

GENERAL OSTEOPATHIC COUNCIL
PROFESSIONAL CONDUCT COMMITTEE

Case No.s: 851/1528 & 885/1528

Professional Conduct Committee Hearing

DECISION

Case of:	Hector Wells
Committee:	Andrew Harvey (Lay Chair) Balbinder Kaur Johal (Lay member) Caroline Easter (Osteopath member)
Location:	Virtual – by remote video-conferencing (GoToMeeting)
Legal Assessor:	Peter Steel
Representation for Council:	Guy Micklewright
Representation for Osteopath:	In Person
Clerk to the Committee:	Sajinee Padhiar
Date of Hearing:	5 October 2026

Summary of Decision:

The Committee determined that it should revoke the Conditions of Practice Order imposed on 15 October 2025.

Preliminary matters

1. The parties and the Committee introduced themselves.

Declarations

2. Prior to the commencement of a hearing, each member of the Professional

Conduct Committee (PCC) is required to declare that they know of no reason why they should not sit upon the case. This declaration is intended to ensure that fairness is done and is seen to be done to all parties.

3. Each member of the PCC made this declaration.

Bundle

4. The Chair took the parties through the documentation to ensure everyone had the same material.

Background and Summary

5. The Registrant had appeared before the Professional Conduct Committee (the previous Committee) on 9 to 16 December 2024, 7 to 13 May 2015 and 13 to 15 October 2025. The previous Committee found the following allegations against the Registrant proved:

Case 852/1528 (Patient A)

The allegation is that Mr Hector Wells ("the Registrant") has been guilty of Unacceptable Professional Conduct contrary to section 20(1)(a) of the Osteopaths Act 1993, in that:

1. On 19 November 2021 Patient A attended an osteopathy appointment with the Registrant ("the Appointment")

2. During the Appointment, the Registrant:

...

c) Asked Patient A if he could touch Patient A's arm whilst he touched an 'earthing blanket'

d) Asked Patient A to put her legs around him whilst he thrust his hip

...

f) Placed weighted copper bags on Patient A

g) Rolled Patient A's head with the weighted copper bags on her and adjusted her neck

h) Made Patient A uncomfortable by asking what Patient A would do if the Registrant gave Patient A a skull filled with "dog shit" and asked Patient A to take it, or words to that effect

...

k) Failed to adequately discuss treatment options

l) Failed to adequately discuss the risks and benefits of each treatment option

...

4. The Registrant's treatment as set out [in paragraphs 2d), 2f) and 2g)] was

a) Inappropriate

b) Not clinically justified

5. The Registrant failed to obtain valid consent for the treatment set out in paragraphs [2d) and 2g)]

...

Case 885/1528 (Patient B)

The allegation is that Mr Hector Wells ("the Registrant") has been guilty of Unacceptable Professional Conduct contrary to section 20(1)(a) of the Osteopaths Act 1993, in that:

1. Patient B attended one osteopathy appointment on 15 August 2022 with the Registrant ("the Appointment")

2. During the Appointment, the Registrant:

a) Placed a mobile telephone on Patient B's chest and called the mobile telephone from his landline

b) Called his mobile telephone whilst alternately lifting each of Patient B's legs up off the table

c) Held two lots of 1.5 or 2 litre water bottles cable-tied together in between his legs, and lifted Patient B's legs

d) Lifted Patient B's legs without the water bottles in between his legs

e) Put the water bottles on Patient B's chest and lifted Patient B's legs

f) Placed weighted copper bags on Patient B's chest

g) Placed weighted copper bags on Patient B's head

h) Asked Patient B to hold "an earth strap" with both hands over her eyes

i) Pulled Patient B's arm across her chest and manipulated it in different positions

j) Repeatedly engaged Patient B in conversation around her previous trauma

k) Recorded the treatment given to Patient B using CCTV

l) Asked Patient B to record the treatment on her phone

m) Allowed a dog to enter and remain in the treatment room

n) Left the treatment room without informing Patient B

o) Answered a telephone call during the appointment with Patient B

p) Failed to carry out an adequate clinical examination and/or assessment

q) Failed to adequately discuss treatment options

r) Failed to adequately discuss the risks and benefits of each treatment option

3. The Registrant failed to obtain valid consent for the treatment set out in paragraph[s 2f) to 2j)]

4. The Registrant's actions as set out in paragraph[s 2a) to 2k) and 2m) to 2r) above were inappropriate.

6. While the previous Committee concluded in respect of Patient A that allegations 2h) and 4 which it had found proved did not amount to Unacceptable Professional Conduct, it found Unacceptable Professional Conduct proved in respect of its other factual findings and ordered that the Registrant's registration should be made subject to the following conditions of practice for a period of 12 months:

"1. Attend an in-person training course on the issues and principles of informed patient consent and provide evidence of satisfactory completion of the course by way of certificates or similar.

