

Government Notice No. 126 of 2022

THE ALLIED HEALTH PROFESSIONALS COUNCIL ACT
Regulations made by the Minister, after consultation with the
Allied Health Professionals Council, under section 39 of
the Allied Health Professionals Council Act

1. These regulations may be cited as the Allied Health Professionals Council (Osteopath) Regulations 2022.
2. In these regulations –
“Act” means the Allied Health Professionals Council Act.
3. For the purpose of section 5(d) of the Act, the Code of Practice for an osteopath shall be the Code set out in the Schedule.
4. Every osteopath shall comply with the Code of Practice.
5. (1) Where an osteopath fails to comply with the Code of Practice, the Council may, by notice in writing served on him, require him to comply with the Code of Practice.

(2) An osteopath who fails to comply with the Code of Practice may be called by the Council to explain his non-compliance with the Code of Practice.
6. These regulations shall come into operation on 1 June 2022.

Made by the Minister, after consultation with the Allied Health Professionals Council, on 16 May 2022.

SCHEDULE
[Regulation 3]
CODE OF PRACTICE
OSTEOPATH
PART I – GLOSSARY

1. Definition of osteopathy

(1) (a) Osteopathy is a primary healthcare system, complementary to other medical practices.

(b) An osteopath primarily works through the neuro-musculoskeletal system, mostly on muscles and joints, and pays special attention to how the internal organs affect, and are affected by that system. Relevant psychological and social factors also form part of the diagnosis.

(2) (a) An osteopath considers each person as an individual.

(b) Utilising a highly developed sense of touch, an osteopath identifies problem areas of the body. Using gentle stretching and mobilising techniques as well as manipulating joints, an osteopath works with the body to create the perfect conditions to facilitate the healing process.

2. Definition of osteopath

(1) (a) An osteopath is an allied health professional who specialises mainly in the treatment of the neuro-musculoskeletal system.

(b) An osteopath believes that the body can heal itself if the right combination of manual techniques is used on muscles, joints, ligaments and tendons to bring the body back to a cohesive whole.

(2) (a) An osteopath may treat a wide range of patients, from babies to the elderly.

(b) An osteopath usually treats patients with varying complaints such as headaches, back pain, neck pain, sciatica, repetitive strain injuries (RSI), asthma, joint pain, menstrual problems and pregnancy problems, fatigue, arthritis and sports injuries.

(3) An osteopath ought to have undergone an undergraduate full-time course of at least 4 years or Master's degree in a recognised institution affiliated to the institution's home country's osteopathic council.

3. Definition within the Osteopathic Practice Standards of how the terms “must”, “should” and “may” are used –

- (a) (i) “must” is used where osteopaths are expected to comply;
- (ii) failure to do so may put the osteopath at risk of fitness to practice proceedings;
- (b) (i) “should” is used to indicate how the standard can be met;
- (ii) it is also used where the relevant duty or principle will not apply in all situations or circumstances, or where there may be factors outside the osteopath's control that affect whether or how they comply with the guidance;
- (c) “may” is used in the guidance to indicate that osteopaths have a choice as to whether to carry out certain actions or not;
- (d) “AHPC” is the “Allied Health Professionals Council” and will be referred to as “Council”.

4. Osteopathic Code of Practice

(1) (a) The Osteopathic Code of Practice sets out the standards of conduct, ethics and competence required of osteopaths

to promote patients' health and well-being, protect them from harm, and maintain public confidence in the profession.

(b) The Code of Practice brings together –

- (i) the Code of Ethics; and
- (ii) the Standard of Proficiency.

(2) (a) The Code of Practice provides a framework to support the delivery of ethical, competent and safe osteopathic care.

(b) The standards also play a central role in the requirements for osteopathic training and gaining registration with the Council.

(3) (a) The Code of Practice sets out the expectations of an osteopath as regulated healthcare professionals.

(b) Patients must be able to trust an osteopath with their health.

(4) To justify the trust of a patient, an osteopath must meet the standards expected in the Osteopathic Code of Practice.

(5) An osteopath is personally accountable for his professional practice and must always be prepared to justify his decisions and actions, explaining how he has exercised his professional judgement.

(6) The standards and guidance are arranged in 4 main themes –

- (a) Communication and Patient Partnership;
- (b) Professionalism;
- (c) Safety and Quality in Practice;
- (c) Knowledge, Skills and Performance.

(7) The standards in each theme are listed at the start of each section. They are then reproduced, with, in each case, supporting guidance.

PART II – CODE OF ETHICS

(1) This theme sets out the standards relating to communication, the formation of effective patient partnerships, and consent.

(2) Patients must be at the centre of healthcare and must be given the information that they need in order to make informed choices about the care they receive.

(3) These standards support therapeutic relationships built on good communication, trust and confidence.

Standards

A1. An osteopath must listen to patients and respect their individuality, concerns and preferences. An osteopath must be polite and considerate with patients and treat them with dignity and courtesy.

A2. An osteopath must work in partnership with patients, adapting his communication approach to take into account their particular needs and supporting patients in expressing what is important to them.

A3. An osteopath must give patients the information they want or need to know in a way they can understand.

A4. An osteopath must receive valid consent for all aspects of examination and treatment and record this as appropriate.

A5. An osteopath must support patients in caring for themselves to improve and maintain their own health and wellbeing.

