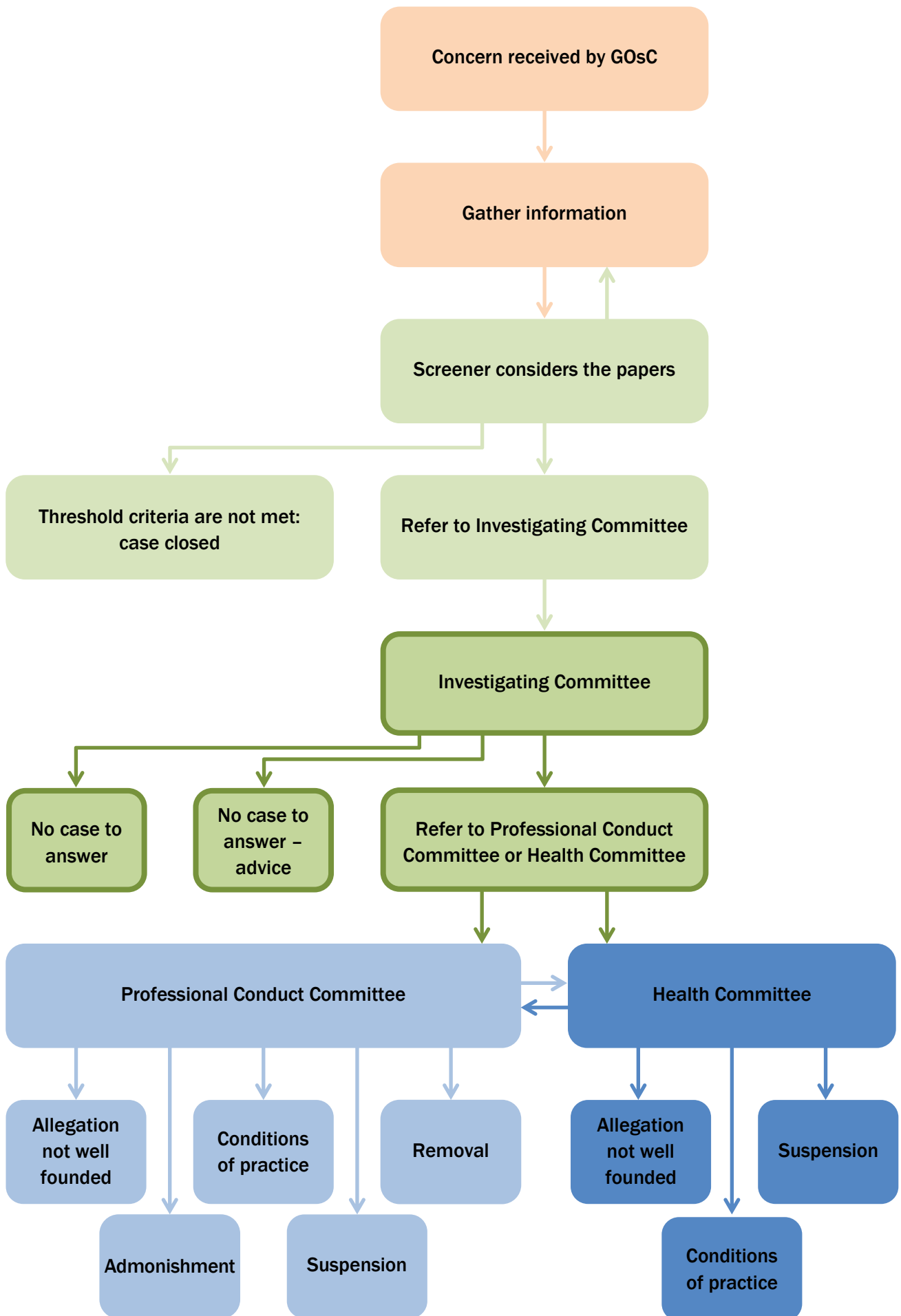
In addition to a legal assessor, a medical assessor will be present to provide advice to the Committee on the medical significance of the evidence it receives.

## **Sanctions**

If a hearing finds that a complaint against an osteopath is well-founded, the Professional Conduct Committee can impose one of four sanctions on the osteopath:

- admonishment
- imposition of conditions on the osteopath's practice
- suspension from the Register
- removal from the Register.

