

GENERAL OSTEOPATHIC COUNCIL
PROFESSIONAL CONDUCT COMMITTEE

Reference No: 5302

Professional Conduct Committee Restoration Hearing

DECISION

Case of:	Mr Oliver Curties
Committee:	Mr Andrew Harvey (Chair) Ms Pauline Sturman (Lay member) Mr Robert Thomas (Osteopathic member)
Legal Assessor:	Mr Andrew Granville Stafford
Representation for Council:	Mr Andrew Faux
Representation for Applicant:	Ms Aisling Byrnes
Clerk to the Committee:	Miss Sajinee Padhiar
Date of Hearing:	15 April 2026

Summary of Decision

The Committee allowed the application of Mr Oliver Curties ('the Applicant') to be restored to the osteopathic register.

Preliminary Matters

1. The parties were informed that the osteopathic member of the panel, Mr Thomas, and the Applicant were known to each other. Mr Thomas had been a tutor at the European School of Osteopathy from which the Applicant graduated in 2003. They had no relationship beyond that.

2. Neither party objected to Mr Thomas continuing to sit, and the Committee was satisfied that there was no reason for him to recuse himself.
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Decision:

Background

3. The hearing was convened to consider an application made by Mr Oliver Curteis ('the Applicant') under section 8(1) of the Osteopaths Act 1993 ('the Act') for restoration to the osteopathic register. Pursuant to section 8(3) of the Act, the Registrar has referred consideration of the application to this Committee.
4. The Applicant was removed from the osteopathic register following a hearing before the Professional Conduct Committee ('PCC') which commenced in December 2020 to consider an allegation of unacceptable professional conduct. The hearing took place over the course of 19 days and concluded on 18 November 2021.
5. The PCC's decision runs to 116 pages and a public copy is available at:

www.osteopathy.org.uk/news-and-resources/document-library/fitness-to-practise/211118-pcc-final-determination-oliver-curties-redacted-for/

It is not, therefore, necessary to rehearse the full detail of the PCC's decision in this determination. It suffices to say that the PCC considered a large number of allegations relating to the Applicant's conduct over a period of four years relating to the treatment of a female patient ('Patient A').

6. A number of the allegations were found not proved. Allegations that were found proved included inappropriate behaviour towards Patient A including the use of informal or overly familiar language, touching Patient A including turning Patient A's head to force eye contact during a moment of emotional distress, discussing matters of a personal nature with Patient A and not respecting her privacy or dignity.
7. The most serious findings related to the final two appointments in January and February 2020. The PCC concluded that the Applicant had developed a sexual interest in Patient A. The PCC found that:

- he used a vibrating massage tool in a sexually motivated manner on an intimate area (inner thigh), without clear warning or valid consent from Patient A;
 - he used language with sexual undertones (asking her 'how hard' she wanted it to be or whether it felt 'weird') while using the massage tool;
 - he suggested consideration of an open marriage, motivated by a desire to pursue an intimate relationship with Patient A;
 - he kissed Patient A twice, first on her lips and then on her mouth whilst pulling her head back by her hair to face him.
8. The Committee found this conduct to be sexual and sexually motivated, a breach of professional boundaries and not carried out for clinical or therapeutic reasons.
9. The Committee concluded that the facts proved amounted to unacceptable professional conduct, involved serious departures from the Osteopathic Practice Standards and constituted behaviour likely to undermine public confidence in the profession.
10. In considering sanction, the PCC found it to be an aggravating feature that Patient A was vulnerable, as the Applicant knew, and that he had abused his position of trust as an osteopath. The Applicant's actions involved a deliberate course of conduct over an extended period of time.
11. The PCC found that, in light of the insufficient insight and remediation shown by the Applicant, there was a continuing risk to vulnerable patients. It determined that his conduct was fundamentally incompatible with continued registration, and ordered that the Applicant be removed from the register.