A6. An osteopath must respect his patients' dignity and modesty.

A7. An osteopath must make sure his beliefs and values do not prejudice his patients' care.

A1 An osteopath must listen to patients and respect his individuality, concerns and preferences

1. An osteopath must be polite and considerate with patients and treat them with dignity and courtesy.

2. (1) Poor communication is at the root of most patient complaints.

(2) Effective communication is a two-way exchange, which involves not just talking but also listening with care.

3. An osteopath should be alert to patients' unspoken signals. For example, when a patient's body language or tone of voice indicates that they may be uneasy, experiencing discomfort, or anxious and vulnerable.

4. (1) Patients will come to an osteopath with different experiences and expectations.

(2) An osteopath should try to accommodate their wishes as much as he can without compromising the care he can provide.

(3) If an osteopath cannot accommodate their wishes, he should explain why he is unable to do so.

5. (1) An osteopath must be aware that patients will also have particular needs or values in relation to gender, ethnicity, culture, religion, belief, sexual orientation, lifestyle, age, social status, language, physical and mental health and disability.

(2) An osteopath must be able to respond respectfully and appropriately to these needs.

6. (1) An osteopath must give full attention to his patients and allow sufficient time to deal properly with their needs.

(2) If an osteopath is in sole practice, he should seek to minimise interruptions while he is with a patient.

A2. An osteopath must work in partnership with patients, adapting his communication approach to take into account their particular needs and supporting patients in expressing to him what is important to them

(1) Trust is an essential part of a clinical relationship and requires effective communication between an osteopath and a patient.

(2) An osteopath must care for his patients and do his best to understand their symptoms and support their health.

(3) An osteopath should be sensitive to the specific needs of his patients and should select and utilise effective forms of communication, which take these into account.

(4) An osteopath should share accurate and relevant information with patients and encourage them to ask questions and to take an active part in decisions about their treatment and care.

(5) The most appropriate treatment for patients will sometimes involve –

- (a) referring them to another osteopath or other healthcare professional;
- (b) providing advice on self-care; or
- (c) not treating them at all.

A3. An osteopath must give his patients the information they ask for or need to know in a way they can understand

(1) Before examining or treating a patient an osteopath should ensure that he understands –

- (a) his rights as a patient, including the right to have a chaperone present and to stop the examination or treatment at any time; and
- (b) what he can realistically expect from an osteopath.

(2) An osteopath should discuss care options, encourage patients to ask questions, and deal with these clearly, fully and honestly.

(3) An osteopath should inform his patients of anticipated benefits as well as any material or significant risks associated with the treatment he is proposing and confirm their understanding of the proposed treatment.

(4) Where the osteopath does not propose any treatment, he should explain any potential risks and benefits associated with this.

(5) If an osteopath proposes to examine or treat a patient who has difficulty communicating or understanding, he should take all reasonable steps to assist the patient. For example, he should make use of an appropriate interpreter if the patient communicates in a different language.

(6) If an osteopath is unable to communicate sufficiently with the patient, he should not treat that patient.

A4. An osteopath must receive valid consent for all aspects of examination and treatment and keep appropriate record thereof

(1) Gaining consent is a fundamental part of practice of an osteopath and is both an ethical and a legal requirement.

(2) If an osteopath examines or treats a patient without consent, he may face criminal, civil or Council proceedings.

(3) Gaining consent is an ongoing process.

(4) An osteopath must ensure that a patient is able to make decisions at all stages of his treatment and care and continue to give consent.

(5) For consent to be valid, it must be given –

(a) voluntarily;

(b) by an appropriately informed person; and

(c) with the capacity to consent to the intervention in question.

(4) For a consent to be voluntary, the patient must not be under any form of pressure or undue influence to consent to osteopathic care. An osteopath must ensure that the patient is given the information he requires to so that he may take his own decision and give consent.

(5) An osteopath may, where he suspects that the patient –

(a) is being put under pressure by his employer or relatives to accept osteopathic care; or

(b) might otherwise be vulnerable,

may ask the patient whether his consent is voluntary or not.

(6) (a) A patient needs to understand the nature, purpose, benefits and material or significant risks to him of the examination or treatment proposed.

(b) The patient must be free to either accept or refuse the proposed examination or treatment.

(c) A patient may require time to reflect on what an osteopath has proposed before giving his consent to it.

(7) (a) Where an osteopath simultaneously carries out diagnostic examination and treatment, consent could be obtained by explaining his approach, describing the types of treatment methods

he may use, setting the parameters within which he would work, and explaining how the patient may indicate if he wishes the treatment to stop.

(b) If the patient consents to the osteopath proceeding in accordance with subparagraph (a), the osteopath may start the treatment.

(c) If the patient expresses concern that an osteopath is going outside the agreed treatment plan, the osteopath must stop the treatment.

(8) Deciding that consent has been given, an osteopath should consider whether patients have been given the information they want or need, and how well they understand the details and implications of what is proposed.

(9) It is particularly important for an osteopath to ensure that his patient understands and consents to the proposed examination or treatment of any intimate area before it is administered.

(10) (a) Intimate areas include the groin, pubis, perineum, breast and anus, but this list is not exhaustive, and patients may regard other areas of their body as ‘intimate’.