The Health Committee can impose only conditions of practice or a suspension, in cases where it finds that the osteopath's fitness to practice is seriously impaired because of their physical or mental condition.



# Investigations and hearings 2015-16

## Investigating Committee

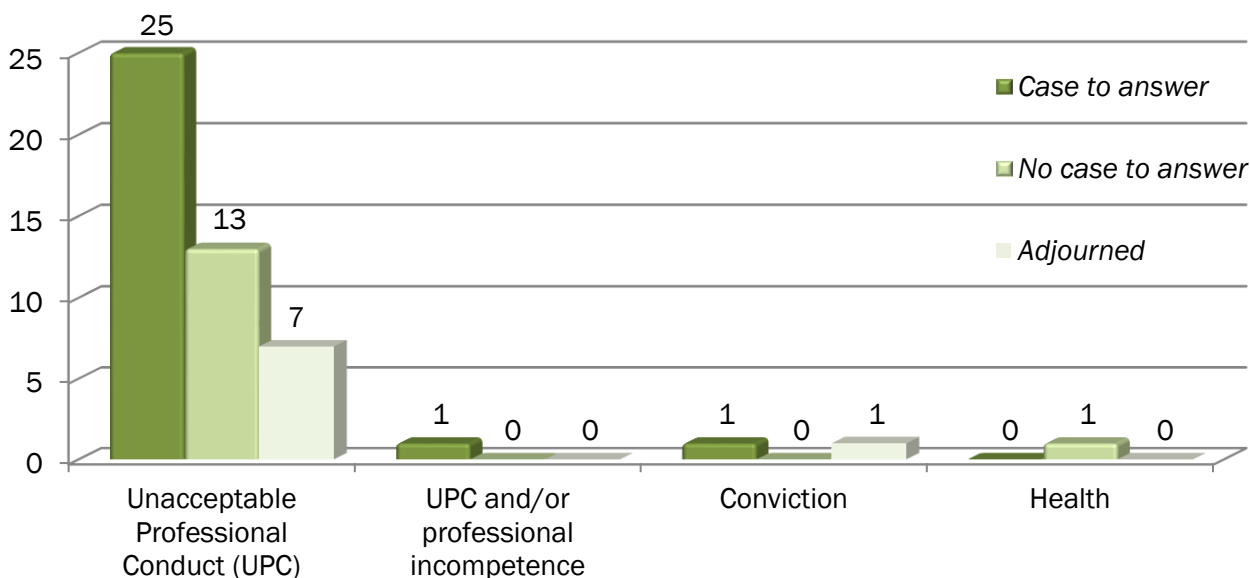
During the 12 months from 1 April 2015 to 31 March 2016, the GOsC's Investigating Committee met seven times and considered 49 cases.

It concluded that 27 of those cases should be heard by the Professional Conduct Committee or the Health Committee. It adjourned eight cases, and in 14 other cases found there was no case to answer.

No cases involving both unacceptable professional conduct and health were referred to the Investigating Committee during the period.

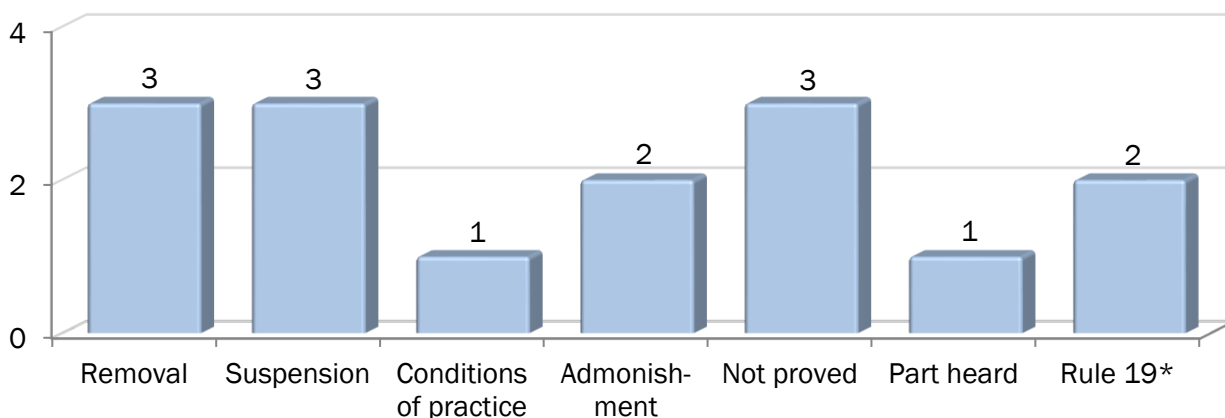
In three cases, the complaints were sufficiently serious for the Investigating Committee to impose interim suspension orders pending hearings.