2. Attend a course, online or in-person on the requirements expected of Osteopaths under the General Data Protection Regulation and provide evidence of satisfactory completion of the course by way of certificates or similar.

3. Put in place a policy for compliance with the requirements of the General

Data Protection Regulation, such as is common in other Osteopathic practices. Provide the Committee reviewing this order with a copy of said policy.

4. Write a reflective piece on your understanding of the issues and principles related to obtaining informed consent of patients.

5. Write a reflective piece of the changes you has made to your practice in relation your understanding of the General Data Protection Regulation.

6. You will be responsible for meeting any and all costs associated with complying with these conditions."

Background

7. The background to the previous Committee's decision was as follows.
8. At the relevant times, the Registrant practised as a self-employed osteopath at 54 Bloxham Road in Banbury.
9. On 22 November 2021, the Council received a complaint from Patient A. Patient A said that on 19 November 2021 she had attended an appointment with the Registrant seeking treatment for trauma related to previous sexual abuse and a physical problem with her back.
10. Patient A made a number of allegations that during the appointment on 19th November, the Registrant had acted and spoken to her in a way that suggested a sexualised component to the treatment, which was adjunctive therapy provided by the Registrant rather than osteopathic treatment.
11. There were other elements of the treatment that Patient A was troubled by, including that the Registrant had placed padded weights on her, had asked to touch her arm while she was touching an "*earthing blanket*", and a bizarre conversation in which the Registrant asked what Patient A would do if the Registrant gave Patient A a skull filled with "*dog shit*" and asked Patient

A to take it, or words to that effect.

12. On 16 August 2022, the GOsC received a telephone call from another patient, Patient B, who had attended an osteopathic appointment with the Registrant the previous day. Having reviewed videos of her treatment by the Registrant, she expressed shock at its appearance, which looked to her "*very wrong*".
13. Patient B subsequently submitted a complaint form to the GOsC setting out her concerns in greater detail, which ultimately resulted in the allegations found proved above.

Evidence of the Registrant

14. The Registrant had provided undated reflective statements entitled "Consent: Understanding Rather Than Mere Agreement" and "The Application of UK GDPR to CCTV in an Osteopathic Clinic" in advance of this hearing. He also supplied the following documents:
 - certificates confirming the completion of two 1- hour courses on "GDPR" and "GDPR Awareness" ;
 - a certificate confirming his completion of a 1-day course on "Communication & Consent in Clinical Practice;
 - A form entitled " CCTV GDPR Compliance Review Record" that he had completed in manuscript;
 - A form entitled "Legitimate Interests Assessment" that he had completed in manuscript;
 - A form entitled " Data Protection Impact Assessment (DPIA)" that he had completed in manuscript;
 - A copy of the CCTV notice in his practice;
 - A copy of the submissions on UPC the Registrant had provided to the previous Committee; and
 - A copy of the Registrant's Data Protection Registration Certificate provided by the ICO dated 4 September 2026.
15. The Registrant also gave evidence on affirmation to confirm the content of his reflective statements. He said that there were two elements of reflection

required, about patient consent and about GDPR. As regards the question of consent, the Registrant said that he attended a day course provided by Professor Steven Vogel. He had found the course insightful. While he had always followed a consenting process with all his patients, in the light of the training, the Registrant said that he had amended his approach to consent, including through using a storyboard with patients to explain the process.