(b) Some patients may not have come prepared for such a procedure and the osteopath should offer to conduct this at a subsequent appointment and offer a chaperone.

(11) Capacity, in this context, relates to the ability of an individual to understand, retain and evaluate information and to make and communicate a decision regarding their health needs and treatment options.

(12) (a) An osteopath must not assume that a patient lacks capacity solely because of his age, disability, appearance, behaviour, medical condition, beliefs, or because he makes a decision with which the osteopath disagrees.

(b) The starting point should always be a presumption of capacity.

(13) The law recognises that some patients – because of illness, mental capacity or age – are not competent to give consent for a particular examination or treatment. This is because they may not be able to absorb or weigh up the information and make an informed decision.

(14) Where an adult lacks mental capacity, decisions about his treatment must be taken in his best interests and in accordance with relevant legislation.

(15) (a) Note that in the summary below –

“child” means a person under the age of 16 years;

“young person” means a person aged 16 or 17 years.

(b) Obtaining consent for treatment to be given to a child or young person is a complex issue. If an osteopath treats children, he must be aware of the law in this respect.

(16) (a) A child may have the capacity to consent.

(b) An osteopath should apply the law and use his professional judgment in assessing the capacity of every patient under 16 years of age, which will depend on the maturity of the patient and his ability to understand what is involved.

(c) An osteopath is strongly advised to involve a person with parental responsibility for the child when seeking consent.

(17) An osteopath should involve children and young people as much as possible in discussions about their care, even if they are not able to make decisions on their own.

(18) (a) A young person can be treated as an adult and can be presumed to have the ability to make decisions about his own care.

(b) Notwithstanding subparagraph (a), an osteopath should use his professional judgment to assess whether the young person has the maturity and ability to understand what is involved in the treatment the osteopath is proposing for him because his consent must be valid.

(19) (a) An osteopath must record key elements of his discussion with the patient.

(b) The key element should include information discussed, any particular concerns, expectations or requests for information raised by the patient, how he addresses these issues, and any decisions made thereto.

(c) The issues referred to in subparagraph (b) must be recorded in the patient's records.

(20) The validity of consent does not depend on the form in which it is given. Written consent may serve as evidence of consent, but if the elements of voluntariness, appropriate information and capacity have not been satisfied, a signature on a form will not by itself make the consent valid.

(21) (a) Valid consent does not always have to be given in writing by the patient.

(b) However, if an osteopath is proposing a vaginal or rectal examination or technique, written consent must be obtained and kept with the patient records. He may also consider gaining written consent for other procedures, particularly those relating to areas which the patient considers intimate.

Sharing of information

(22) An osteopath must obtain specific consent from patients regarding the sharing of any information about them with others.

A5 An osteopath must support patients in caring for themselves to improve and maintain their own health and wellbeing

Supporting patients in caring for themselves may include –

- (a) providing information on the effects of their life choices and lifestyle on their health and wellbeing;
- (b) supporting decision-making about lifestyle changes where appropriate;
- (c) encouraging and supporting patients to seek help from others, including other health professionals or those coordinating their care, if necessary; or
- (d) respecting patients' decisions about their care, even if he disagrees with those decisions.

A6 An osteopath must respect his patients' dignity and modesty.

1. (1) Patients will have different requirements for maintaining their dignity and modesty during a consultation, and an osteopath must be sensitive to these.

(2) Some of these ideas may have been shaped by a patient's culture or religion, but it is unwise to make assumptions about any patient's ideas of modesty.

2. An osteopath should respect his patients' dignity and modesty by –

- (a) explaining to patients in advance of their first appointment that they may be asked to undress for examination and treatment;
- (b) allowing a patient to undress, and get dressed again, without being observed;
- (c) only observing a patient undressing if he considers this necessary for the purposes of diagnosis or treatment – this

must be explained to the patient and consent obtained; if the patient does not wish to be observed, an osteopath must respect their wishes and find another way of establishing the clinical information he needs; and

- (d) giving patients the option of covering areas of their body that do not need to be exposed for examination or treatment. This can be achieved by providing a suitable gown or cover, asking that they only remove such items of clothing as are necessary for the proposed examination or treatment, or providing the opportunity to get dressed again in full or part as appropriate. If an osteopath feels it is necessary for the examination or treatment that the patients are undressed to their underwear, he should explain this to the patients, and seek their consent.

3. (1) If it becomes necessary during examination or treatment to adjust or remove items of the patient's clothing or underwear, they should be asked to do this themselves.

(2) If it is necessary for an osteopath to assist them, then he must have their consent to do so.

4. If an osteopath needs his patients to remove underwear for an examination or treatment, he should ask them to put their underwear back on at the conclusion of that particular examination or treatment and before he continues with any other procedure.

5. An osteopath must always ask a patient if he would like a chaperone when –

- (a) he examines or treats an intimate area;
- (b) he is treating a patient under 16 years of age;
- (c) he is treating an adult who lacks capacity; or
- (d) he is treating a patient in their home.

6. A chaperone can be –
- (a) a relative or friend of the patient; or
 - (b) a suitable person from an osteopath practice but not his spouse or personal partner.

7. If the patient wishes to have a chaperone and neither the osteopath nor the patient is able to provide one, he should offer to rearrange the appointment.

8. (1) If a chaperone is present, the osteopath should record this in the patient records.