The chart below shows the types of allegation considered by the committee, and the conclusions reached.



## Professional Conduct Committee

From April 2015 to March 2016, the Professional Conduct Committee heard 15 new cases relating to unacceptable professional conduct. The chart below shows the decisions it reached.



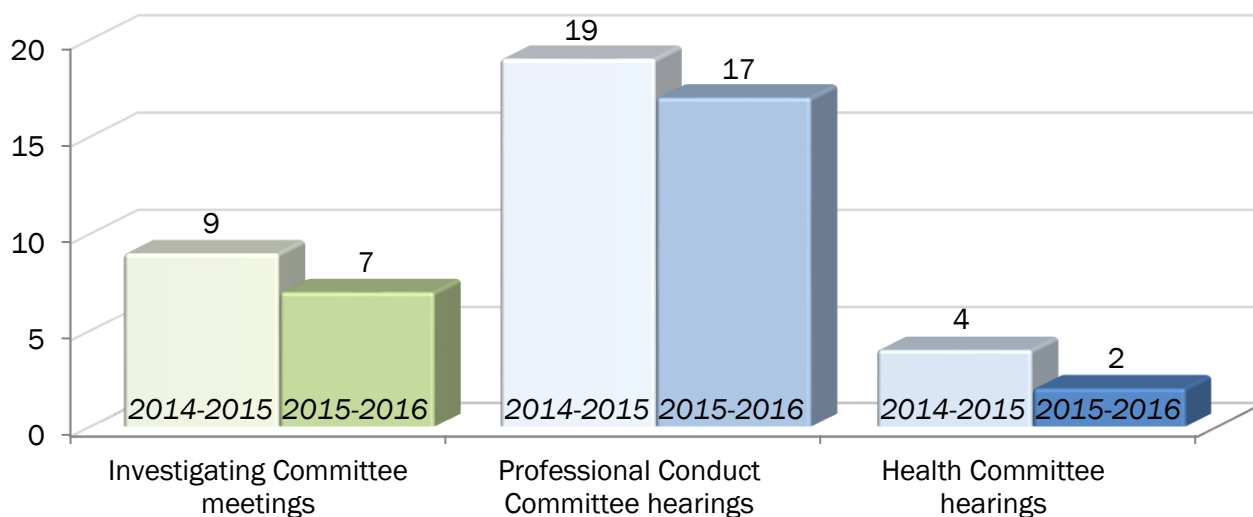
\* 'Rule 19' is where, owing to exceptional circumstances, the Council is no longer able to proceed with its case against the Registrant.

## Health Committee

Over the same period, the Health Committee heard two cases, both of which were adjourned.

### Number of meetings and hearings

The chart below compares the number of Investigating Committee meetings, Professional Conduct Committee hearings and Health Committee hearings held last year (April 2014 to March 2015) and this year (April 2015 to March 2016).



### Interim suspension order hearings

The Investigating Committee, Professional Conduct Committee and Health Committee can impose a suspension order on a registrant for an interim period if there is a real risk to members of the public.

