

# Good Health *in* Good Hands

uk osteopathy today





This report has been produced by the  
General Osteopathic Council on the occasion  
of the 10th anniversary of statutory regulation  
of osteopathy in the United Kingdom.

Published January 2008

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CLARENCE HOUSE

For more than two decades I have both observed and encouraged the progress of the osteopathic profession in the U.K. It is ten years since the opening of the Statutory Register and, as a result of that, all osteopaths are now regulated in the same way as doctors and dentists, with their own Act of Parliament. I am especially proud to have played a small role in helping to secure the necessary steps towards ensuring that osteopathy became the first complementary medicine profession to achieve statutory recognition.

Over the last few years, the profession has forged ahead in many important areas. For example, all osteopathic schools now offer validated degree courses which are increasingly attracting large numbers of high calibre students that are the life blood of the profession.

The U.K. profession has also been at the forefront of developing pan-European standards on codes of practice and has worked closely with the World Health Organization in their consultation on international standards of basic training and safety in osteopathy. When published, these standards will assist patients in many countries to gain access to high quality osteopathic healthcare.

I am also delighted to see that the profession has responded to the need for a more evidence-based approach to clinical practice and I applaud the work of the National Council for Osteopathic Research, funded by The General Osteopathic Council. Initiatives such as these will undoubtedly enable osteopathy, with its whole person, patient-centred approach to health and wellbeing, to continue to be an integral and important part of the Nation's healthcare system.

I know that in recent times the whole area of professional self-regulation in healthcare has been under intense scrutiny, but the osteopathic profession's commitment to high standards of regulation, training and continuing professional development has stood it in good stead throughout this period. I remain utterly convinced that the profession will continue to develop and build on these standards of excellence in the years ahead.

## foreword



It is at a particularly exciting time that I find myself taking over as the new Chairman of the General Osteopathic Council (GOsC). Ten years after the formation of the Statutory Register, osteopaths are continuing to demonstrate their commitment to effective regulation and all the protection and quality that offers to both the public and the profession.

As a doctor and former Dean of a London medical school, I know how much work is involved in undertaking meaningful curriculum reform, and I have been enormously impressed with the growing collaboration between the Education Committee of the Council and the Osteopathic Educational Institutions. This has ensured that each of the degree courses leading to a recognised qualification is of high quality, and provides the public with the assurance that wherever they consult an osteopath in the UK, the same high standards will apply.

Although a regulator's prime purpose is to protect the public, it cannot do this without professional advice and support, and it is for this reason that the Council itself is established as a collaborative partnership between its lay and osteopathic members. It has again risen to the challenge of setting and maintaining standards of practice, and has been strongly supported by the profession. Adjudication hearings are, and must always remain, entirely fair and impartial, and we are committed to working with the profession and the public to ensure that the whole regulatory system is transparent and 'fit for purpose'.

Evidence-based care is of growing importance, and it is encouraging that in the last few years osteopathy has begun systematically to enhance its commitment to research and audit through the National Council for Osteopathic Research, largely funded by the GOsC. There is a high demand for osteopathic treatment, but still remarkably small numbers of NHS commissioners will allow patients to exercise this choice of treatment within the National Health Service. The growing evidence base for osteopathic treatments should in time encourage commissioners to include osteopathy in the treatment choices available to patients.

If the rate of progress in the next ten years continues at the pace set by the last ten, then the osteopathic profession will play an increasingly significant role in a health-orientated, patient-centred world.

A handwritten signature in black ink, appearing to read 'A. Eddleston', written in a cursive style.

**Professor Adrian Eddleston**  
Chairman, The General Osteopathic Council

January 2008

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“As Chairman of the King’s Fund, I am pleased to endorse the osteopathic profession’s investment in regulation. Patients need to be able to trust those who treat them, and appropriate registration is essential to underpin this trust.”

Sir Cyril Chantler, Chairman, the King’s Fund, January 2008

## osteopathy today

Osteopathy is a flourishing healthcare profession in the UK, with around 30,000 people currently consulting osteopaths every working day.<sup>1</sup> This equates to approximately seven and a quarter million consultations per year.

Regulated by statute under the *Osteopaths Act 1993*, UK osteopaths are subject to a clear structure of training, supervision and professional development. This ensures the highest standards of care for patients.

### **A primary healthcare provider**

Osteopathy is a modern form of healthcare, involving highly skilled diagnosis and treatment, supported by practical lifestyle advice to enable patients to maintain optimum physical health.

Osteopaths play a central role in local communities and are often the first point of contact for patients seeking relief from a range of conditions. In this way, osteopathy fulfils an important role as a source of primary healthcare.

Speed of service delivery by the osteopathic profession is strong: 54% of new patients are seen within one working day subsequent to contacting the osteopath, and 95% are seen within one week.<sup>2</sup>



While osteopaths are a first port of call for the majority of their patients, general practitioners (GPs) increasingly refer patients for osteopathic treatment, most often for musculoskeletal conditions. This increasing cooperation between the two professions offers the patient more healthcare options in a timely way. Early access to appropriate care also represents potential savings for the NHS.

### **The UK profession in profile<sup>3</sup>**

By early 2008, 3,993 osteopaths were entered on the UK Statutory Register of Osteopaths.

The profession attracts male and female practitioners in almost equal numbers and a substantial proportion of osteopaths have already qualified in other healthcare practices, such as medicine, nursing and physiotherapy.

The majority of osteopaths are aged between 31 and 50, although the profession includes all ages between 21 and 70.

The greatest density of practitioners is in the south-east of England, although practice is steadily growing across the whole of the UK and overseas, in response to public demand.

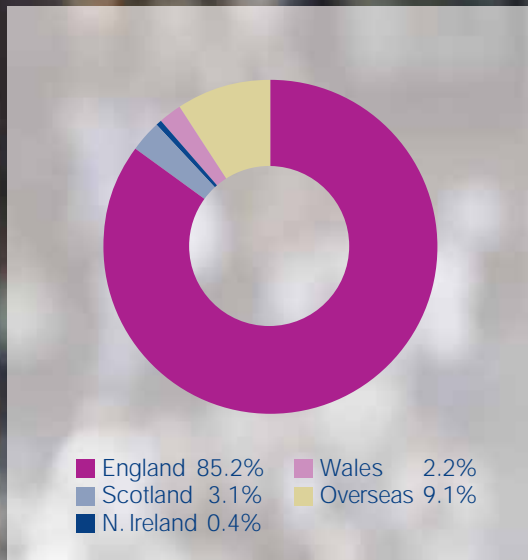
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1 & 2 General Osteopathic Council: Osteopathic Practice Survey – Pilot Study, 2006–07.