The Council's case

12. Mr Faux, on behalf of the Council, directed the Committee to the findings made by the PCC. The PCC had found that the Applicant had transgressed appropriate professional boundaries with a vulnerable patient and had not acted in her best interests. Most seriously, he had engaged in conduct at the end of their treatment relationship which was sexual in nature and was sexually motivated.
13. Mr Faux in particular referred to the following paragraph of the PCC's decision when considering sanction:

'In light of the concerns it retained about the Registrant's level of insight and lack of relevant reflection, the Committee was not persuaded that the harmful attitudes which had led the Registrant to act in a sexualised way with a vulnerable patient had been remedied, even if such attitudinal issues were capable of remediation. The Committee therefore considered that the Registrant presented a continuing risk to other vulnerable patients who might seek his help in a professional context, as a result of those attitudinal problems. In any event, his sexualised conduct and transgression of boundaries in the case of Patient A was, in its view, fundamentally incompatible with his continued registration as an osteopath.'

14. Mr Faux said that the Applicant had been removed from the register on both public protection and public interest grounds. If this Committee was of the view that public protection issues no longer persist, he invited it to very carefully consider the potential reputational impact on the profession of the Applicant being permitted to return to the register.

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The Applicant's case

16. The Applicant's application for restoration was submitted on 22 September 2025. In addition to the information provided as part of the application, the Applicant gave oral evidence to the Committee.
17. Subsequent to his removal from the register, the Applicant has been practising as a 'musculoskeletal practitioner'. He is owner/manager of the Westbourne Osteopathic and Wellness Centre. He described the practice as multi-disciplinary, with four permanent staff and over 25 practitioners with differing specialisms.
18. The Applicant is not currently registered with any other regulatory body. He said he had kept his skills up to date by undertaking CPD, including Teaching Buteyko Breathing, Phlebotomy and Advanced Phlebotomy, plus a mandatory First Aid course. He said:

'I would like to get back on to the Osteopathic register as I am working as a Musculoskeletal Practitioner with patients at the moment, without any opportunity for them to be supported by a governing body or to make complaints. Being registered again will

also help me maintain my own professional standards and education and be encouraged to comply with Osteopathic Practice Standards.'

19. In terms of reflection, the Applicant said:

'In talking to other practitioners, I've reflected on my own communication, boundaries, and consent skills, as well as the bigger picture of trust-building with patients. I've particularly focused on restricting the treatment of friends and family and establishing strengthened, healthy boundaries with all patients. Working on empowering and informing patients to aid the treatment process and increase patient outcomes. No two patients are the same, and no treatments are the same, but the set of boundaries remains constant.'

'Reflecting on past mistakes and old habits, I'm forging new ways of communicating with patients. I'm also learning to set boundaries and refuse or say no to patients and practitioners when correct. I'm working forwards to help myself and other practitioners using the supervision sessions within the clinic. These sessions will help reduce mistakes and hone communication skills and boundaries, particularly around feelings and relationships within the clinic, with practitioners, and with patients, and allow myself and others to ask for help within the professional team.'

20. In conclusion, the Applicant said in his application form:

'This experience marked a significant turning point in my life. The disciplinary process prompted serious reflection on the shortcomings in my former practice, particularly regarding professional boundaries and the standards expected within the osteopathic profession.

As a result, I have made substantial changes to my professional conduct and mindset, and developed a more respectful and conscientious approach to patient care. Since then, I have established and currently manage a thriving clinic that supports a multidisciplinary team, including seven registered osteopaths. While I do not practise as an osteopath, I work as a musculoskeletal practitioner, seeing an average of 35-40 patients per week.

I now believe the time is right - both professionally and personally - to seek restoration to the Register. I value the regulatory framework and ethical standards that define the osteopathic profession, and I am committed to upholding them fully should I be reinstated.

