



General  
Osteopathic  
Council

# Fitness to Practise Annual Report

## 2017-18

**Investigating  
Committee**

**Professional  
Conduct  
Committee**

**Health  
Committee**

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# 1. Stages of the fitness to practise process

The General Osteopathic Council (GOsC) has a duty under the Osteopaths Act 1993 to investigate concerns about osteopaths.

**We receive concerns about osteopaths from a variety of sources, including:**

- patients
- members of the public
- employers
- registrants
- referrals from other regulators.

Patient concerns continue to be the main source of complaints about registered osteopaths. Through our fitness to practise processes we have a duty to identify whether a concern about a registered osteopath is a legitimate matter that needs to be investigated. The fitness to practise procedures are designed to protect the public and are not intended to serve as a general complaints resolution process.

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.

### Screeners

The Regulation Department reviews all the concerns received and conducts an initial risk assessment to ensure there is no immediate risk to public protection. We gather as much information as possible at this initial stage before referring the concern to a 'Screener' (an osteopath member of the GOsC Investigating Committee). As part of our information gathering, we usually seek additional information or clarification from the person raising the concern. If the person raising the concern does not provide the further information within 42 days of the

request, the papers will then be referred to a Screener with a recommendation for closure on the basis that there is insufficient relevant and credible supporting material.

If we do receive the information, the case is passed to the Screener who reviews the concern to determine whether it is capable of amounting to an allegation under the Osteopaths Act. In reaching a decision, the Screener can refer to 'threshold criteria' to help decide whether an activity complained about constitutes unacceptable professional conduct, which is 'conduct which falls short of the standard required of a registered osteopath'.

If the Screener decides that the GOsC has no power to investigate the concern against the osteopath, the matter is referred to a Lay Screener to review the documentation and the Screener's decision. If they both agree, the matter can be closed. If they disagree, then the matter is referred to the Investigating Committee.

### Investigating Committee

The Investigating Committee (IC) meets in private to consider cases that have been referred to them

by a Screener. 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.

The Investigating Committee may determine that it has insufficient information in order to fairly consider the matter and adjourn consideration in order to obtain additional information.

If the IC decides there is a case to answer, a hearing will be arranged before the GOsC's Professional Conduct Committee or Health Committee, if the matter concerns a registrant's health.

### Professional Conduct Committee

The Professional Conduct Committee (PCC) consists of three members:

- lay Chair
- osteopath
- lay member.

A legal assessor is also present to assist the Committee on any legal matters that may arise during a hearing.

Hearings are usually held in public and members of the public can attend. However, depending on the nature of the case, there may be occasions when part or all of the hearing must be held in private.

When considering a case, the Committee's decision-making process is in three stages:

### 1. Findings of fact

The Committee will consider whether it finds the facts alleged against an osteopath proved. Some of the facts may be admitted by the osteopath and other facts may be in dispute. The Committee will consider the disputed facts and decide whether it is more likely than not that they happened. This is known as the 'balance of probabilities'.

If the Committee does not find any of the facts proved, the case will be concluded. Where it finds some or all of the facts proved, the hearing will proceed to the next stage.

### 2. Finding on allegation

Once the findings of fact have been announced, both parties (the GOsC's Case Presenter

and the Registrant) will be invited to make submissions on unacceptable professional conduct or professional incompetence or whether a criminal conviction is material to the practice of osteopathy. This is a matter for the PCC's judgement and is not a matter of proof.

The Committee will hear and consider the submissions and will retire in private to consider its findings. When a decision has been reached, the parties will be invited into the hearing room and the Chair will announce the Committee's decision.

### 3. Finding on sanction

If the Committee determines that the facts amount to unacceptable professional conduct or professional incompetence, or that a criminal conviction is material to the practice of osteopathy, it will then hear any additional submissions by both parties regarding the allegations. It will also take account of submissions made by each party on the sanction to impose.