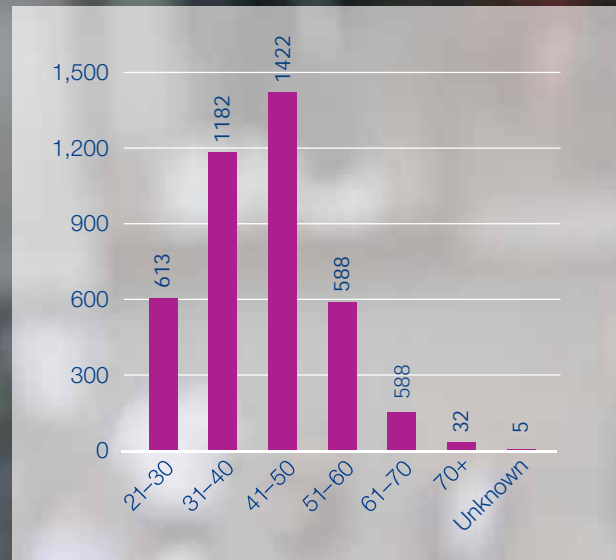
3 UK Statutory Register of Osteopaths, General Osteopathic Council – [www.osteopathy.org.uk/find\\_osteo](http://www.osteopathy.org.uk/find_osteo)



## Osteopathy in the UK – practice demographics



**Location**



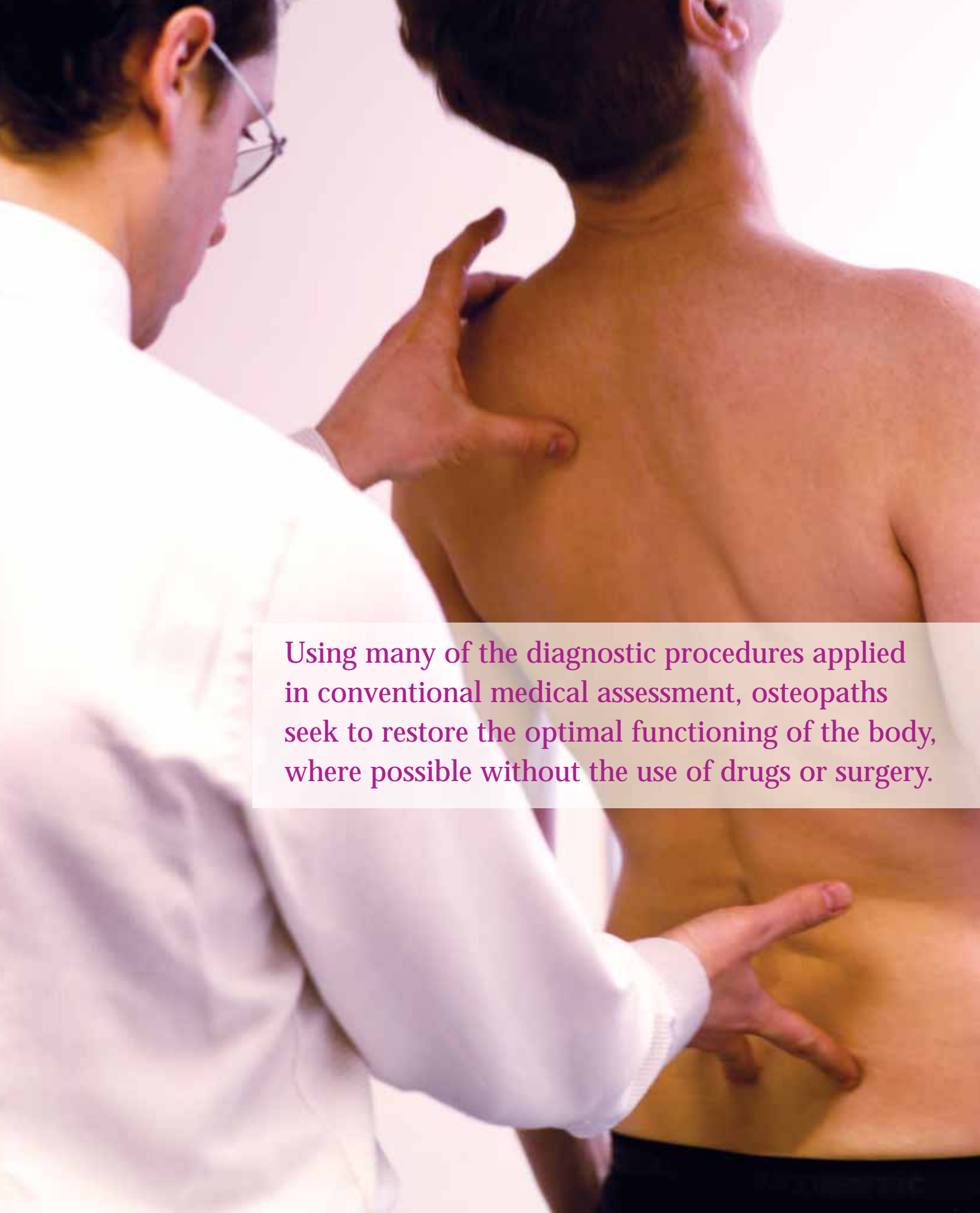
**Age range**

JANUARY	REGISTRANTS	NO. INCREASE	% INCREASE
2000*	1833	-	-
2001*	2988	155	63.01
2002	3089	101	3.38
2003	3300	211	6.83
2004	3452	152	4.61
2005	3610	158	4.58
2006	3731	121	3.35
2007	3845	114	3.06
<b>2008</b>	<b>3993</b>	<b>148</b>	<b>3.70</b>
2009**	4138	145	3.65
2010**	4289	151	3.65

\* Transition to the Statutory Register.

\*\* Growth estimated at 3.65%.

**Growth in the UK osteopathic profession 2000–2010**

A photograph showing a medical professional in a white coat and glasses examining the back of a shirtless male patient. The professional is using their hands to palpate the spine and shoulder blades. The patient's back is the central focus, with the professional's hands positioned on the upper and lower back areas. The background is a plain, light-colored wall.

Using many of the diagnostic procedures applied in conventional medical assessment, osteopaths seek to restore the optimal functioning of the body, where possible without the use of drugs or surgery.

## osteopathy in practice

Osteopathy focuses on the diagnosis, treatment, prevention and rehabilitation of musculoskeletal disorders and the effects of these conditions on patients' general health.

Using many of the diagnostic procedures applied in conventional medical assessment, osteopaths seek to restore the optimal functioning of the body, where possible without the use of drugs or surgery. Osteopathy is based on the principle that the body has an intrinsic ability to heal, and osteopathic care focuses on strengthening the musculoskeletal systems to treat existing conditions and to prevent illness.

Osteopaths' patient-centred approach to health and wellbeing means they consider symptoms in the context of the patient's full medical history as well as their lifestyle and personal circumstances. This holistic approach ensures that all treatment is tailored to the individual patient.