21. In his oral evidence, the Applicant told the Committee that he had worked in caring professions for over 30 years. He started as a health care assistant and then worked as registered nurse, before qualifying as an osteopath in 2003. He opened his own clinic in around 2006 and has owned and operated the Westbourne Osteopathy and Wellness clinic since 2014. He said that he is incredibly proud of the clinic and the people who work there, which include a number of osteopaths as well as other therapists.
22. The Applicant works at the clinic as a musculoskeletal practitioner and his patients are made aware that he is not an osteopath. He explained to the Committee the ways in which he has adapted his approach in relation to obtaining informed consent. He has a strict policy of not treating friends or family. He is insured to carry out manipulations and articulations on patients.
23. In answer to questions put in cross-examination regarding the PCC's findings, the Applicant accepted that he transgressed and that there had been 'red flags' which he had failed to act upon, though he did not distinctly accept that he had acted on sexual impulses. However, when specifically asked by the Committee he said that he unequivocally accepts the findings of the PCC and that he accepts he acted on a sexual impulse. He said that he now thinks he would be able to take mitigating steps which means he is no longer capable of transgression.
24. He told the Committee that, in practical terms, there would be minimal change if he was re-admitted to the register, save that he would be regulated and his patients would have the benefit of being treated by a regulated practitioner.
25. In support of his application, the Applicant provided a character reference from a registered osteopath who has known him for 22 years. She confirmed that she was not aware of any reason why the Applicant should not practise osteopathy with honesty and integrity.
26. In addition, the Applicant provided a number of character references and testimonials from osteopathic colleagues and patients.
27. The Applicant also provided a health reference from his GP who has known him for four years, and who confirmed that he is of good health both physically and mentally. She was not aware of anything that would affect the Applicant's ability to practise as an osteopath.
28. The Applicant also provided an enhanced DBS check, a log of CPD undertaken between January 2022 and August 2025 and a report from an osteopath relating to online learning sessions he provided to the Applicant

in October and November 2020. The report stated that the Applicant had engaged well with the sessions and demonstrated an understanding of the issues raised by the complaint and a commitment to reflective practice.

29. In her submissions to the Committee, Ms Byrnes said that the Applicant was clearly an experienced, passionate and able practitioner. She pointed to the large number of testimonials from colleagues and patients who spoke highly of his personal and professional qualities.
30. Ms Byrnes also highlighted the steps the Applicant had taken to remediate his shortcomings and rehabilitate himself. He had, she said, carefully set out his understanding of what went wrong and that his remediation and rehabilitation had been thoroughly 'stress tested' by this process. She further submitted that a member of the public would be reassured by that process and that his restoration to the register would be in the public interest.

The Committee's approach

31. In undertaking this review, the Committee took into account the oral and documentary evidence and the submissions made on behalf of both parties.
32. The Committee heard and accepted the advice of the Legal Assessor as to the approach it should adopt.
33. The Committee may not grant the application unless it is satisfied of the following.
 - The Applicant satisfies the requirements of section 3 of the Act, namely that:
 - (a) he is of good character. For these purposes, the Applicant is required to provide a character reference from a person who is of standing in the community, who is not a relative and who has known the Applicant for at least four years. A person of standing can include, but is not limited to, a registered osteopath, solicitor, accountant, bank manager, Justice of the Peace, principal of the institution which granted the applicant a relevant qualification or a person authorised by the principal of that institution, Minister of the Church, Rabbi, Imam or other religious official (Rule 4(2) of the Application Rules');

For the purpose of a restoration application the GOsC defines 'good character' as:

'the absence of evidence that a person has committed conduct or behaviour that is inconsistent with the Osteopathic Practice Standards published by the GOsC, or the exercise of the profession of osteopathy; and that he or she has any disposition to commit such conduct or behaviour';

(b) he is in good health, both physically and mentally. A health reference can be given by the Applicant's doctor, provided he is not a relative and has known the Applicant for at least four years (Rule 4(3) of the Application Rules').

- The Committee considers, having regard to the particular circumstances which led to the Applicant being removed from the register, that he is a fit and proper person to practise the profession of osteopathy. The Guidance says the Committee, in determining whether the Applicant is fit and proper person, should consider the following factors:

- a. the reasons of the PCC at the substantive hearing to direct removal

- b. whether the applicant has any insight or remorse into the matters that led to removal

- c. what the applicant has done since his or her name was removed from the Register

- d. the steps taken by the applicant to keep their professional knowledge and skills up to date

- e. the passage of time and evidence of remediation.