The Committee will consider the evidence in private and decide which sanction to impose. Once it has reached a decision, the parties will be invited into the

hearing room and the Chair will announce the sanction.

If the Committee finds an allegation against an osteopath is well-founded, it must 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.

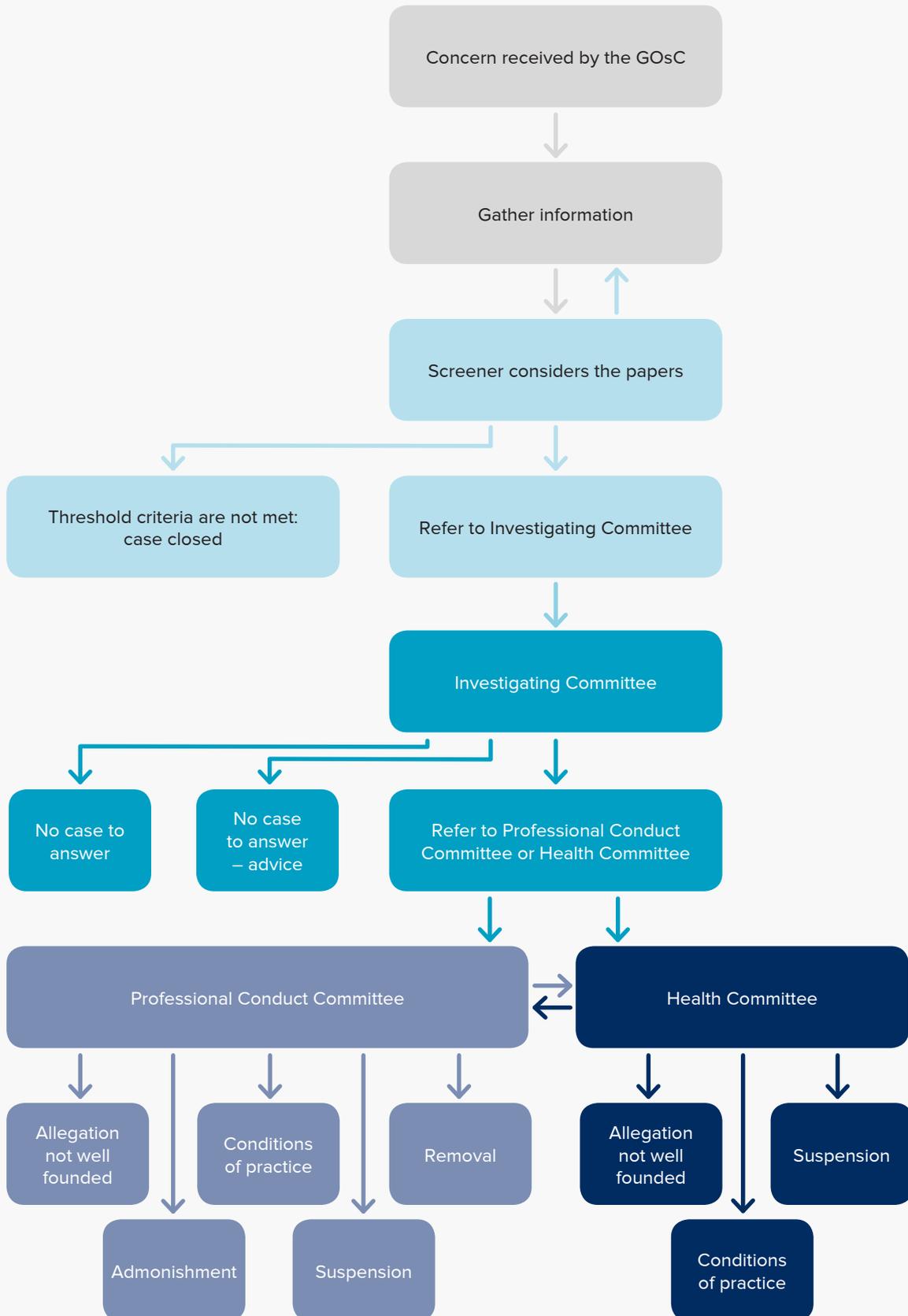
### Health Committee

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

Committee hearings usually take place in private and consist of three members:

- lay Chair
- osteopath
- lay member.