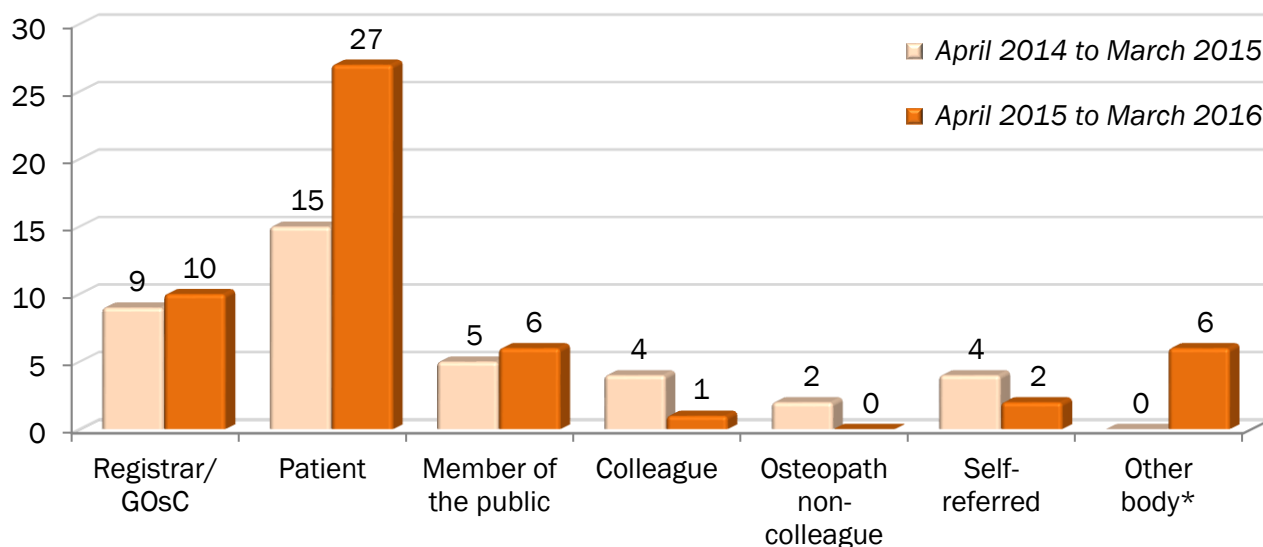
The table below shows how many interim suspension order (ISO) hearings took place, and the number of ISOs imposed, from April 2015 to March 2016.

Committee	Number of ISOs applied for	Number of ISOs imposed	Number of undertakings*
Investigating Committee	5	4	1
Professional Conduct Committee/ Health Committee	7	4	1

\* An undertaking is defined in GOsC Practice Note 2014/01 – available at: [bit.ly/gosc-practice-note-undertakings](http://bit.ly/gosc-practice-note-undertakings) – as a solemn written promise made by an osteopath to voluntarily restrict their practice.

## Who makes complaints?

The chart below shows a comparison from last year to this year for sources of formal complaints received.



\* Complaints were received from the NHS (2), local council (2), police and another health professional.

## How quickly do we process complaints?

The table below shows the time taken for cases to be heard, from 1 April 2015 to 31 March 2016.

Committee	Median time from receipt to decision
Investigating Committee	12 weeks* (target = 16 weeks)
Professional Conduct Committee	43 weeks* (target = 52 weeks)

\*Median figure across all cases considered by the respective committee this year.



# Professional Conduct Committee decisions 2015-16

This report of the General Osteopathic Council's Professional Conduct Committee covers substantive hearings concluded during the period 1 April 2015 to 31 March 2016.

It is produced in accordance with the *Osteopaths Act 1993*, Section 22(13) and (14), which requires the Committee to publish a report setting out the names of those osteopaths in respect of whom it has investigated allegations and found the allegations to be well founded.

Issues involving osteopaths' fitness to practise are an integral part of the GOsC's duty to regulate the profession and thereby protect the public and the profession's reputation. The information contained in this report provides a valuable resource to osteopaths on the high standards of conduct and proficiency required to maintain registration as an osteopath.