(2) If a patient within one of the categories in paragraph A6 declines the offer of a chaperone, the osteopath should record this in the patient's notes.

A7 An osteopath must make sure his beliefs and values do not prejudice his patients' care

1. (1) The same quality of service and care should be provided to all patients.

(2) It is illegal to refuse a service to someone on the grounds of their age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation.

2. An osteopath should maintain a professional manner at all times, even where a personal incompatibility arises with a patient.

3. (1) An osteopath is not obliged to accept any individual as a patient (subject to the points raised above), but if having done so he feels he cannot continue to give the patients good-quality care to which they are entitled, he may decline to continue treating them.

(2) In that case, the osteopath should try to refer them to another osteopath or healthcare professional where appropriate.

(3) Reasons for not accepting someone as a patient or declining to continue their care might arise where –

- (a) they are or become aggressive;
- (b) they seem to lack confidence in the care the osteopath is providing; or
- (c) they appear to have become inappropriately dependent on the osteopath.

B. Professionalism

(1) An osteopath must act with honesty and integrity and uphold high standards of professional and personal conduct to ensure public trust and confidence in the profession.

(2) The standards in this theme deal with such issues and behaviours, including the establishment of clear professional boundaries with patients, the duty of candour, and the confidential management of patient information.

(3) These contribute to ensuring that trust is established and maintained within therapeutic relationships.

Standards

B1. An osteopath must act with honesty and integrity in his professional practice.

B2. An osteopath must establish and maintain clear professional boundaries with patients, and must not abuse his professional standing and the position of trust which he has as an osteopath.

B3. An osteopath must be open and honest with patients, fulfilling his duty of candour.

B4. An osteopath must have a policy in place to manage patient complaints, and respond quickly and appropriately to any that arise.

B5. An osteopath must respect his patients' rights to privacy and confidentiality, and maintain and protect patient information effectively.

B6. (1) An osteopath must treat patients fairly and recognise diversity and individual values.

(2) An osteopath must comply with equality and anti-discrimination law.

B7. An osteopath must uphold the reputation of the profession at all times through his conduct, in and out of the workplace.

B8. An osteopath must be honest and trustworthy in his professional and personal financial dealings.

B9. An osteopath must support colleagues and cooperate with them to enhance patient care.

B10. An osteopath must consider the contributions of other health-care professionals, to optimise patient care.

B11. (1) An osteopath must ensure that any problems with his own health do not affect his patients.

(2) An osteopath must not rely on his own assessment of the risk to patients.

B12. An osteopath must inform the Council as soon as is practicable of any significant information regarding his conduct and competence, cooperate with any requests for information or investigation, and comply with all regulatory requirements.

B1 An osteopath must act with honesty and integrity in his professional practice

1. A lack of integrity in his practice can adversely affect patient care. Some examples are –

- (a) putting his own interest above his duty to his patient;
- (b) subjecting a patient to an investigation or treatment that is unnecessary or not in their best interests;
- (c) deliberately withholding a necessary investigation, treatment or referral;
- (d) prolonging treatment unnecessarily;
- (e) putting pressure on a patient to obtain other professional advice or to purchase a product;
- (f) recommending a professional service or product solely for financial gain; or
- (g) borrowing money from patients or accepting any other benefit that brings him financial gain.

2. (1) An osteopath should not allow misleading advertising or information about himself and his practice.

(2) An osteopath should make sure that –

- (a) his advertising and promotional material, including website content, is legal, decent, honest and truthful and conforms to current guidance;
- (b) the information he provides about his professional qualifications, practice arrangements and the services he provides is of a high standard and factually accurate; and
- (c) he does not use any title that implies he is a licensed medical practitioner if he is not. If he uses the title

‘doctor’ because he has a PhD, other doctorate or he is qualified as a medical doctor, but does not have a licence to practice, he should make this clear to patients and others.

(4) An osteopath does not generate publicity so frequently or in such a manner that it becomes a nuisance or puts those to whom it is directed under pressure to respond.

(5) (a) An osteopath must have a professional indemnity insurance arrangement which provides appropriate cover in accordance.

(b) The minimum pay out for the cover will be set at one million rupees.

B2 An osteopath must establish and maintain clear professional boundaries with patients and must not abuse his professional standing and the position of trust which he has as an osteopath

1. (1) Abuse of his professional standing can take many forms.

(2) The most serious abuse of an osteopath’s professional standing is likely to be the failure to establish and maintain appropriate boundaries, whether sexual or otherwise.

2. (1) Appropriate professional boundaries are essential for trust and an effective therapeutic relationship between osteopath and patient.

(2) Professional boundaries may include physical boundaries, emotional boundaries and sexual boundaries.

(3) Failure to establish and maintain sexual boundaries may, in particular, have a profoundly damaging effect on the patient, is likely to bring the profession into disrepute and could lead to his removal from the Council’s register.

3. (1) Not all crossing of professional boundaries will necessarily be an abuse of his professional standing.

(2) For example, sometimes it may support empathy and trust with a patient to disclose personal information or to treat a patient as an emergency outside his usual hours.

(3) However, there is a spectrum, and osteopaths must ensure that patients who may be vulnerable are protected at the time and throughout the duration of the professional relationship.

4. (1) An osteopath should be aware of the risks to patients and to himself of engaging in or developing social or commercial relationships with patients, and the challenges which this might present for the therapeutic relationship and to the expectations of both patient and professional.