A legal assessor and a medical assessor are also present to assist with legal and medical matters.



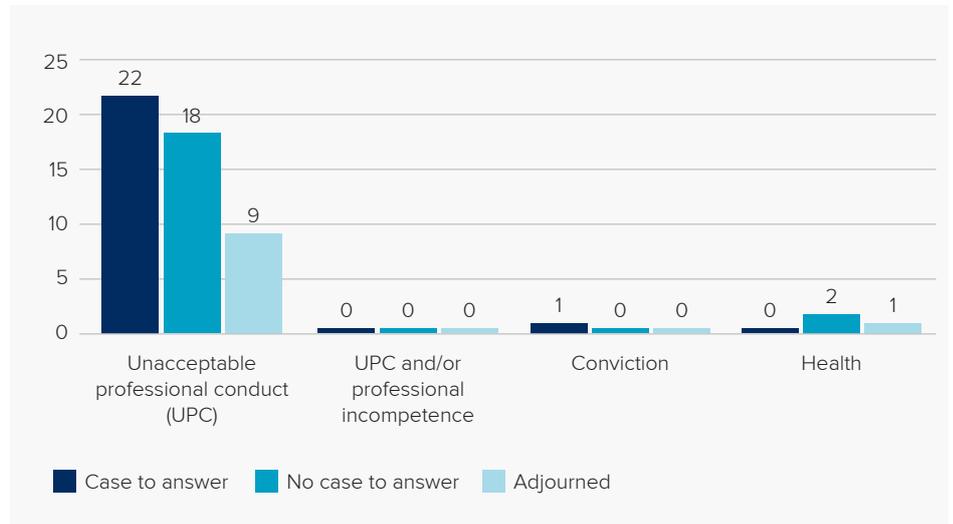
## 2. Investigations and hearings 2017-18

### Investigating Committee

During the 12 months from 1 April 2017 to 31 March 2018, the GOsC’s Investigating Committee met seven times and considered 53 cases. It concluded that 23 of those cases should be heard by the Professional Conduct Committee or the Health Committee. It adjourned 10 cases and in a further 20 cases it found no case to answer. Except for one conviction case, all cases referred to the Professional Conduct Committee involved unacceptable professional conduct.

In one case, the complaint was sufficiently serious for the Investigating Committee to impose an interim suspension order pending a hearing.

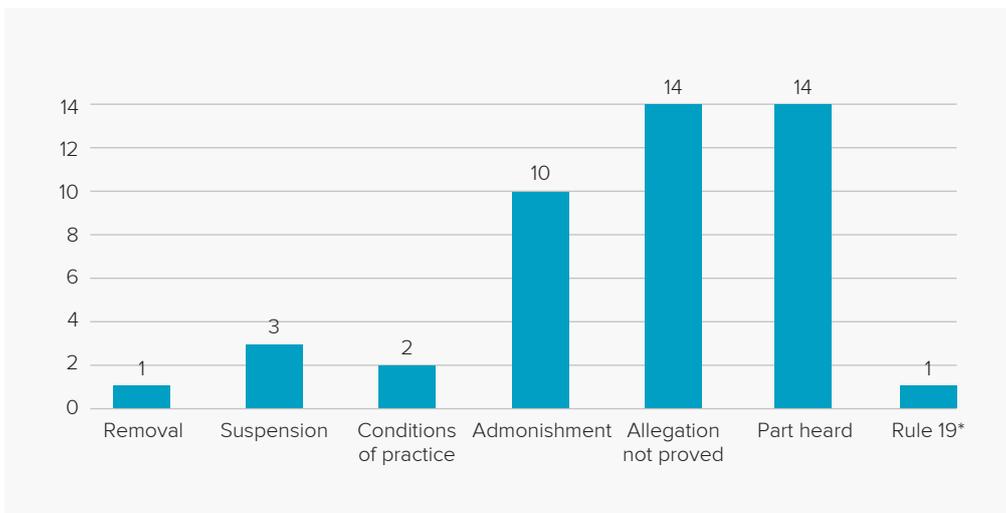
The chart (right) shows the types of allegations considered by the Committee and the conclusions reached.



### Professional Conduct Committee

From 1 April 2017 to 31 March 2018, the Professional Conduct Committee heard 45 cases relating to unacceptable professional conduct\*. The chart below shows the decisions it reached.

\*This figure includes cases that were adjourned and re-listed, reflecting the overall activity of the Professional Conduct Committee in this period.



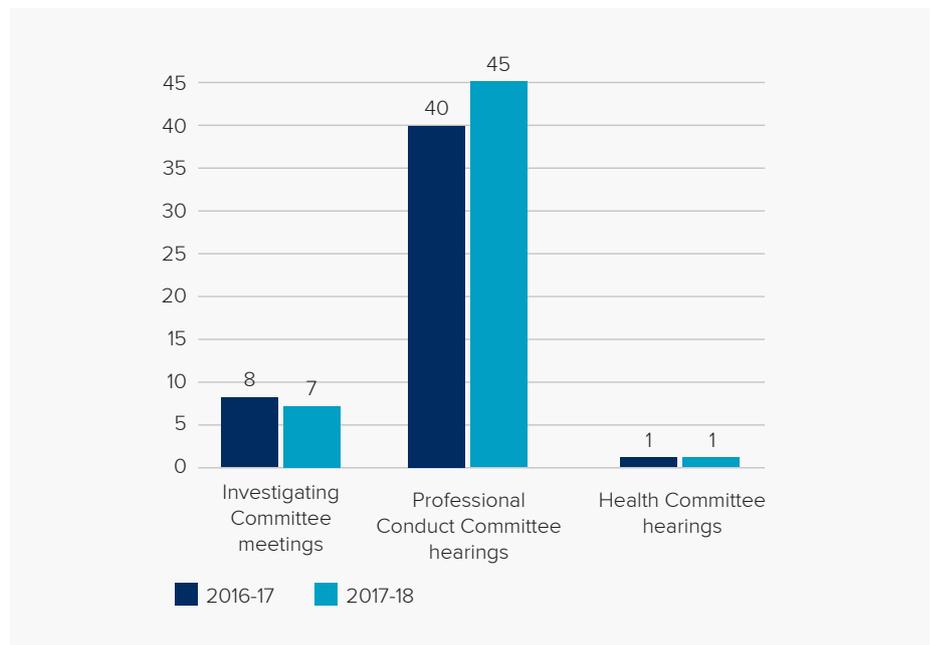
\* 'Rule 19' is where, owing to exceptional circumstances, the Council is no longer able to proceed with its case against the Registrant, for example because a key witness ceases to engage with the Council.

### Health Committee

Over the same period, the Health Committee considered one substantive case and imposed a Conditions of Practice order.

### Number of meetings and hearings

The chart (right) compares the number of Investigating Committee meetings, Professional Conduct Committee hearings and Health Committee hearings held last year (April 2016 to March 2017) and this year (April 2017 to March 2018).