## Substantive hearings

Name, registration number and date of PCC decision	Source of complaint	Summary of allegations found proved	Outcome
John Davis 4376 May 2015	Registrar	<p>Mr Davis was convicted of a criminal offence, pursuant to Section 20(1)(c) of the <i>Osteopaths Act 1993</i>. He pleaded guilty to:</p> <ul style="list-style-type: none"> <li>● criminal damage (value £5000 or less) contrary to the <i>Criminal Damage Act 1971</i></li> <li>● two counts of possession of an offensive weapon in public, contrary to Section 1 of the <i>Prevention of Crime Act 1953</i></li> <li>● affray contrary to Section 3 of the <i>Public Order Act 1986</i>.</li> </ul> <p>Mr Davis was sentenced to 120 hours of community service, and ordered to pay compensation of £750, court costs of £500 and a victim surcharge of £60.</p>	Finding that convictions were materially relevant, leading to a suspension order imposed for a period of six months
Stephen Palmer 821 May and August 2015	Patient	<p>Mr Palmer provided treatment to Patient A on two separate occasions in June 2014. On both occasions he failed to conduct a palpatory and/or a further passive mobility examination of Patient A's:</p> <ul style="list-style-type: none"> <li>● thoracic and lumbar spine areas</li> <li>● cervical, shoulder and pelvic girdles.</li> </ul> <p>By this conduct, Mr Palmer failed to provide appropriate care and/or treatment to Patient A.</p>	Finding of unacceptable professional conduct, leading to an admonishment

Name, registration number and date of PCC decision	Source of complaint	Summary of allegations found proved	Outcome
<p>Joanne Blair 8123 September 2015</p>	<p>Patient</p>	<p>In June 2014, Ms Blair saw Patient A. Patient A was accompanied by his wife (Mrs A), who attended as his chaperone. Mrs A did not have a scheduled appointment with Ms Blair for treatment on that day, nor did Mrs A expect to be treated by Ms Blair.</p> <p>During the appointment, Ms Blair inserted two needles into the top of Mrs A's right shoulder.</p> <p>Ms Blair failed to:</p> <ul style="list-style-type: none"> <li>● take any, or any adequate, history from Mrs A before inserting the needles</li> <li>● undertake any, or any adequate, examination of Mrs A before inserting the needles</li> <li>● make treatment records, or conduct a patient evaluation to formulate a working diagnosis before inserting the needles</li> <li>● recognise and work within the limits of her training</li> <li>● monitor adequately or at all the effects of the needles she inserted</li> <li>● recognise Mrs A's adverse reaction to the needles, and the appropriate action to take</li> <li>● provide appropriate care and treatment to Mrs A.</li> </ul>	<p>Finding of unacceptable professional conduct, leading to a suspension order imposed for a period of eight months</p>

Name, registration number and date of PCC decision	Source of complaint	Summary of allegations found proved	Outcome
<p>Damon Stewart-Hall 7026 July and October 2015 (Three separate allegations considered during one substantive hearing)</p>	<p>Registrar</p>	<p>Mr Stewart-Hall was convicted of a criminal offence contrary to Section 39 of the <i>Criminal Justice Act 1988</i>. He was:</p> <ul style="list-style-type: none"> <li>● sentenced to a Community Order with a supervision requirement and made the subject of a Restraining Order</li> <li>● fined £400 and ordered to pay a victim surcharge of £60.</li> </ul> <p>In relation to the same allegation, he failed to:</p> <ul style="list-style-type: none"> <li>● notify the GOsC of his conviction for common assault or respond to the GOsC's request for information</li> <li>● cooperate fully with an investigation by the GOsC into his professional conduct.</li> </ul> <p>In relation to a separate allegation, Mr Stewart-Hall:</p> <ul style="list-style-type: none"> <li>● from June 2014 practised as an osteopath without professional indemnity insurance, failed to obtain and maintain insurance cover, and failed to notify the GOsC that his insurance had ceased</li> <li>● acted to the detriment of patients and placed such patients at risk by not having professional indemnity cover</li> <li>● failed to act in accordance with the law, uphold the reputation of the profession through his conduct or act with integrity in his professional practice.</li> </ul>	<p>Finding of unacceptable professional conduct, leading to an order to remove the osteopath's name from the Register of Osteopaths</p>
<p>Peter Orwell 7875 October 2015</p>	<p>Patient</p>	<p>Mr Orwell was Patient A's lecturer before she became his patient.</p> <p>In summary, during 2013 and 2014 Mr Orwell groomed Patient A, a vulnerable patient, and engaged in intimate contact with her for his own sexual gratification.</p> <p>Mr Orwell's actions were sexually motivated, transgressed sexual and professional boundaries, and were an abuse of his professional position.</p>	<p>Finding of unacceptable professional conduct, leading to an order to remove the osteopath's name from the Register of Osteopaths</p>