### **Osteopathy: with and without referral**

One in three adults suffers back pain at some point in life<sup>1</sup> and a great many seek relief through osteopathy. Osteopathic care is by no means restricted to back pain, however; osteopaths commonly treat a wide range of other conditions, many relating to postural problems, sporting injuries, muscle and joint deterioration, restricted mobility and occupational ill-health.

Most patients 'self-refer' to an osteopath for treatment. Although referral by a GP is not necessary, patients are encouraged to keep both their GP and osteopath fully informed so that their medical records are current and complete and the patient receives the best possible care from both healthcare practitioners.

Osteopaths are skilled in diagnostic techniques and trained to identify when a patient needs to be referred to a GP. Similarly, GPs refer patients to osteopaths where they believe this intervention would be beneficial. This integrated approach to the provision of care by medical practitioners is increasingly common and reinforces osteopathy's position as a central part of the modern healthcare framework.

### **Visiting an osteopath**

In a first consultation, an osteopath will compile a full case history of the patient's symptoms, as well as information about their lifestyle and diet.

Osteopaths are trained to examine areas of the body using a highly developed sense of touch, called palpation, to determine conditions and identify the body's points of weakness or excessive strain. The osteopath may also observe the patient doing some simple movements to facilitate diagnosis.



Full medical history



Examination and diagnosis



Treatment plan

The patient will usually be asked to remove some of their clothing near the area of the body to be examined. A gown or a towel, and a screen, will be provided to preserve patient modesty.

The osteopath will discuss with the patient the most appropriate treatment plan, estimating the likely number of sessions needed to treat the patient's condition effectively. If the condition is unlikely to respond to osteopathic treatment, the patient will be advised on how to seek further care.

In general, the first treatment lasts about 45 minutes, and subsequent treatments around half an hour. Osteopathy is a 'package' of care that includes skilled mobilising and manipulative techniques, reinforced by guidance on diet and exercise. Key to this is the aim of the osteopath to establish the sound patient-practitioner partnership necessary for ensuring quality care.

## NHS and private treatment

Most osteopaths work in the private sector. Treatment costs vary across the UK, but typically range from £35 to £50 for a 30-minute session.<sup>2</sup>

Osteopathy remains principally a form of private healthcare with more than 80% of patients funding their own treatment. Most major private health insurance policies provide cover for osteopathic treatment. In 2007, private health insurance accounted for 10.4% of osteopathic treatment payment.<sup>3</sup>

Public opinion surveys show that 88% of respondents feel the NHS should provide osteopathic treatment, or believe that it is already doing so.<sup>4</sup> As the profession grows and develops stronger links with the NHS, publicly-funded osteopathic services across the UK are gradually becoming more widespread, allowing wider access to osteopathic care.

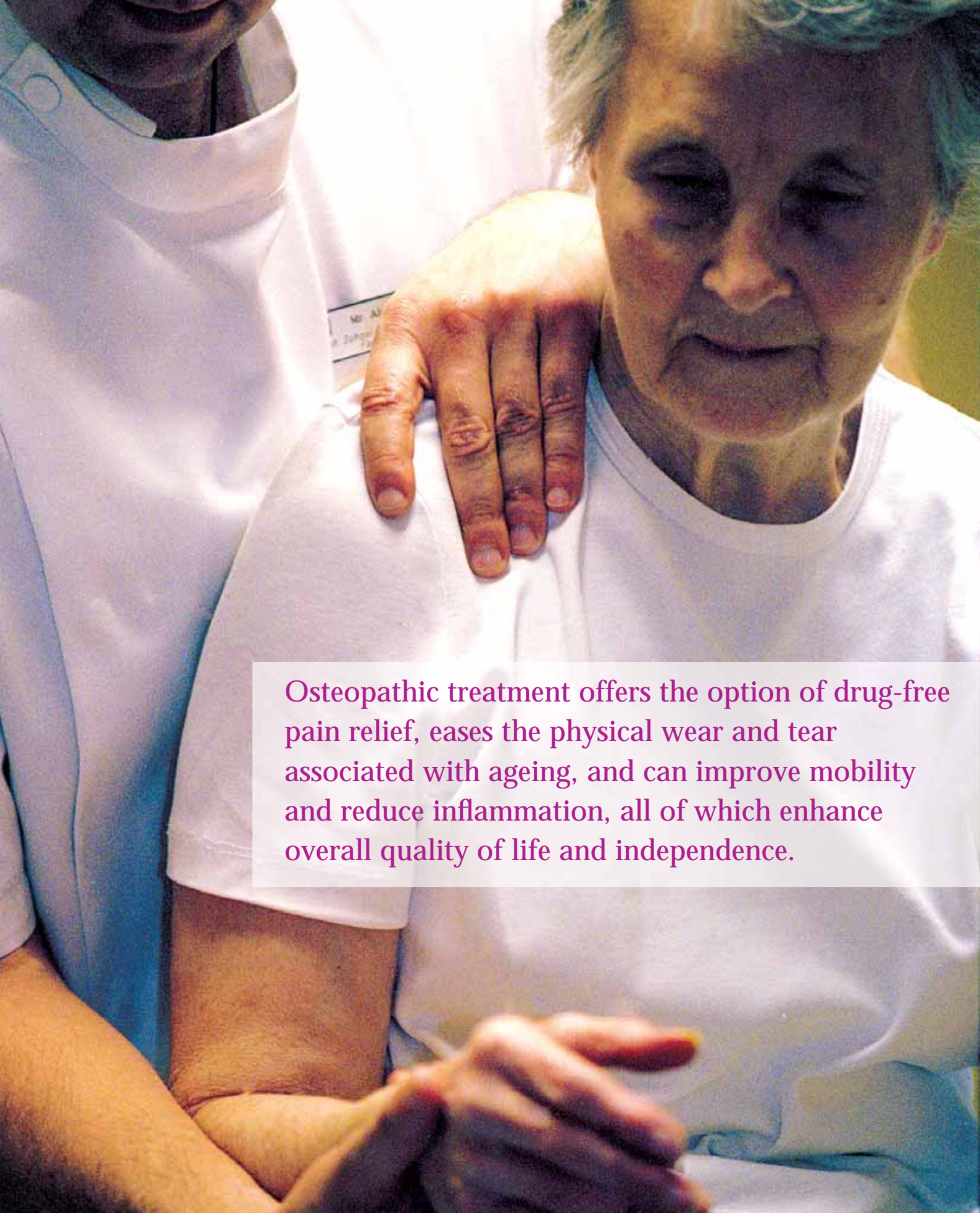
1 European action towards better musculoskeletal health: A public health strategy to reduce the burden of musculoskeletal conditions. The Bone and Joint Decade, Lund, Sweden, 2005.

2 & 3 General Osteopathic Council: Osteopathic Practice Survey – Pilot Study, 2006–07.