(2) An osteopath should also be aware of the risk of patients developing an inappropriate dependency upon him, and be able to manage these situations appropriately, seeking advice from a colleague or professional body as necessary.

5. When establishing and maintaining sexual boundaries, an osteopath should bear in mind the following –

(a) words and behaviour, as well as more overt acts, may be sexualised, or regarded as such by the patient. Examples might include –

- (i) sharing inappropriate intimate details about himself;
- (ii) visiting a patient's home without an appointment;
- (iii) making inappropriate sexual remarks to or about patients;
- (iv) unnecessary physical contact.
- (v) an osteopath should avoid any behaviour which may be construed by a patient as inviting a sexual relationship or response;

- (vi) physical contact for which valid consent has not been given can amount to an assault, leading to criminal liability; and
 - (vii) it is his responsibility not to act on feelings of sexual attraction to or from patients;
- (b) if an osteopath is sexually attracted to a patient or if a patient displays sexualised behaviour towards him, he should seek advice from, for example, a colleague or professional body on the most appropriate course of action. If he believes that he cannot remain objective and professional or that it is not possible to re-establish a professional relationship, he should refer his patient to another healthcare practitioner. If referring a patient because of his own sexual feelings towards them, he should endeavour to do so in a way that does not make the patients feel that they have done anything wrong;
- (c) An osteopath must not take advantage of his professional standing to initiate a personal relationship with a patient. This applies even when the patient is no longer in his care, as any personal relationship may be influenced by the previous professional relationship and an imbalance of power between the parties;
- (d) An osteopath must not end a professional relationship with a patient solely to pursue a personal relationship with them if he thinks that a personal relationship with a former patient might develop, he must consider whether this is appropriate. Factors that might impact on this include –
- (i) the nature of the previous professional relationship;
 - (ii) the length of time the professional relationship lasted, and when it ended;

- (e) whether the former patient was particularly vulnerable at the time of the professional relationship, and whether they might still be vulnerable; and
- (f) osteopaths who practice in small communities may find themselves treating friends or family. In such cases, establishing and maintaining clear professional boundaries will help them ensure that their clinical judgement is objective and that they can provide the treatment their patients need. The same level of care should be given to all patients, whether they know them in a social or other capacity, or not.

B3 An osteopath must be open and honest with patients, fulfilling his duty of candour

1. If something goes wrong with a patient's care which causes, or has the potential to cause, harm or distress, he must tell the patient, offer an explanation as to what has happened and the effects of this, together with an apology, if appropriate, and a suitable remedy or support.
2. he must also be open and honest with his colleagues and/or employers, where applicable, and take part in reviews and investigations when requested.

B4 An osteopath must have a policy in place to manage patient complaints, and respond quickly and appropriately to any that arise

1. A complaint is an opportunity to reflect on the communication and standard of care that was given, and it may highlight areas of the practice that could be improved.
2. A complaint which is handled well can also result in a stronger bond of trust between an osteopath and his patient, leading to improved patient care.

3. In the event of a concern being raised, if an osteopath acts constructively, allow patients the opportunity to express their dissatisfaction, and provide sensitive explanations of what has happened and why, he may resolve this at an early stage.
4. An osteopath should provide information to patients about how they can make comments, complaints and compliments about the service they have received.
5. An osteopath should make sure that his staff are familiar with the complaints policy and know to whom they should direct any patient complaint.
6. An osteopath should inform his professional indemnity insurers immediately if he receives a complaint.
7. An osteopath should ensure that anyone making a complaint knows that they can refer it to the Council and provide them with appropriate details explaining the procedure.

B5 An osteopath must respect his patients' rights to privacy and confidentiality and maintain and protect patient information effectively

Confidentiality

Maintaining patient confidentiality includes –

- (a) keeping confidential his patients' identities and other personal information, and any opinions he forms about them in the course of his work;
- (b) ensuring that his staff or anyone else attending his clinic in a professional capacity (for example, students of osteopathy, potential students or peers) keep such information confidential;

- (c) ensuring that the information is kept confidential even after the death of a patient;
- (d) not releasing medical details or information about the care of a patient to anyone – or discussing such information with anyone – including their spouse, partner or other family members, unless he has the patient’s consent to do so;
- (e) taking appropriate measures to ensure that such information is securely protected against loss, theft and improper disclosure; and
- (f) patients are entitled to obtain copies of their notes and, if such a request is made, he must comply with this in accordance with relevant legislation and good practice.

Management of patient information

1. (1) An osteopath should have adequate and secure methods for storing patient information and records.
 - (2) Patient records should be kept –
 - (a) for a minimum of 8 years after their last consultation; and
 - (b) if the patient is a child, until their twenty fifth birthday.
2. (1) An osteopath should have a written policy regarding retention, transfer and disposal of patient information and records, which should include whether it is his practice to retain them beyond 8 years, or, in the case of a child, beyond their twenty fifth birthday.
 - (2) His patients should be made aware of this.
3. (1) An osteopath should make arrangements for records to continue to be kept safely after he finishes practicing, or in the event of his death or incapacity.

(2) Patients should know how they can access their records in such circumstances.

4. An osteopath must comply with the law on data protection and associated legislation.

Disclosure of confidential information

1. There may be times when an osteopath wants to ask his patients if they (or someone on their behalf) will give consent for him to disclose confidential information about them. For example, if the osteopath needs to share information with another healthcare professional.

2. In that case, the osteopath should –

- (a) explain to the patients the circumstances in which he wishes to disclose the information, and make sure they understand what he will be disclosing, the person he will be disclosing it to, the reasons for its disclosure, and the likely consequences;
- (b) allow them to withhold permission if they wish;
- (c) if they agree, ask them to provide their consent in writing or to sign a consent form;
- (d) advise anyone to whom he discloses information that they must respect the patient's confidentiality; and
- (e) disclose only the information he needs to (for example, does the recipient need to see the patient's entire medical history?).

Disclosure of confidential information without consent

1. In general, an osteopath should not disclose confidential information about a patient without their consent. However,

there may be circumstances in which he is obliged to do so. Such circumstances might include –

- (a) if the osteopath is compelled to do so by order of a court or other legal authority. He should only disclose the information he is required to under that order;
- (b) if it is necessary in the public interest. In this case, his duty to society overrides his duty to his patient. This might happen when a patient puts themselves or others at serious risk. For example, by the possibility of infection, or a violent or serious criminal act; or
- (c) if it is necessary, in the interests of the patient's health, to share the information with their medical adviser, legal guardian or close relatives, and the patient is incapable of giving consent.

2. In any such circumstances, osteopaths are strongly advised to seek appropriate legal advice.

3. If an osteopath needs to disclose information without his patient's consent, he should inform the patient, unless he is specifically prohibited from doing so (for example, in a criminal investigation), or there is another good reason not to (for example, where a patient may become violent).

4. Any disclosures of information should be proportionate and limited to the relevant details.

5. If a patient is not informed before disclosure of confidential information takes place, the osteopath should record the reasons why it was not possible to do so and maintain this with the patient's records.

B6 An osteopath must treat patients fairly and recognise diversity and individual values. He must comply with equality and anti-discrimination law

1. An osteopath should be familiar with the requirements that apply to him under equality law.
2. It is illegal to refuse a service to someone on the grounds of their age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation.

B7 An osteopath must uphold the reputation of the profession at all times through his conduct, in and out of the workplace

1. (1) The public's trust and confidence in the profession (and the reputation of the profession generally) can be undermined by an osteopath's professional or personal conduct.
 - (2) He should have regard to his professional standing, even when he is not acting as an osteopath.
2. Upholding the reputation of the profession may include –
 - (a) acting within the law at all times (criminal convictions could be evidence that an osteopath is unfit to practice);
 - (b) showing compassion to patients;
 - (c) showing professional courtesy to those with whom he works;
 - (d) behaving honestly in his personal and professional dealings;
 - (e) maintaining the same standard of professional conduct in an online environment as would be expected elsewhere;
 - (f) not abusing alcohol or drugs;

- (g) not behaving in an aggressive or violent way in his personal or professional life;
- (h) not allowing professional disputes to cause him to fall below the standards expected of him; and
- (i) not falsifying records, data or other documents.

B8 An osteopath must be honest and trustworthy in his professional and personal financial dealings

1. He should charge fees responsibly and, in a way, which avoids bringing the profession into disrepute.
2. It will help an osteopath avoid disputes about fees if he has clear and visible information available on patient fees and charging policies.
3. He should not place pressure on a patient to commit to unjustified treatment.
4. He may recommend products or services to patients only if, in his professional judgement, they will benefit the patient.
5. (1) An osteopath should declare to his patients any financial or other benefit he receives for introducing them to other professionals or commercial organisations.
(2) He should not allow such an organisation to use his name for promotional purposes.
6. He should maintain sound financial records for his practice.

B9 An osteopath must support colleagues and cooperate with them to enhance patient care

1. (1) Where the care of patients is shared between professionals, he should consider the effectiveness of his handover procedures.

(2) Effective handovers can be done verbally, but it is good practice to make a note of the handover in the patient's osteopathic records.

2. (1) An osteopath is responsible for all the staff he employs in his clinic (including administrative staff) and for their conduct, and any guidance or advice they give to patients.

(2) An osteopath should make sure that staff understands the importance of –

- (a) patient confidentiality;
- (b) secure storage and retention of medical records;
- (c) appropriate relationships with patients, colleagues and other healthcare professionals;
- (d) complaints and associated procedures for handling them;
- (e) maintaining a safe work environment;
- (f) health and safety; and
- (g) equality duties and good practice.

3. (1) If an osteopath is responsible for an associate or assistant, he should provide professional support and adequate resources for them so that they are able to offer appropriate care to their patients.

(2) He should not put them under undue pressure or expect them to work excessive hours.

(3) He should not expect them to provide treatment beyond their competence.

4. If his practice employs support staff, he should ensure that they are managed effectively and are aware of any legal obligations necessary to fulfil their role.

B10 An osteopath must consider the contributions of other health-care professionals, to optimise patient care

To achieve this, he should –

- (a) treat other health-care professionals with respect, acknowledging the role that they may have in the care of his patients; any comments that he makes about other healthcare professionals should be honest, valid and accurate;
- (b) understand the contribution of osteopathy within the context of healthcare as a whole;
- (c) follow appropriate referral procedures when referring a patient, or when one has been referred to him; and
- (d) work collaboratively with other healthcare providers to optimise patient care, where such approaches are appropriate and available.

