

Guidance for the Professional Conduct Committee on formulating Conditions of Practice Orders

INTRODUCTION

- 1. The General Osteopathic Council (GOsC) was established by the *Osteopaths Act 1993* (the Act) to regulate and develop the profession of osteopathy. This document relates to the GOsC's regulatory function and in particular the work of its Professional Conduct Committee (PCC).
- 2. This document has been produced primarily to assist the PCC when it has determined that a Conditions of Practice Order should be imposed on a registrant. However, osteopaths, their legal representatives, professional bodies and members of the public may also find the information contained in this document useful.
- 3. A Conditions of Practice Order allows an osteopath to continue practising while providing protection for the public and patients. When formulating conditions, the PCC will have protection of the public interest at the forefront of its mind.
- 4. This document is designed to guide the PCC when it needs to formulate conditions that a registrant must adhere to and it complements the *Indicative Sanctions Guidance*. It is not exhaustive, nor intended to restrict the PCC from exercising its own judgement.

PROFESSIONAL CONDUCT COMMITTEE (PCC)

- 5. The procedures adopted by the PCC are governed primarily by the Act and the GOsC (Professional Conduct Committee) (Procedure) Rules 2000 (the Rules). Other legislation, such as the *Human Rights Act 1998*, also has an impact on the way the PCC operates and the procedures it adopts, as does common law.
- 6. Section 22(1) of the Act provides for the PCC to consider any allegation to the effect that the osteopath has been:
 - a) guilty of conduct which falls short of the standard required of a registered osteopath (unacceptable professional conduct);

- b) guilty of professional incompetence;
- c) convicted (at any time) in the United Kingdom of a criminal offence;
- 7. Section 22(2) requires the PCC to take one of the following steps, if it is satisfied that the allegation is well founded and, in the instance of a criminal conviction, that the offence has material relevance to the osteopath's fitness to practise:
 - a) admonish the osteopath;
 - b) make an order imposing conditions with which the osteopath must comply while practising as an osteopath (a 'conditions of practice order');
 - c) order the Registrar to suspend the osteopath's registration for such period as may be specified in the order (a 'suspension order');
 - d) order the Registrar to remove the osteopath's name from the register.
- 8. If the allegation is of the kind mentioned in 6.c) above and the PCC considers that the criminal offence in question has no material relevance to the fitness of the osteopath concerned to practise osteopathy, it may take no action (section 22(3) of the Act).
- 9. This guidance is solely concerned with the PCC's powers to make an order imposing conditions with which the osteopath must comply while practising as an osteopath (a 'Conditions of Practice Order').

CONDITIONS OF PRACTICE ORDER

- 10. A Conditions of Practice Order (the Order) allows an osteopath to continue practising while providing protection for the public and patients. The primary purpose of the Order is to protect the public. If it is not possible to formulate workable conditions that achieve this, the PCC must suspend the osteopath's registration.
- 11. Conditions take two forms: they may be restrictive and prevent an osteopath from practising in a certain way or on a particular category of patient; or they may address deficiencies in practice and require the osteopath to undergo additional training. An Order will generally contain a number of conditions, which may be both restrictive and address deficiencies.
- 12. It is important that any osteopath who is subject to an Order clearly understands what they are expected to achieve. The PCC will, therefore, always produce a written Order that clearly identifies the conditions that are to be complied with. The PCC will also explain its reasons for formulating these conditions.

FORMULATING CONDITIONS

Note: the examples given below are not an exhaustive list:

Restrictive conditions

- 13. It is essential that the PCC identifies and expressly states the risk posed by the registrant and satisfies itself that the risk can be mitigated by conditions. If so, restrictive conditions can be used to protect the public and patients while the osteopath continues to practise.
- 14. When formulating restrictive conditions, the PCC will ask itself two key questions:
 - a) What are the risks that need mitigating?
 - b) How are the public and patients protected from these risks?

What are the risks that need mitigating?

- 15. The PCC's findings will usually identify any risks to patients or the public if the osteopath is allowed to continue to practise. For example:
 - If the osteopath lacked the necessary skills to take an adequate case history, then patients could be at risk of receiving unsafe treatment.

How can the patient be protected from these risks?

- 16. It is essential that the identified risks are mitigated by the conditions. For example:
 - Putting the osteopath under supervision while they practice may mitigate the risk identified above.
- 17. If it is not possible to formulate workable conditions that mitigate the identified risks, then the PCC must suspend the osteopath's registration.

Conditions addressing deficient practice

- 18. Formulating conditions to address deficient practice can be difficult and the PCC should ask itself four key questions when undertaking this task:
 - a) What is the problem that needs addressing?
 - b) What does the osteopath need to do to address this problem?
 - c) How should the osteopath demonstrate that they have addressed the problem?
 - d) How should the osteopath's claim that they have addressed the problem be independently verified?

What is the problem that needs addressing?

- 19. The objectives of the conditions always need to be made sufficiently clear for the osteopath to know what is expected of them. The PCC should specify each of the shortcomings identified. It might be, for example, that the PCC has found that:
 - the osteopath's record keeping falls below the standard required
 - the osteopath lacks the necessary skills to take an adequate case history.

What does the osteopath need to do to address this problem?

- 20. Taking each of the identified shortcomings in the relevant case, the PCC should make clear what it expects of the osteopath and explain how the conditions relate to these shortcomings. For example:
 - if the osteopath's record keeping falls below the standard required, they may address this by:
 - undertaking some training in record keeping
 - developing and using a pro-forma patient record card
 - giving themselves more time in between patient appointments to complete their records
 - if the osteopath lacks the necessary skills to take an adequate case history, then they are likely to need to undertake some training to obtain the required skills and understanding.