34. The Committee had regard to the GOsC's 'Guidance on the arrangements and procedure for restoration hearings' ('the Guidance'). The Guidance says that there is a 'persuasive burden' on the Applicant to satisfy the Committee that he meets these requirements. The Committee may either grant or refuse the application. If it grants it, the Committee may either direct the Registrar to register the Applicant as a fully registered osteopath, or it may impose conditions of practice on the Applicant.
35. The Committee should also take into account the need to declare and uphold proper standards of behaviour and maintain public confidence in the profession, and the principles of proportionality which require the Applicant's interests to be balanced against the interests of the public.

36. The Guidance further says:

‘. . . where the applicant’s substantive fitness to practise hearing involved a complainant, the GOsC will ensure all reasonable and proportionate steps are undertaken to liaise with the complainant to ensure they are provided with information and support in advance of, and following, the applicant’s restoration hearing.’

Decision

37. The Committee had regard to the reference provided by the Applicant's GP, and noted that no issue had been raised in relation to his health. It was satisfied that there were no concerns about the Applicant's physical or mental capability to practise as an osteopath. Furthermore, it was not in dispute that he holds a recognised osteopathic qualification.
38. The key issues for the Committee, therefore, were whether the Applicant is of good character and whether he is a fit and proper person to return to the register.
39. In considering the Applicant's character, whilst the Committee had to take into account the fact that he had been removed from the register in 2021, this had to be weighed against an absence of any other complaints or concerns over a lengthy period in practice. The Committee took into account the testimonials and references provided on his behalf, which clearly show a number of people hold him in high regard.
40. The Committee therefore considered that the Applicant was of sufficiently good character to practise as an osteopath.
41. It went on to consider whether he had demonstrated that he is a fit and proper person to practise osteopathy. It had regard, in particular, to the factors set out in the Guidance.
42. Nearly five years have elapsed since the Applicant was removed from the register. Although he has obviously not been practising as an osteopath in that period, he has continued to be involved in the care of patients. He provided details of the CPD and learning he had undertaken. He had clearly kept his skills and knowledge up to date and the Committee had no concern about his ability to practise safely and effectively as an osteopath.
43. The Committee had regard to the reasons given by the PCC for its decision in 2021. It noted that the PCC had concerns about public protection in light, in particular, of the Applicant's limited insight and remorse.

44. In the Committee's view, those concerns had receded. The Committee found that the Applicant had been able to accept the decision of the PCC and had reflected upon his responsibility for the conduct in question. His insight and remorse had developed to the degree that the Committee was satisfied he no longer presents a risk to patients or the public.
45. The Committee had to consider, additionally, whether the public interest would be met if the Applicant were restored to the register. It had to consider this in the light of the serious findings made by the PCC and the fact that the Applicant had breached his position of trust as an osteopath.
46. The Committee carefully considered how the reputation of the profession would be impacted if the Applicant were returned to the register. The Committee was satisfied that a fully informed member of the public would understand that there is room in a profession for rehabilitation and remediation.
47. The Committee considered that Mr Faux was right to submit that the public interest in this case merited carefully reflection. However, it was satisfied that, in light of the progress made since the 2021 hearing, the public interest does not require refusal of restoration to the register. The Committee, moreover, considered that there was force in the point that a competent and safe osteopath should be able to practise as such, with the benefits both to themselves and their patients that regulation brings.
48.  the Committee considered that, as the Applicant had satisfied the requirements for restoration, it was appropriate to allow the application.
49. Mr Faux had accepted, on behalf of the Council, that this was not a case where imposing conditions on restoration would be appropriate. Given that the Committee had determined that there were no public protection concerns, it agreed that it was inappropriate to impose conditions of practice on the Applicant's registration.
50. Accordingly, pursuant to section 8 of the Act, the Committee directs the Registrar to register the Applicant as a fully registered osteopath.

Under Section 31 of the Osteopaths Act 1993 there is a right of appeal against the Committee's decision.

The Applicant will be notified of the Committee's decision in writing in due course.

All final decisions of the Professional Conduct Committee are considered by the Professional Standards Authority for Health and Social Care (PSA). Section 29 of the NHS Reform and Healthcare Professions Act 2002 (as amended) provides that the PSA may refer a decision of the Professional Conduct Committee to the High Court if it considers that the decision is not sufficient for the protection of the public.