4 General Osteopathic Council Public Awareness Survey. The Survey Shop, August 2006.



Osteopaths' patient-centred approach to health and wellbeing means they consider symptoms in the context of the patient's full medical history as well as their lifestyle and personal circumstances.



Osteopathic treatment offers the option of drug-free pain relief, eases the physical wear and tear associated with ageing, and can improve mobility and reduce inflammation, all of which enhance overall quality of life and independence.

## a front-line role in healthcare

The escalating cost to society of musculoskeletal disorders has brought about changes in UK health policy including a widening of services to embrace the skills of all healthcare professionals.

### Osteopathy and the National Health Service

The Musculoskeletal Services Framework,<sup>1</sup> published by the Department of Health in July 2006, notes that 30% of GP patient visits concern musculoskeletal disorders, and it recognises that these conditions can often be resolved quickly and effectively by treatments such as osteopathy.

Osteopathic care already forms part of the healthcare services offered in multidisciplinary Clinical Assessment and Treatment Services (CATS), which are established in some local communities to offer a range of specialised options for patients.

Across the UK a growing number of NHS projects already fund osteopathy as a source of primary healthcare in the public sector. These include the creation of local networks of practitioners, including osteopaths, to whom GPs can refer patients for treatment.

Typical of this development is the Plymouth Primary Care Trust, which, since 2000, has offered a multidisciplinary treatment service for lower back pain. Here osteopaths work alongside GPs and other healthcare professionals to provide early diagnosis and treatment. This service has been able to show that osteopathic treatment can significantly increase patient satisfaction and reduce costs of referrals to secondary care.<sup>2</sup>



## Osteopathy at work

Over 35 million working days are lost each year due to occupational ill-health, and musculoskeletal disorders are the second most common cause of absence from the workplace.<sup>3</sup>

Osteopathy plays an important role in occupational health and has been included in examples of best practice cited by the UK Health and Safety Executive.<sup>4</sup>

Osteopathic advice on manual handling and workstation ergonomics contributes to injury prevention and osteopathic treatment assists a rapid return to work in conditions such as muscle and tendon injuries, repetitive strain injury, neck and low back pain, and sciatica.

## Osteopathy in the community

### Babies and children

Osteopathic care is a choice of many women to relieve pain caused by weight and posture changes during and after pregnancy. Osteopathy also treats problems affecting babies and toddlers, including feeding difficulties, colic, sleep disturbances, and crying and irritability. Older children often benefit from osteopathic treatment of a wide range of common complaints, including ear infections, sinus and postural problems.

### Older people

The integration of osteopathy into NHS primary care makes access possible for older people on limited income.

Osteopathic treatment offers the option of drug-free pain relief, eases the physical wear and tear associated with the ageing, and can improve mobility and reduce inflammation, all of which enhance overall quality of life and independence.

### Sports care

Osteopathic care to treat strains or injuries resulting from sporting activities is used by professional sportsmen and women and amateur sports enthusiasts alike.

Osteopathy can contribute to enhanced performance and facilitate the achievement of long-term training goals – alleviating the symptoms of injury, preventing recurrence and assisting rehabilitation.

### Animals

Animal owners and some vets turn to osteopathy to treat animals with muscle and joint problems. Osteopathic treatment is provided under the supervision of a veterinary surgeon.

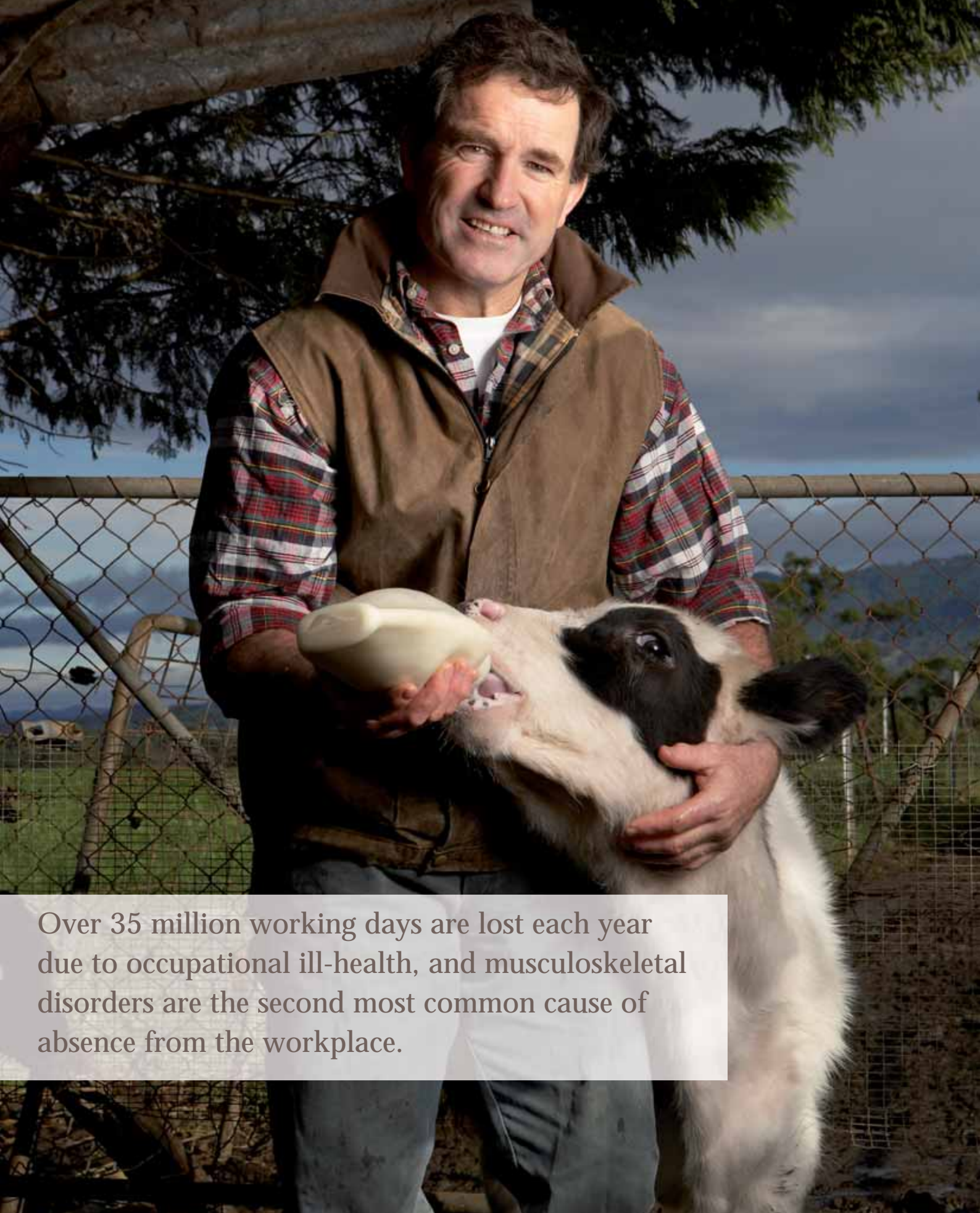
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1 *The Musculoskeletal Services Framework. A joint responsibility: doing it differently.* Department of Health, 2006.