Name, registration number and date of PCC decision	Source of complaint	Summary of allegations found proved	Outcome
Dominic Eglinton 370 June and November 2015	Patient	<p>Between October 2011 and August 2012, Mr Eglinton held a number of consultations with Patient A.</p> <p>Mr Eglinton failed to maintain an appropriate standard of record-keeping in relation to appointments with Patient A, and did not make sufficiently legible or detailed records of treatment provided to Patient A.</p>	Finding of unacceptable professional conduct, leading to an admonishment
James Ellis 4703 November 2015	Patient	<p>During a single consultation in December 2014, Mr Ellis's conduct resulted in multiple, serious failings across a range of areas of practice including: consent, communication, respecting boundaries, respect for a patient's dignity and modesty, abuse of patient trust, and undermining the reputation of the profession.</p> <p>In summary, Mr Ellis:</p> <ul style="list-style-type: none"> <li>● required Patient A's father to feel her buttocks, telling him to "feel her ass" or words to that effect</li> <li>● touched Patient A's perineum without obtaining valid consent, and required Patient A to touch her perineum herself while he observed her doing so</li> <li>● used words such as "fuck" and "ass" in conversation with Patient A</li> <li>● patted Patient A's bottom several times and rested his hand on her thigh several times.</li> </ul>	Finding of unacceptable professional conduct, leading to a Conditions of Practice Order for a period of 12 months
Alexander Earle 6807 November 2015	Registrar	<p>During 2013 and 2014, Mr Earle:</p> <ul style="list-style-type: none"> <li>● conducted an improper personal and sexual relationship with Patient A</li> <li>● dishonestly created appointments under a false name for Patient A, while hiding the relationship and failing to disclose the relationship to the GOsC</li> <li>● had sexual intercourse with Patient A at his place of work during appointments booked under a false name</li> <li>● recommenced the relationship with Patient A after the GOsC began investigations into his fitness to practise</li> <li>● provided a dishonest practitioner's report to the GOsC, incorrectly stating the length of his sexual relationship with Patient A.</li> </ul>	Finding of unacceptable professional conduct, leading to a suspension order for a period of 18 months

Name, registration number and date of PCC decision	Source of complaint	Summary of allegations found proved	Outcome
Martyn Langton 6206 January 2016	Patient	<p>Between September 2009 and January 2013, Mr Langton provided osteopathic treatment to Patient A. In summary, during this time Mr Langton:</p> <ul style="list-style-type: none"> <li>● knew Patient A was emotionally vulnerable</li> <li>● made inappropriate and sexualised comments towards Patient A</li> <li>● pursued an improper, personal relationship with Patient A</li> <li>● conducted a sexual relationship with Patient A</li> <li>● abused his professional position.</li> </ul>	Finding of unacceptable professional conduct, leading to an order to remove the osteopath's name from the Register of Osteopaths

## Review hearings

When the Professional Conduct Committee decides to impose conditions on an osteopath's practice (a conditions of practice order) or suspends an osteopath's registration (a suspension order), it will review that order at a hearing before the order expires. The following cases were reviewed by the Committee during the period of this report.

Name, registration number and date of review hearing	Summary of order requiring review	Outcome of review hearing
Peter Martin 3191 August 2015	Finding of unacceptable professional conduct, leading to a conditions of practice order in September 2014.	Revocation of the conditions of practice order
Jonathan Cohen 2517 October 2015	<p>Finding of unacceptable professional conduct, leading to a suspension order for a period of nine months.</p> <p>The case was first reviewed in June 2015, when the suspension period was extended by a further three months: Mr Cohen had failed to provide evidence of completing any of the requirements and did not feel he was yet in a position to comply with the Committee's requirements.</p> <p>At the second review hearing, the Committee was satisfied that Mr Cohen had fully remediated all of the identified failings. The Committee decided it was sufficient, proportionate and appropriate to make no further direction and to allow the suspension order to expire on the agreed date.</p>	The suspension order, first imposed in September 2014 and subsequently extended, to run its course and expire on 30 November 2015
John Davis 4376 November 2015	Finding that convictions were materially relevant, leading to a suspension order in May 2015.	The suspension order imposed in May 2015 to run its course and expire on 19 December 2015