### Interim suspension order hearings

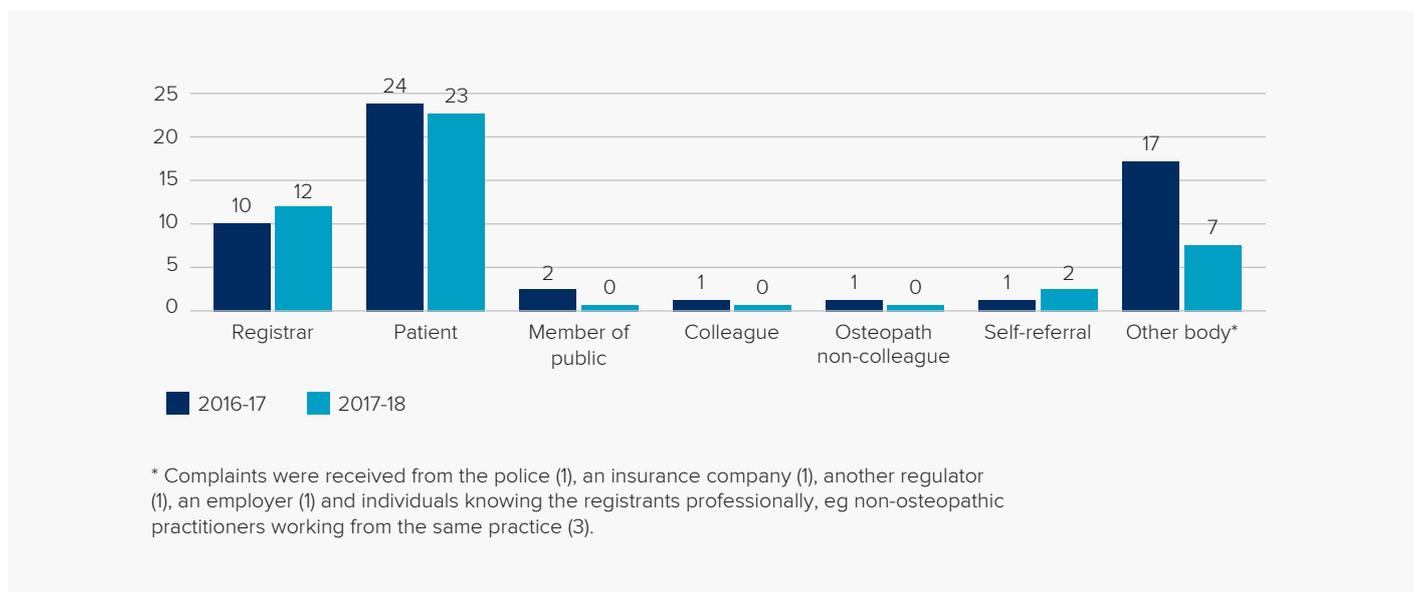
The Investigating Committee, Professional Conduct Committee and Health Committee can impose a suspension order on a registrant for an interim period if there is a real risk to members of the public. The table below shows how many interim suspension order (ISO) hearings took place, and the number of ISOs imposed, from April 2017 to March 2018.

Committee	Number of ISOs applied for	Number of ISOs imposed	Number of undertakings*
Investigating Committee ISOs applied for	6	1	3
Professional Conduct Committee ISOs applied for	2	2	0

\* 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 of sources of formal complaints received last year and this year.



### How quickly do we process complaints?

The table below shows the time taken for cases to be heard, from 1 April 2017 to 31 March 2018.

Committee	Median time from receipt to decision
Investigating Committee	16 weeks* (target = 16 weeks)
Professional Conduct Committee	57 weeks* (target = 52 weeks)

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

### 3. Professional Conduct Committee decisions 2017-18

This report of the General Osteopathic Council's Professional Conduct Committee covers substantive hearings concluded during the period 1 April 2017 to 31 March 2018.

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 for osteopaths on the high standards of conduct and proficiency required to maintain registration as an osteopath.

#### Substantive Hearings

Osteopath	Date of decision	Source of complaint	Outcome	Summary
Joanna Pooley 6062	April 2017	Registrar	Finding of unacceptable professional conduct, leading to a suspension for a period of 9 months	Ms Pooley failed to notify the GOsC when her professional indemnity insurance cover ceased in January 2013.  She practised as an osteopath without professional indemnity insurance from November 2015 to January 2016.  In January 2016 Ms Pooley made dishonest representations to the GOsC about her practising status.
Katie Hall 5493	April 2017	Registrar	Finding of unacceptable professional conduct, leading to an admonishment	From November 2014 Ms Hall did not have professional indemnity insurance cover. On 1 July 2015 and 13 October 2015 Ms Hall practised as an osteopath without insurance. She failed to inform the GOsC that insurance cover had ceased to be in force.

Osteopath	Date of decision	Source of complaint	Outcome	Summary
Stephen Palmer 821	May 2017	Patient	Finding of unacceptable professional conduct, leading to a conditions of practice order for a period of 12 months	<p>Mr Palmer provided treatment to Patient A during March and April 2015. During a number of appointments, he acted inappropriately towards Patient A and transgressed professional boundaries by:</p> <ul style="list-style-type: none"> <li>• asking questions about her romantic relationships</li> <li>• offering her relationship advice.</li> </ul> <p>Mr Palmer provided treatment to Patient B in or around August 2001. During that appointment, he failed to respect Patient B's dignity and modesty in that he:</p> <ul style="list-style-type: none"> <li>• asked her to remove her jeans, face away from him and bend over to touch her toes</li> <li>• did not offer her a towel or gown.</li> </ul>
Katherine Clayton 7829	August 2017	Registrar	Finding of unacceptable professional conduct, leading to an admonishment	From 1 May 2015 Ms Clayton did not have professional indemnity insurance cover. From 19 January to 4 May 2016 she practised as an osteopath without insurance. She failed to inform the GOsC that insurance cover had ceased to be in force.
Amy O'Halloran 8812	August 2017	Member of Public	Finding of unacceptable professional conduct, leading to an admonishment	<p>In July 2016 Ms O'Halloran:</p> <ul style="list-style-type: none"> <li>• made inappropriate comments about other healthcare professionals on a Facebook group chat forum</li> <li>• sent inappropriate comments to Person B</li> <li>• provided a diagnosis and advice to Person A on a Facebook group chat forum without having examined them.</li> </ul>

Osteopath	Date of decision	Source of complaint	Outcome	Summary
Babar Abbas 4570	September 2017	Registrar	Finding of unacceptable professional conduct, leading to an admonishment	From 1 September to 6 October 2015 Mr Abbas did not have professional indemnity insurance cover. He failed to inform the GOsC that insurance cover had ceased to be in force.
Laurens Maas 1739	September 2017	Registrar	Finding of unacceptable professional conduct, leading to an admonishment	Mr Maas practised as an osteopath from 15 March to 28 June 2016 without professional indemnity insurance cover. He failed to immediately inform the GOsC that insurance cover had ceased to be in force.
Katy Teasdale 7030	October 2017	Other	Finding of unacceptable professional conduct, leading to an admonishment	<p>Ms Teasdale treated Baby C in February 2016 and she did not provide appropriate aftercare advice to Baby C's mother.</p> <p>Ms Teasdale treated Baby C again in March 2016 and in commenting on a lump or lumps on Baby C's thigh, she suggested to Baby C's mother that these would eventually disappear if she rubbed the lumps. She did not advise Baby C's mother to contact her GP or seek appropriate medical attention elsewhere.</p>
Nik Patel 3536	November 2017	Registrar	Finding of unacceptable professional conduct, leading to an admonishment	Mr Patel practised as an osteopath from 1 September 2014 to 31 May 2015 without professional indemnity insurance cover. He failed to inform the GOsC that insurance cover had ceased to be in force.