How should the osteopath demonstrate that they have addressed the problem?

- 21. The PCC will wish to be satisfied that the identified shortcomings have been sufficiently addressed and that the osteopath now practises to the standards required. The PCC should clearly explain to the osteopath what evidence it will wish to see to be satisfied of this. For example evidence of:
 - the successful completion of any training courses
 - an independent audit of their practice or patient records
 - reports from a supervising osteopath
 - details of any self-directed learning and reflective accounts.

How should the osteopath's claim that they have addressed the problem be independently verified?

- 22. It is important that the claims made by the osteopath are independently verified. This can be achieved by, for example:
 - An assessment of clinical performance
 - An independent audit.

- 23. A template has been produced to assist the PCC at hearings and when it is formulating conditions within this framework in individual cases. This template is provided at Annex A.
- 24. Annex B provides sample wording from previous Conditions of Practice Orders. These are provided to assist the PCC when drafting an order.

When formulating conditions, the PCC should ask and answer the following questions.

<u>Please note</u>: the words in italics are examples.

1. What is/are the shortcoming(s) and/or risk(s) that need addressing?

These will likely flow from the findings that have been reached by the PCC in the relevant case.

Shortcoming	Risk
Lack of necessary skills to take an adequate case history	Inadequate case histories being taken

2. What does the osteopath need to do to address the shortcoming(s) and mitigate the risk(s)?

Restrictive conditions will mitigate the risk and educational conditions will address the shortcoming.

Successful completion of an appropriate course or training in the taking and use of case histories.	Practise under supervision

3. How does this protect the public, including patients?

Please explain how the steps proposed at point 2 will protect the public, including patients.

Successful training will bring the osteopaths skills up to the standards required	Patients are protected by the supervision

4. How should the osteopath demonstrate that they have mitigated the risk and/or addressed the shortcoming?

It is important the osteopath knows what evidence they will need to supply to the PCC or GOsC in order to demonstrate that they have complied with the conditions.

Evidence of the successful completion of a course or training in the taking and use of case histories	Report from supervisor

5. How should the osteopath's claims be independently verified?

It is important that the osteopath's claims are independently verified. This might be achieved by:

- Reports on conduct from a supervisor
- Clinical audit
- The passing of an Assessment of Clinical Performance (test of competence).

Shortcoming	Risk
Evidence of the successful completion of a course or training in the taking and use of	Report from the supervisor
case histories	

Sample Wording for Conditions

Provided below are samples of the wording that may be used in Conditions of Practice Orders. This list is provided to guide the PCC and it is by no means exhaustive or comprehensive.

Restrictions	In order to mitigate the risk to the public and patients, it may be necessary to place restrictions on the osteopath's practice
	While in practice you must not carry out, unless directly supervised
	Your practice must be directly/closely supervised by a registered osteopath
	You must not carry out intimate examinations or treatment on patients without a chaperone present
	You must not undertake consultations with male patients/female patients/patients under the age of \mathbf{x}
Supervision	Supervision can be an effective way to protect patients while allowing the osteopath to continue practising.
	You will only practise osteopathy under the supervision, at your own expense, of another osteopath and on patients who have been informed in advance that you are under supervision.
	For the purpose of this requirement, supervision means that the supervising osteopath is on the premises, approves in advance the proposed treatment in the light of the case history and examination findings and has the clinical responsibility for the patient.
	You must furnish the GOsC with the full contact details of a professional colleague who is prepared to monitor your compliance with the conditions and provide a report to the GOsC every x months providing details of any progression or regression in the specified area.
	You must place yourself under the supervision of a registered osteopath, who will on a weekly/monthly basis meet with you to review
	You must place yourself under the supervision of a registered osteopath, who you should meet at intervals of not more than x and allow the supervisor to prepare a report on which should be sent

	to the GOsC. Each report should have specific regard to:
	You must work with your supervisor to formulate a personal development plan, specifically designed to address the deficiencies in the following areas:
Training	Often an element of re-training will be required.
	You should successfully complete a course of training, at your expense, in:
	You should undergo a period of re-training in a teaching clinic run by a Recognised Qualification osteopathic education institution in the UK for a minimum of x hours.
	This training should address the deficiencies identified in the Committee's decision, which are:
	This training should address the following Standards:
Clinical audit	A clinical audit can be useful way to independently verify the osteopath's claim that s/he has complied with the conditions.
	You will be subject to an independent audit/x audits of your practice within x weeks/months
	The first audit will take place x weeks/months following the commencement of this order. Subsequent audits will take place at intervals of x weeks/months, until
	You must advise any patient that you treat that your records will be subject to review and audit by an independent auditor.
	You will co-operate with the auditor and make available whatever information s/he requires.
	You should make all patient records made by you following the commencement of this order available for audit.
	At the/each audit, the auditor will: Observe at least x patient consultations, x of which must be a new patient consultation.

	You should provide this evidence to the GOsC at least one month before the date of the review hearing.
	At the review hearing the Committee will wish to see the following evidence:
	This Order will be reviewed at a hearing before it expires.
Review hearing	In most cases, the PCC will wish to review the order before it expires.
	You should successfully complete, at your own expense, an Assessment of Clinical Performance before x
Test of competence	A assessment of clinical performance (test of competence) is an effective and independent means of ensuring that the osteopath practises to the standards required.
	The auditor will provide a report to the Committee.
	You will be responsible for the costs for the audit, reports and the auditor's attendance at hearings and shall pay any relevant invoices within 28 days of receipt.
	You will provide the auditor at the time of the audit with evidence of:
	The patient record audit will take the following form: Between x to x months of the commencement of this order, the auditor will attend your clinic and will specifically need to see evidence of:
	The natient record audit will take the following form: