

# Investigating complaints

Regulators of healthcare professionals – the General Osteopathic Council included – report annually on the effectiveness of their complaints procedures. Here, the work of the GOsC's three fitness to practise committees comes under the spotlight

**O**ur fitness to practise committees comprise the Investigating Committee, the Professional Conduct Committee and the Health Committee. Here, we summarise the work of these GOsC committees between 1 April 2013 and 31 March 2014.

## The Investigating Committee

The Investigating Committee (IC) carries out the initial investigation of a complaint against an osteopath, and decides if there is a case for the osteopath to answer.

Allegations fall into the following four categories (a complaint will often involve more than one of these):

- Unacceptable professional conduct
- Professional incompetence
- A relevant criminal offence (conviction)
- Ability to practise is seriously impaired due to a mental or physical condition.

From 1 April 2013 to 31 March 2014, the IC met on nine occasions and considered 35 cases. It concluded that 25 of those cases should be heard by the Professional Conduct Committee (PCC), and two by the Health Committee.

## The decisions of the IC during this period:

Allegation	Case to answer	No case to answer
Unacceptable professional conduct	22	6
Professional incompetence	0	0
Unacceptable professional conduct and/or professional incompetence*	1	0
Unacceptable Professional Conduct and Conviction*	1	0
Conviction	1	1
Health	2	1
<b>Total cases considered</b>	<b>27</b>	<b>8</b>

\*It is not uncommon for more than one allegation to feature in a case.

## The Professional Conduct Committee

The PCC considers cases that are referred to it by the IC, where there is an allegation against the osteopath's conduct or competence, or conviction for a criminal offence, and it is the role of the PCC to decide whether the allegation is well-founded. Hearings of the PCC's panels take place in public unless there is a good reason for the allegations to be heard in private. Both parties – the osteopath and the GOsC – attend the hearing and present their case.

From 1 April 2013 to 31 March 2014, the PCC heard 16 new cases (excluding four



cases that were cancelled) referred by the IC, and reached the following decisions:

	Unacceptable professional conduct
Not proved	8
Admonished	1
Conditions of practice	4
Suspended	0
Removed	3
Total	16

### How does the PCC decide what sanction to apply?

All healthcare regulators, including the GOsC, publish sanctions guidance (see <http://tinyurl.com/nzgd8nn>). The guidance ensures that the PCC imposes sanctions appropriately, consistently and in line with the law.

If a PCC panel decides that an allegation is well-founded, it must impose an appropriate sanction. The sanctions available to the PCC are: issuing an admonishment; imposing conditions on the osteopath's practice; suspension from the Register; and removal from the Register.

The PCC panel will consider each sanction in ascending order to decide which is most appropriate. The PCC will also take into account any mitigating factors, such as the osteopath's previous good character, the osteopath's insight into the issues that have led to the finding, and evidence that there has been no repetition of the conduct or performance, before making its decision.

Between 1 April 2013 and 31 March 2014, the PCC imposed an **admonishment** in a case where the osteopath had received a police caution for common assault. The PCC took account of the fact that the osteopath had admitted the offence at the first opportunity, and that it was an isolated incident. It noted the osteopath was of previous good character and that there had been no other instances of this behaviour.

A **'conditions of practice'** order was imposed in a case where an osteopath had failed to:

- Carry out an adequate sensory neurological examination of a patient's leg
- Identify the most likely diagnosis of a herniated intervertebral disc causing S1 nerve root compression
- Re-examine the patient.

These failings meant that the osteopath twice provided inappropriate treatment:

- Because of the failings described above
- Because the osteopath did not take into account the patient's age and presentation
- Because the treatment provided was more forceful than the recorded treatment plan had intended.

**Removal** from the Register is a sanction imposed only in the most serious of cases. The PCC has removed three osteopaths from the Register this year. In one of these cases, the osteopath had been convicted of a number of indecent and sexual assaults on patients, some of whom were children.

In another case, the osteopath had made claims on their LinkedIn profile that they could successfully cure cancer, Parkinson's disease and Motor Neurone Disease. The osteopath invited patients to 'call if you are desperate, if the NHS can't assist. Call if you don't know where else to turn.' The osteopath had also stated on an internet blog that they had taught themselves how to destroy cancer and had successfully treated various types of cancer.

The PCC took the view that patients suffering from these conditions were particularly vulnerable. The PCC concluded that making such claims was a form of abuse and exploitation of vulnerable people with life-threatening conditions, by giving them hope of a cure which osteopathy could not provide. There was also the potential to cause patients real harm.

The PCC had no doubt that the making of such claims diminished public trust and confidence in osteopathic practice, and caused significant damage to the profession's reputation.

In the third case, the PCC concluded that the osteopath's failings were extensive and serious. The osteopath had repeatedly breached professional boundaries: aspects of their conduct were sexually motivated; they had assaulted the patient physically and verbally; they failed on a number of occasions to carry out an adequate clinical examination of the patient; and they also failed on a number of occasions to obtain valid consent before undertaking treatment procedures, including for an intimate area of the body. Furthermore, the osteopath did not properly supervise students when the patient was being used as a model.

The PCC had the gravest concerns about both the clinical and ethical aspects

of this osteopath's practice. It was satisfied that: the osteopath's failings amounted to a serious and deliberate abuse of their position in relation to a vulnerable patient; and that their conduct had caused the patient harm and would be regarded as deplorable by fellow practitioners.

### The Health Committee

Cases where an osteopath's physical or mental health may be seriously affecting their ability to practise are considered by the Health Committee (HC), after referral from the IC. These hearings are held in private. Between 1 April 2013 and 31 March 2014, two cases were referred to the Health Committee. These have not yet been heard.

### Review hearings

When the PCC or HC imposes a conditions of practice order, or suspends an osteopath from the Register (a suspension order), it may review the case before expiry of the order. This allows the committee to monitor the osteopath's compliance with the order and to decide whether it should be revoked, allowed to expire, extended or varied. During the period of the report, the PCC reviewed one conditions of practice order.


### Interim suspensions

Depending on the seriousness of the allegation, the fitness to practise committees may order the Registrar to immediately suspend an osteopath's registration, if it considers that such an order is necessary to protect the public. The suspension is likely to remain in place for the duration of the investigation, unless there is a change in circumstances in the case. For example, the complainant may withdraw the serious allegation, which could mean that the suspension is no longer necessary.

Between 1 April 2013 and 31 March 2014, the IC imposed four interim suspension orders.

### Appeals

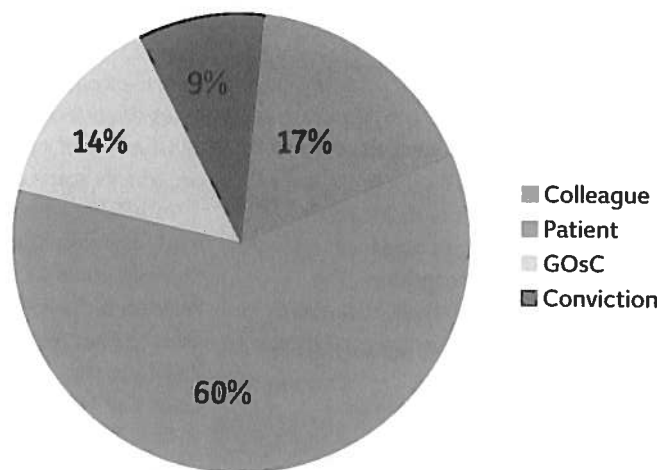
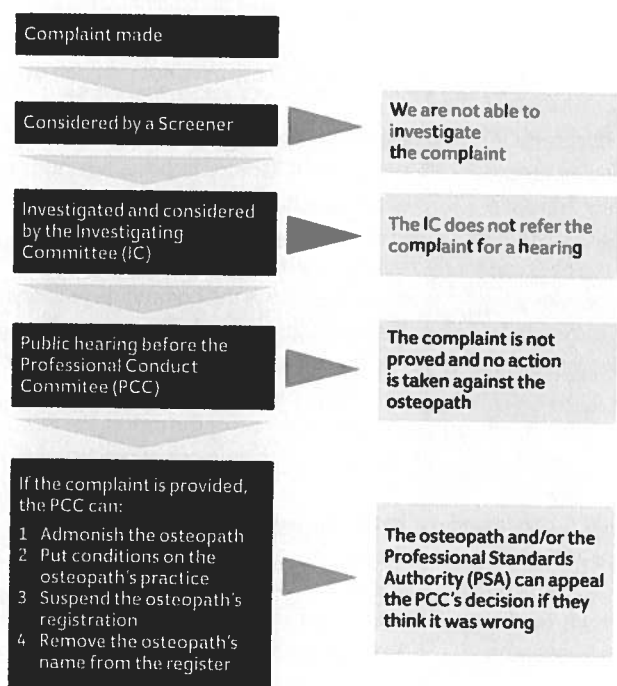
An osteopath can appeal against a PCC decision made against them and the Professional Standards Authority can also appeal against a PCC decision. There were no appeals made between 1 April 2013 and 31 March 2014.

 The GOsC annual fitness to practise reports are on the website at: <http://tinyurl.com/npbd3qn>

# What happens when a complaint is made?

Ensuring public confidence and patient safety relies – in no small part – on the health regulator’s effective investigation of complaints that question a practitioner’s fitness to practise

The flowchart illustrates the procedures followed when a complaint about an osteopath is received by the GOSc.



## Learning from complaints

The GOSc analyses the number and types of issues that give rise to complaints relating to osteopathic practice and conduct. The learning from this is used to inform the development of standards and guidance for osteopaths, and is shared with osteopathic educational institutions and other organisations leading the development of good practice.

Ensuring an effective feedback loop to share lessons learnt from the fitness to practise process is essential to enhancing practice in any healthcare practice. The GOSc uses this information, for example, to inform the content of the *Fitness to Practise* e-bulletin, sent periodically to all osteopaths, and as the basis for e-learning resources available on the o zone and for articles in *the osteopath*.

This year, we have seen an increase in the number of cases that have involved a breach of professional boundaries or sexually motivated conduct. The March 2014 edition of the GOSc *Fitness to Practise* e-bulletin offers advice on how to maintain clear, professional boundaries.

It is also worth recalling the following from the *Osteopathic Practice Standards*:

- A2 Listen to patients and respect their concerns and preferences
- A3 Give patients the information they need in a way they can understand
- A4 You must receive valid consent before examination and treatment
- C4 Be polite and considerate with patients
- C6 Respect your patients’ dignity and modesty
- D16 Do not abuse your professional standing.

## How long does it take the GOSc to consider a case?

This will depend on the nature and the complexity of the case. The GOSc has targets for completion of the main stages of the fitness to practise process. The table below shows the target and how we have performed this year:

	Target (weeks)	Performance against target (receipt to decision in weeks)*
IC decision	17	16
PCC decision	56	48

\* Median figure taken from all of the cases considered by the IC and PCC this year.

## Who makes complaints?

Anyone who has a concern about an osteopath’s fitness to practise can bring this to the attention of the Regulation Department of the GOSc. The chart at the top right of the page shows the source of the 35 complaints considered by the IC between 1 April 2013 and 31 March 2014.

Further information is available at: [www.osteopathy.org.uk/information/complaints](http://www.osteopathy.org.uk/information/complaints) or contact our Regulation Department on 020 7357 6655 x236, or email [regulation@osteopathy.org.uk](mailto:regulation@osteopathy.org.uk)