2 Gurry B: Musculoskeletal Medicine in Practice – 5 years of the acute low back pain service for Plymouth. *Journal of Orthopaedic Medicine*, 2006, 28, 26 – 9.

3 *Health and Safety statistics 2006/07*, Health and Safety Executive, 2007.

4 [www.hse.gov.uk/betterbusiness/large/casestudies\\_bpi.htm](http://www.hse.gov.uk/betterbusiness/large/casestudies_bpi.htm)



Over 35 million working days are lost each year due to occupational ill-health, and musculoskeletal disorders are the second most common cause of absence from the workplace.



The function of the General Osteopathic Council is to set standards of best practice and conduct within the profession. It is this body to which patients may turn if they have concerns and complaints about osteopathic care.

## ensuring standards in osteopathy

Osteopathy is a primary care profession regulated by statute.

The title 'osteopath' is protected by law, and only those included on the UK Statutory Register are entitled to practise as osteopaths. Unregistered practice is a criminal offence in the UK.

### Regulating osteopaths

The standards of osteopathic training and practice are set, maintained and developed by the General Osteopathic Council (GOsC), the profession's statutory regulator established under the *Osteopaths Act 1993*. The GOsC works with the public and the profession to promote patient safety by:

- 1 registering qualified professionals
- 1 setting, maintaining and developing standards of osteopathic practice and conduct
- 1 assuring the quality of osteopathic education
- 1 ensuring Continuing Professional Development
- 1 helping patients with concerns or complaints about an osteopath
- 1 removing from the Register any who are unfit to practise.

The GOsC is one of the 9 healthcare regulators in the UK. Its structure and function is consistent with that of the other regulators, which include, for example, the General Medical Council, the General Optical Council and the Nursing and Midwifery Council. Each of these regulators has been set up to protect the public by ensuring that healthcare professionals in their particular sectors meet clearly defined standards.



*Continuing Professional Development for osteopaths*



### Placing patient needs at the heart of regulation

The function of the GOsC is to set standards of best practice and conduct within the profession. It is this body to which patients may turn if they have concerns and complaints about osteopathic care.

Osteopaths and lay people serve on the General Council in equal numbers. This helps to ensure that the interests of patients, and the wider public, are at the forefront of the regulation of osteopathy.

### The UK Statutory Register of Osteopaths

The UK Statutory Register of Osteopaths provides detailed information about osteopaths. This resource is freely available to members of the public either online or via a telephone information service operated by the General Osteopathic Council.

To register, an osteopath will need:

- 1 a recognised qualification gained from a GOsC-accredited course
- 1 a reference of good character
- 1 an up-to-date Criminal Records Bureau (CRB) check
- 1 evidence of good health provided by a GP
- 1 professional indemnity insurance cover to a minimum value of £2.5 million.

Osteopaths are required to renew their licence to practise annually, and as part of this process the GOsC checks that they have current professional indemnity insurance, remain in good health and of good character, and have met mandatory continuing professional development requirements.

## The Code of Practice for Osteopaths

Osteopaths abide by a strict Code of Practice. Updated regularly, the Code reflects changes in healthcare standards and regulation, and the need for guidance in complex areas of practice.

Guidelines in the Code deal with a broad range of areas including the osteopath's duty of care, relationships with patients, obtaining consent, examining patients and patients' rights.

The Code forms part of the GOsC's Fitness to Practise guidance. This outlines the standards of conduct and practice that osteopaths should observe. Failure to comply with the Code may result in Fitness to Practise proceedings being brought against an osteopath.

The Code is available from the General Osteopathic Council, or can be accessed online on the GOsC website.<sup>1</sup>

## The profession's Standard of Proficiency

The Standard of Proficiency sets out the standards required of practising osteopaths. These include knowledge of the safe and competent practice of osteopathy, professional ethics, and after-care evaluation.

The Standard of Proficiency is available from the General Osteopathic Council or can be accessed online on the GOsC website.<sup>2</sup>

## Supporting patients

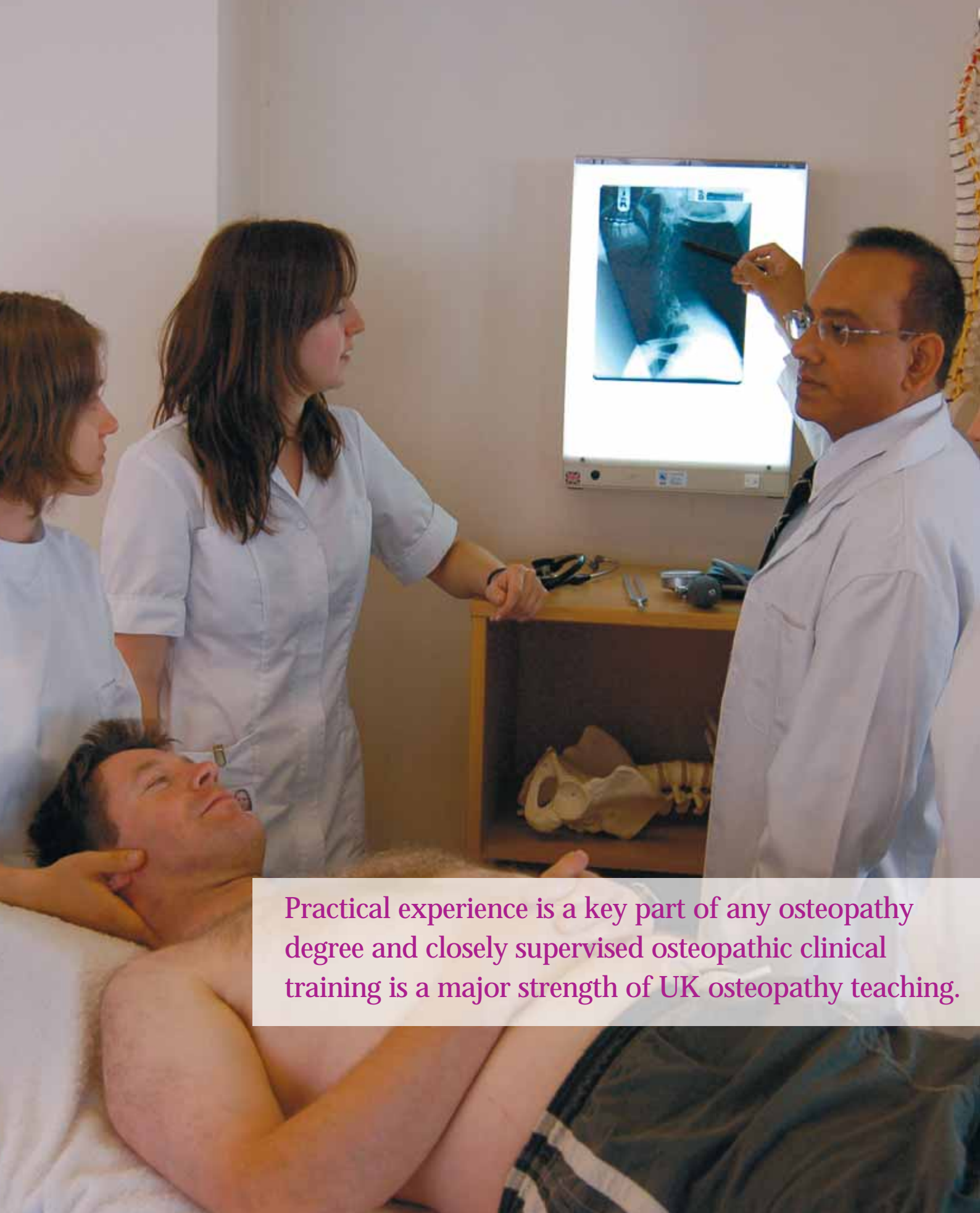
All osteopaths are expected to have formal complaint procedures in place in their practice to address patient concerns.

If a patient has concerns about the competence or the professional conduct of an osteopath and has been unable to resolve the issue satisfactorily with the osteopath, the GOsC will advise on the next steps to take under a formal complaints procedure.

A voluntary identity card has been introduced for osteopaths, providing patients with reassurance that they are being treated by a regulated professional.

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- 1 Code of Practice. General Osteopathic Council, May 2005 – [www.osteopathy.org.uk/about\\_gosc/about\\_standards.php](http://www.osteopathy.org.uk/about_gosc/about_standards.php)
  - 2 Standard 2000 – Standard of Proficiency. General Osteopathic Council, March 1999 – [www.osteopathy.org.uk/about\\_gosc/about\\_standards.php](http://www.osteopathy.org.uk/about_gosc/about_standards.php)





Practical experience is a key part of any osteopathy degree and closely supervised osteopathic clinical training is a major strength of UK osteopathy teaching.

# lifelong learning for osteopaths

The rigorous education, training and continuous professional development of osteopaths ensure that practitioners deliver an excellent standard of healthcare.

## Undergraduate training in osteopathy

Currently there are eight education institutions offering training in osteopathy. Undergraduate students follow a four or five-year degree course combining academic and clinical work. Qualification generally takes the form of a bachelor's degree in osteopathy – a BSc (Hons), BOst or BOstMed – or a master's degree in osteopathy (MOst).

Practical experience is a key part of any osteopathy degree and closely supervised osteopathic clinical training is a major strength of UK osteopathy teaching. Experience in observing and treating patients develops students' manual skills, as well as cultivating essential interpersonal skills. Students also attend clinics in the community, treating patients who would normally find it difficult to access osteopathic care.

Osteopathy attracts a wide range of students from diverse backgrounds. There are nearly as many mature students taking up a career in osteopathy as there are students coming to osteopathy straight from school. Educational institutions offer both full-time courses and their part-time equivalent.

Osteopathy training has generally taken place within private educational institutions which have links with universities. In the past, public funding for osteopathy training places has not been readily available, however this is gradually changing, thereby potentially allowing greater access to osteopathic training for students from a variety of backgrounds.

## A culture of continuous learning

Many osteopaths continue their studies after graduating. There are now postgraduate courses allowing for further study in a range of areas such as sports care or the osteopathic treatment of children.

Osteopaths are required to update their training throughout their working lives. It is mandatory for a practitioner to complete at least 30 hours of Continuing Professional Development per year, which must include learning with others. Since many osteopaths operate as sole practitioners, this form of group professional development allows them to associate with other professionals and exchange information and expertise.



A culture of continuous learning

*The Quality Assurance Agency for Higher Education (QAA) Osteopathy Benchmark Statement. This Benchmark outlines the exacting standards required for osteopathic training.*



## Maintaining standards of excellence

Osteopathy courses must be accredited as Recognised Qualification courses by the General Osteopathic Council (GOsC), and are validated by UK universities.

The GOsC has worked in collaboration with the Quality Assurance Agency for Higher Education (QAA), the British Osteopathic Association and the Osteopathic Educational Institutions to develop the Osteopathy Benchmark Statement. This Benchmark outlines the exacting standards required for osteopathic training.<sup>1</sup>

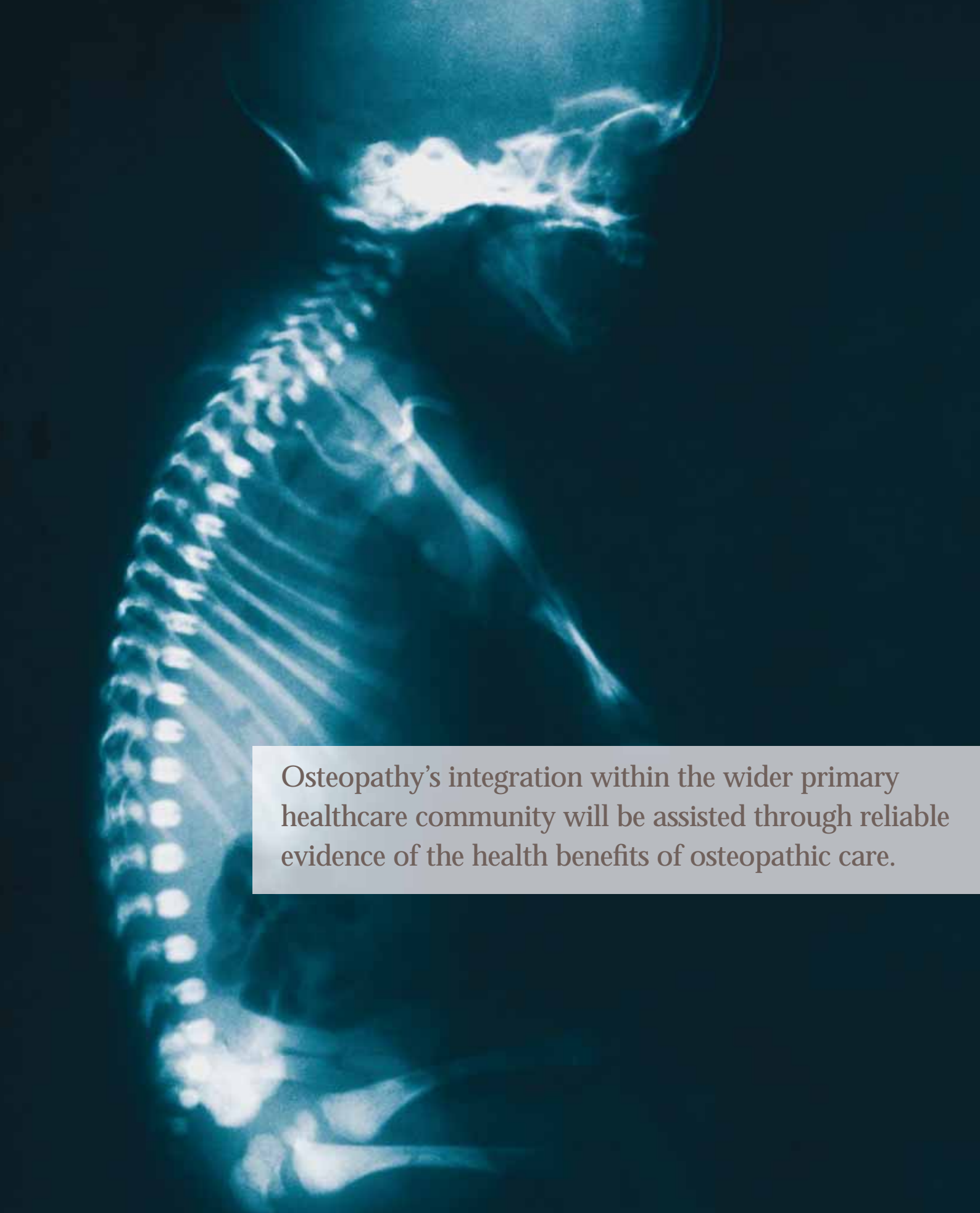
The QAA reviews the training standards of Osteopathic Educational Institutions on behalf of the GOsC. It assesses courses against the best practice standards described in the Osteopathy Benchmark and the profession's Standard of Proficiency, which outlines the academic and clinical capability expected of qualifying osteopaths in the UK.

This continual assessment demonstrates a commitment to best practice, and the involvement of an independent agency such as the QAA ensures the continued collaboration between osteopathy and the wider academic world.

<sup>1</sup> Subject benchmark statement: Osteopathy. Quality Assurance Agency, 2007 – [www.qaa.ac.uk/academicinfrastructure/benchmark/statements/Osteopathy07.pdf](http://www.qaa.ac.uk/academicinfrastructure/benchmark/statements/Osteopathy07.pdf)



The rigorous education, training and continuous professional development of osteopaths ensure that practitioners deliver an excellent standard of healthcare.



Osteopathy's integration within the wider primary healthcare community will be assisted through reliable evidence of the health benefits of osteopathic care.

## evidence in practice

It is recognised that the progress of osteopathy's integration within the wider primary healthcare community will be assisted through further reliable evidence of the health benefits of osteopathic care.

### Osteopathy's independent research body

In 2003, the National Council for Osteopathic Research (NCOR) was established to foster research and raise the profile of osteopathy research findings.

Based at the Clinical Research Centre in the School of Health Professions at the University of Brighton, NCOR is funded by stakeholder groups: the General Osteopathic Council, the British Osteopathic Association, and all of the UK osteopathic educational institutions.

NCOR's governing council includes representatives from these stakeholder groups and two further co-opted members, representing both private and NHS practitioners.

### Assuring quality care

NCOR's strategic plan for developing osteopathic research sets out the following key objectives:

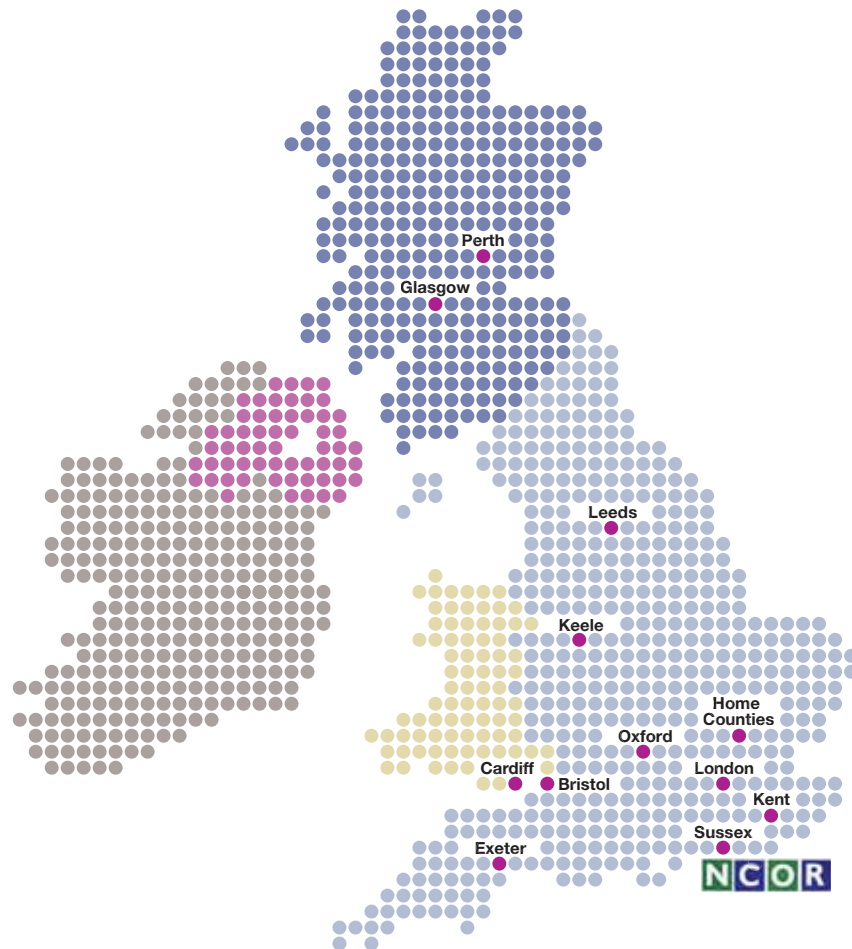
- 1 *Establish and develop a comprehensive information resource.* To promote a mutual research dialogue within the osteopathic profession and the wider healthcare arena.
- 1 *Create a research forum.* To develop and nurture a pan-professional osteopathic research culture, facilitating the link between research and practice and identifying national research priorities. NCOR has established a well-coordinated network of research hubs throughout the country to help osteopaths and researchers exchange and share data. A major data collection exercise is already under way to build a comprehensive overview of osteopathy practice in the UK.
- 1 *Code of good research practice.* NCOR has developed a Research Governance Framework to provide osteopathic educational institutions and practising osteopaths with clear ethical guidelines on conducting research. This links with existing frameworks already developed by the NHS and independent research funding councils.
- 1 *Raise the profile of osteopathy research.* NCOR aims to make osteopathic research findings more readily available to osteopaths, medical researchers, policymakers, the NHS and others. One channel is the quarterly *International Journal of Osteopathic Medicine*,<sup>1</sup> which publishes academic research from around the world.
- 1 *Increase collaboration with other health bodies.* To generate collaborative research between healthcare professions with a view to improving teaching, learning and patient care.