16. The Registrant accepted that he had been mistaken in his understanding of GDPR and his use of CCTV. The Registrant said he still intended to use CCTV in his practice, as it was a protective and supportive measure for himself and his patients. The Registrant felt he could not get that level of support from a written document. The relevant condition had been helpful in that it clarified how he should use such data. The Registrant said that it had been difficult for him to admit he was wrong, which he accepted he was, but he had found something useful in the process.
17. The Registrant said that he was currently three years into his CPD cycle and had already exceeded the requirement, having done every possible course within "*our community*".
18. In cross examination by Mr. Micklewright, the Registrant confirmed he was still providing cranial "multi-hands" techniques (referred to in determination as the "Wellsbeing technique") to his patients.
19. As regards treatment options for patients, at the end of the examination and consent discussion the Registrant said he offered them the choice of proceeding with him or not. Having established the patient's preferences, the Registrant said that if they were not happy, he would refer them to another practitioner.
20. As regards his Information Commissioner's Office registration, the Registrant said that he understood his business was compliant. Concerning his continuing use of CCTV, the Registrant said that in the event of complaint, he wanted to be able to provide the Council with the best possible evidence of his treatment. The Registrant added that the CCTV recordings were not generally part of the clinical record unless he needed to refer to them for that purpose and that principally they were for self-protection.

Submissions on behalf of the Council

21. Mr. Micklewright, on behalf of the GOsC, described the background of the

case to the Committee. In particular he drew the Committee's attention to the conditions the previous Committee had imposed on the Registrant's registration, and the evidence the Registrant had supplied in order to meet those conditions.

22. Mr. Micklewright said that the Council did not make any submission that the Registrant had failed to comply with any of the conditions and its stance in this case was neutral, in that he did not make any particular submissions as to the course to be adopted by the Committee. He said that the Committee would be aware of the concerns expressed by the previous Committee about the Registrant's insight and would bear those in mind.

Submissions by the Registrant

23. The Registrant indicated that he had nothing to add to the matters set out in his written evidence and addressed in his answers to Mr. Micklewright.

Determination

24. The Committee listened carefully to the submissions by Mr. Micklewright on behalf of the Council and by the Registrant. It had considered all the written and oral evidence presented to it, including in particular the Registrant's reflective statements and associated documents. The Committee accepted the advice of the legal assessor who reminded them of the procedure in review hearings as set out in Part IV of the General Osteopathic Council (Professional Conduct Committee) (Procedure) Rules Order of Council 2000 (the Rules).
25. The Committee noted in particular that the first decision before it under Rule 49 of the Rules was first to judge whether the Registrant had complied with the Conditions of Practice Order.
26. In the event the Committee were to find that the Registrant had complied with the Order, then it must determine whether to revoke the direction made at the previous hearing, or to vary the conditions if necessary, or to make no further directions and allow the case to conclude on the expiry of the period for which the direction made at the previous hearing applies. Taking

into account the appeal period, the Conditions of Practice Order would expire at the end of the day on 11 November 2026.

27. Having considered all that it had heard and read, the Committee concluded that the Registrant had indeed taken sufficient steps to comply with the Conditions of Practice Order imposed by the previous Committee.
28. The Registrant had: provided evidence of his attendance and successful completion of courses on informed patient consent and on the General Data Protection Regulation ("GDPR"); put in place a policy for compliance with the GDPR broadly consistent with that in place at other osteopathic practices and provided this to the Committee; and had written reflective pieces on informed consent and the changes made to his practice in relation to his understanding of GDPR.
29. The Registrant also helpfully expanded on these matters in his evidence to the Committee. The Committee in particular noted in particular the Registrant's acceptance that it had been useful to go through the process of complying with the conditions and that he was grateful to be shown where he had been wrong. This suggested to the Committee that he had addressed the concerns of the previous Committee that he did not have *"...full insight into the implications that his lack of competence could have on patient safety"*.
30. In any event, Mr. Micklewright had conceded on behalf of the Council that the Registrant had complied with the Conditions of Practice Order.
31. The Committee were reassured that having complied fully with the Conditions of Practice Order, the Registrant had significantly improved his practice and was unlikely ever to repeat such conduct.
32. The Committee therefore concluded that the public interest had been properly served by the Registrant's successful completion of all the conditions set out in the Conditions of Practice Order. Those conditions had now served their purpose and it seemed to the Committee that in the circumstances of this case it would be wrong either to extend them or to let them

expire at the end of the 12 month period directed by the previous Committee.

33. Accordingly, the Committee determined that it was the proportionate and appropriate outcome for it to direct that the Conditions of Practice order imposed on 15 October 2025 be revoked and the case to conclude.

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

The Registrant 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.