Osteopath	Date of decision	Source of complaint	Outcome	Summary
Trishul Vadi 6076	December 2017	Patient	Finding of unacceptable professional conduct, leading to an admonishment	<p>Mr Vadi provided treatment to Patient A at appointments in February and March 2016. During these appointments, Mr Vadi failed to provide appropriate care and treatment to Patient A in that he:</p> <ul style="list-style-type: none"> <li>• did not explain the risks of treatment</li> <li>• did not obtain valid consent for the treatment.</li> </ul> <p>Mr Vadi also used the title “Dr” on his website. This gave the misleading impression that this title related to his practice as an osteopath.</p>
Philippa Barnett 1889	December 2017	Registrar	Finding of UPC, leading to an admonishment	<p>Ms Barnett was registered and/or practised as an osteopath from 1 September to 20 October 2016 without professional indemnity insurance cover. She failed to inform the GOsC that insurance cover had ceased to be in force.</p>
Mark Mathews 851	January 2018	Patient	Finding of unacceptable professional conduct, leading to an order to remove the osteopath’s name from the Register of Osteopaths	<p>Mr Mathews provided treatment to Patient A on various dates in July 2016. The treatment and care he provided to Patient A was not appropriate in that he did not:</p> <ul style="list-style-type: none"> <li>• take an adequate case history</li> <li>• conduct an adequate examination</li> <li>• formulate an adequate treatment plan</li> <li>• explain the treatment, including the risks of treatment</li> <li>• obtain valid consent</li> </ul> <p>(Continued on next page)</p>

Osteopath	Date of decision	Source of complaint	Outcome	Summary
				<ul style="list-style-type: none"> <li>• stay in the room with Patient A while administering Inferential-Electro therapy treatment</li> <li>• return promptly to turn off the Inferential-Electro therapy machine or respond to Patient A's calls for assistance.</li> </ul> <p>At one appointment, Mr Mathews prescribed minerals to Patient A and he:</p> <ul style="list-style-type: none"> <li>• put pressure on Patient A to purchase the minerals</li> <li>• shouted at Patient A when he questioned the cost of minerals.</li> </ul> <p>The Inferential-Electro therapy treatment administered by Mr Mathews resulted in Patient A sustaining skin damage on his back.</p> <p>In between two appointments in July 2016 Mr Matthews did not communicate with Patient A appropriately in that he:</p> <ul style="list-style-type: none"> <li>• spoke in a lecturing and domineering manner</li> <li>• made inappropriate comments about other healthcare professionals.</li> </ul>
Gareth Davies 8277	February 2018	Registrar	Finding of unacceptable professional conduct, leading to an admonishment	Mr Davies was convicted of driving a motor vehicle after consuming alcohol exceeding the prescribed limit.

## Review Hearings

Osteopath	Date of review	Order requiring review	Outcome of review
Alexander Earle 6807	May 17	Finding of unacceptable professional conduct leading to a suspension order in November 2015.	The suspension order imposed in November 2015 to run its course and expire on 10 June 2017.
Joanna Pooley 6062	December 17	Finding of unacceptable professional conduct leading to a suspension order in April 2017	The suspension order imposed in April 2017 to run its course and expire on 25 February 2018.
Elizabeth Treadaway 6857	March 18	Finding of unacceptable professional conduct, leading to a suspension order in May 2016. This order was reviewed and extended in September 2016 and again in April 2017.	The suspension order imposed in May 2016 and subsequently extended, to be further extended for a period of 12 months.

## 4. Updates

The GOsC has published two new guidance documents for decision makers in its fitness to practise cases.

The Investigating Committee Decision-Making Guidance ([osteopathy.org.uk/ic-decision-making-guidance](http://osteopathy.org.uk/ic-decision-making-guidance)) sets out the statutory duties and regulatory function of the Investigating Committee. It is designed to improve both the quality and consistency of the Investigating Committee decision-making when determining whether there is a case for the osteopath to answer. It provides a framework for decision-making by the Investigating Committee but does not impact on the Committee reaching decisions independently.

The Hearings and Sanctions Guidance ([osteopathy.org.uk/hearings-and-sanctions-guidance](http://osteopathy.org.uk/hearings-and-sanctions-guidance)) is designed to make parties to a hearing aware of the approach that will be taken by the Professional Conduct Committee during the hearing and when imposing a sanction. It applies to all new cases after 31 January 2018.



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