B11 An osteopath must ensure that any problems with his own health do not affect his patients. He must not rely on his own assessment of the risk to patients

If the osteopath knows or suspects that his physical or mental health is impaired in a way that might affect the care he gives to patients, he must –

- (a) seek and follow appropriate medical advice on whether he should modify his practice and in what way;
- (b) if necessary, stop practicing until his medical adviser considers him fit to practice again; and
- (c) inform the Council. If he is exposed to a serious communicable disease, and he believes that he may be a carrier, he should not practice until he has received

appropriate medical advice, and he should follow any advice he is given about suspending or modifying his practice. He should take all necessary precautions to prevent transmission of the condition to patients.

B12 An osteopath must inform the Council as soon as is practicable of any significant information regarding his conduct and competence, cooperate with any requests for information or investigation, and comply with all regulatory requirements

Such information regarding his conduct and competence would include –

- (a) subject to regulatory proceedings by a professional body anywhere in the world;
- (b) being charged with a criminal offence anywhere in the world;
- (c) accepting a police caution; and
- (d) being suspended or placed under a practice restriction by his employer or a similar organisation because of concerns about his conduct or competence.

PART III – STANDARDS OF PROFICIENCY

C. Safety and quality in practice

D. Knowledge, Skills and Performance

C. Safety and quality in practice

(1) Osteopaths must deliver high-quality and safe healthcare to patients.

(2) This theme sets out the standards in relation to the delivery of care, including evaluation and management approaches, record keeping, safeguarding of patients, and public health.

Standards

C1. An osteopath must be able to conduct an osteopathic patient evaluation and deliver safe, competent and appropriate osteopathic care to his patients.

C2. An osteopath must ensure that his patient records are comprehensive, accurate, legible and completed promptly.

C3. An osteopath must respond effectively and appropriately to requests for the production of written material and data.

C4. An osteopath must take action to keep patients from harm.

C5. An osteopath must ensure that his practice is safe, clean and hygienic, and complies with health and safety legislation.

C6. An osteopath must be aware of his wider role as a healthcare professional to contribute to enhancing the health and wellbeing of his patients.

C1 An osteopath must be able to conduct an osteopathic patient evaluation and deliver safe, competent and appropriate osteopathic care to his patients

1. This should include the ability to –
 - (a) take and record the patient's case history, adapting his communication style to take account of the patient's individual needs and sensitivities;
 - (b) select and undertake appropriate clinical assessment of his patient, taking into account the nature of their presentation and their case history;
 - (c) formulate an appropriate working diagnosis or rationale for care and explain this clearly to the patient;

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- (d) develop and apply an appropriate plan of treatment and care; this should be based on –
 - (A) the working diagnosis;
 - (B) the best available evidence;
 - (C) the patient’s values and preferences;
 - (D) the osteopath’s own skills, experience and competence;
 - (e) adapt an osteopathic technique or treatment approach in response to findings from the examination of his patient;
 - (f) evaluate post-treatment response and justify the decision to continue, modify or cease osteopathic treatment as appropriate;
 - (g) recognise adverse reactions to treatment, and take appropriate action;
 - (h) monitor the effects of his care, and keep this under review; he should cease care if requested to do so by the patient or if he judges that care is likely to be ineffective or not in the patient’s best interests; and
 - (i) recognise when errors have been made, and take appropriate action to remedy these, taking account of the patient’s best interests under his duty of candour;
- 2.** Where appropriate, refer the patient to another healthcare professional, following appropriate referral procedures;
- 3.** If providing care outside of his usual practice environment, he should note in his records where this took place and apply the same standards as he would apply in his usual practice or be able to justify why this was not appropriate.

C2 An osteopath must ensure that his patient records are comprehensive, accurate, legible and completed promptly

1. Records help to provide good-quality care to patients and should include –

- (a) date of the consultation;
- (b) patient's personal details;
- (c) any problems, symptoms, concerns and priorities discussed with his patient;
- (d) relevant medical, family and social history;
- (e) his clinical findings;
- (f) the information and advice he provides, including a record of how this is communicated to his patient;
- (g) a working diagnosis and treatment plan;
- (h) records of consent;
- (i) any treatment he undertakes;
- (j) any communication with, about or from the patient;
- (k) copies of any correspondence, reports, test results, etc relating to the patient;
- (l) clinical response to treatment, and treatment outcomes;
- (m) the location of his visit if outside his usual consulting rooms;
- (n) whether any other person was present and their status; and
- (o) where an observer is present (for example, a chaperone, peer observer, osteopathic student or potential student) as well as their status and identity, the osteopath should record the patient's consent to their presence.

2. His notes should be contemporaneous or completed promptly after a consultation (generally on the same day).
3. The information he provides in reports and forms or for any other purpose associated with his practice should be honest, accurate and complete.

C3 An osteopath must respond effectively and appropriately to requests for the production of written material and data

To achieve this, an osteopath will need to –

- (a) produce reports and referrals, and present information in an appropriate format to support patient care and effective practice management;
- (b) develop mechanisms for storing and retrieving patient information (including financial and other practice data) to comply with legal requirements in relation to confidentiality, data processing and storage, and requests for information from patients, healthcare professionals or other authorised parties.

C4 An osteopath must take action to keep patients from harm

1. He must comply with the law to protect children and vulnerable adults.
2. He should have an awareness of, and keep up to date with, current safeguarding procedures, including those relevant to his local area, and follow these if he suspects a child or vulnerable adult is at risk.
3. (1) An osteopath should take steps to protect patients if he believes that the health, conduct or professional performance of a colleague or other healthcare practitioner poses a risk to patients.

(2) An osteopath should consider one of the following courses of action, keeping in mind that his objective is to protect the patient –

- (a) discussing his concerns with the colleague or practitioner;
- (b) reporting his concerns to other colleagues or to the principal of the practice, if there is one, or to an employer;
- (c) if the practitioner belongs to a regulated profession, reporting his concerns to their regulator;
- (d) if the practitioner belongs to a voluntary register, reporting his concerns to that organisation where he has immediate and serious concerns for a patient, reporting the colleague to social services or the police;
- (e) in any circumstances where he believes a patient is at immediate and serious risk of harm, he should consider the best course of action, which may include contacting the police or social services; and
- (f) if he is the principal of a practice, he should ensure that systems are in place for staff to raise concerns about risks to patients.

C5 An osteopath must ensure that his practice is safe, clean and hygienic, and complies with health and safety legislation

1. An osteopath practice premises must be clean, safe, hygienic, comfortable and appropriately equipped.
2. There are detailed requirements in law for health and safety in the workplace.
3. He must have adequate public liability insurance.

4. He should ensure that he has appropriate procedures in place in the event of a medical emergency.
5. He should take all necessary steps to control the spread of communicable diseases.

C6 An osteopath must be aware of his wider role as a healthcare professional to contribute to enhancing the health and wellbeing of his patients

He should be aware of public health issues and concerns and be able to discuss these in a balanced way with patients or guide them to resources or to other healthcare professionals to support their decision-making regarding these.

D. Knowledge, skills and performance

(1) All osteopaths must have the knowledge and skills to support their practice as primary healthcare professionals and must maintain and develop these throughout their careers.

(2) They must always work within the limits of their knowledge, skills and experience. The standards in this theme set out the requirements in this respect.

Standards

D1. An osteopath must have and be able to apply sufficient and appropriate knowledge and skills to support his work as an osteopath.

D2. He must recognise and work within the limits of his training and competence.

D3. He must keep his professional knowledge and skills up to date.

D4. He must be able to analyse and reflect upon information related to his practice in order to enhance patient care.

D1 An osteopath must have, and be able to, apply sufficient and appropriate knowledge and skills to support his work as an osteopath

These should include –

- (a) an understanding of osteopathic philosophy, principles and concepts of health, illness and disease and the ability to apply this knowledge critically, in the care of patients;
- (b) a knowledge of human structure and function sufficient to inform appropriate care;
- (c) a knowledge of pathophysiological processes sufficient to inform clinical judgement and to identify where patients may require additional or alternative investigation or treatment from another healthcare professional;
- (d) an understanding of the psychological and social influences on health sufficient to inform clinical decision-making and patient care;
- (e) an awareness of the principles and applications of scientific enquiry and the ability to critically evaluate scientific information and data to inform osteopathic care;
- (f) an understanding of the principles of biomechanics sufficient to apply osteopathic treatment safely and effectively;
- (g) well-developed palpatory skills;
- (h) an understanding of the characteristics of the normal and abnormal functioning of different body tissues and systems to inform the interpretation of clinical findings;
- (i) the ability to determine changes in health and function by the appropriate use of observation, palpation, motion and clinical evaluation;

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- (j) problem-solving and thinking skills in order to inform and guide the interpretation of clinical and other data and to justify clinical reasoning and decision-making;
 - (k) the ability to protect himself physically and psychologically during interactions with patients to maintain his own health; and
 - (l) the ability to critically appraise his own osteopathic practice. For example, this could be achieved through –
 - (i) self-reflection;
 - (ii) feedback from patients;
 - (iii) feedback from colleagues;
 - (iv) case analysis or clinical audit.

D2 An osteopath must recognise and work within the limits of his training and competence

1. An osteopath should use his professional judgement to assess whether he has the training, skills and competence to treat a patient, seeking advice where necessary.
2. If not, he should consider –
 - (a) seeking advice or assistance from an appropriate source to support his care for the patient;
 - (b) working with other osteopaths and healthcare professionals to secure the most appropriate care for his patient; and
 - (c) referring the patient to another osteopath or appropriately qualified healthcare professional.
3. Working within his competence also applies if the osteopath works within the fields of education and research.

D3 An osteopath must keep his professional knowledge and skills up to date

1. To achieve this, he should –
 - (a) be professionally engaged, undertaking professional development activities and complying with Council requirements regarding continuing professional development;
 - (b) keep up to date with factors relevant to his practice, including –
 - (i) Council’s guidance;
 - (ii) legal requirements or changes to the law in relation to his practice, for example, in relation to data storage, health and safety in the workplace and equality issues; and
 - (iii) research and other relevant developments in healthcare.

D4 An osteopath must be able to analyse and reflect upon information related to his practice in order to enhance patient care

To achieve this, he will need to have sufficient knowledge and ability to collect and analyse information and evidence about his practice to support both patient care and his own professional development.