International Journal of  
Osteopathic Medicine

- 1 *Improve the quality and quantity of osteopathic research outputs.* NCOR is working to secure funding from health bodies to support postgraduate osteopathic research.
- 1 *Disseminate research information.* NCOR aims to raise awareness of osteopathic research, online and in print, by reviewing research outcomes and highlighting research opportunities and regional osteopathic research hub activity.
- 1 *Source funding.* Funding of private sector research is scarce. NCOR seeks to source funding from private health insurers, healthcare charities and other stakeholders, to enhance osteopathic practice in primary healthcare.

1 *International Journal of Osteopathic Medicine* (ISSN 1746-0689). Elsevier – [www.intl.elsevierhealth.com/journals/ijos](http://www.intl.elsevierhealth.com/journals/ijos)



## uk osteopathy – crossing borders

UK standards in osteopathy are respected around the world. The profession is in a strong position to offer leadership and share knowledge within the international osteopathic community and across healthcare disciplines.

### Europe-wide patient protection

Increasingly, both patients and healthcare professionals are moving within the European Union to live and work. Across Europe, standards of osteopathic care vary, and this has created a need for greater patient protection through proper regulation and high standards of treatment.

The General Osteopathic Council (GOsC) has been instrumental in forming and progressing the Forum for Osteopathic Regulation in Europe (FORE). FORE aims to promote best practice and facilitate the development of regulatory mechanisms so that patients may have confidence in osteopathic care wherever in Europe they receive it.

FORE brings together national registers in osteopathy from across Europe to promote information exchange, and to help osteopathic practice achieve recognition and move to robust self-regulation in all European countries.

FORE's ultimate goal is to develop a consensus in Europe on standards of education, training and practice in osteopathy. Using the UK profession's Code of Practice as a template, FORE has agreed a *European Framework for Codes of Osteopathic Practice*,<sup>1</sup> and has published an agreed *European Framework for Standards of Osteopathic Practice*,<sup>2</sup> based on the UK's Standard of Proficiency.

The GOsC also works closely with the Alliance of UK Health Regulators on Europe (AURE),<sup>3</sup> an organisation campaigning for better European healthcare standards in the interests of patients.



Exchanging information



Building consensus



*FORE's European Frameworks for Codes and Standards of Osteopathic Practice*

## International standards of care

The UK osteopathic profession's work in raising standards overseas extends beyond Europe.

This has involved developing basic training guidelines around the globe, and the GOsC is consulted by the World Health Organization (WHO) as an authority on training and safety in osteopathy.

The GOsC also works in cooperation with institutions or bodies in countries outside of Europe looking to set standards of osteopathic care. Working with osteopathic colleagues in Australia and New Zealand, there is a move towards mutual recognition of qualifications. Contact with partner organisations, such as the Osteopathic International Alliance, helps to promote knowledge-sharing and harmonise practices in osteopathy worldwide.

1 *European Framework for Codes of Osteopathic Practice*, Forum for Osteopathic Regulation in Europe, 2007.

2 *European Framework for Standards of Osteopathic Practice*, Forum for Osteopathic Regulation in Europe, 2007.

3 [www.aure.org.uk](http://www.aure.org.uk)

## a profession fit for the future

Osteopaths share knowledge, resources and best practice by maintaining close contact with each other. The result of this willingness to teach and learn by association is a vibrant community greater than the sum of its parts.

### Regulation

As the statutory regulator for osteopaths, the **General Osteopathic Council (GOsC)** seeks to work with the osteopathic community in the development of standards. The GOsC encourages best practice through close engagement with osteopaths, using a variety of channels, including the professional journal *The Osteopath* and a dedicated online resource for registrants – the ‘o zone’. The GOsC actively facilitates feedback from practitioners through direct consultations and regional roadshows and this is central to the development of the profession.

### Representation

The **British Osteopathic Association (BOA)** is the primary organisation representing the interests of osteopaths and advancing osteopathic practice in the UK. The BOA represents osteopaths’ views to the Regulator, local and national Government, the NHS, other professional bodies, and to the general public.

A strong **Regional Communications Network** serves as a mechanism for networking the profession at grassroots level. Currently there are at least 30 regional osteopathic societies connecting osteopaths across the UK and Ireland. Through the network, osteopaths share experience, identify priorities for development, and foster professional cohesion.



Recognition



Education



Representation



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## Education and training

Osteopathy is a subject that balances a tradition of distinguished academic learning with a clear focus on practical application.

The main source of osteopathic learning in the UK comes from the **Osteopathic Educational Institutions (OEIs)** where osteopaths undertake their full training prior to registration. The OEIs, the Regulator (the General Osteopathic Council) and professional representative bodies work closely together to develop best practice in osteopathic education, training and care.

## Research and knowledge sharing

The **National Council for Osteopathic Research (NCOR)** promotes a research culture within UK osteopathy, not least by means of 'research hubs' located across the UK and Ireland, and fosters international research links.

In addition, every osteopath registered in the UK receives the *International Journal of Osteopathic Medicine*,<sup>1</sup> which reflects the latest research and developments in practice.

## Funding education and research

The **Osteopathic Educational Foundation (OEF)** was founded in 1947 to raise and administer funds in order to assist and support all aspects of osteopathic education, development, research and practice for the benefit of the public. The Foundation has recently embarked upon a process of redevelopment which will enable it to play a more central role within the profession. In furtherance of its primary objectives, the OEF will form closer relationships with appropriate bodies to fund and facilitate osteopathic research and scholarship.

Osteopathic Educational Foundation: Registered UK Charity no. 313785

## International community

The osteopathic community spans borders and crosses continents. The profession is actively engaged in a range of organisations committed to promoting dialogue, knowledge-sharing and patient protection throughout the world. Among others, these include the **Forum for Osteopathic Regulation in Europe (FORE)** and the **Osteopathic International Alliance (OIA)**.

## Recognising osteopathy's heritage

The **National Osteopathic Archive (NOA)** has been established to preserve and promote the historic development of osteopathy, which has been practised in the UK for over a hundred years. To be launched in 2008, the Archive represents a rich resource for the osteopathic profession worldwide, and for the public and wider education programmes.

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1 *International Journal of Osteopathic Medicine* (ISSN 1746-0689), Elsevier – [www.intl.elsevierhealth.com/journals/ijos](http://www.intl.elsevierhealth.com/journals/ijos)

## osteopathy – contact information



GENERAL OSTEOPATHIC COUNCIL

### General Osteopathic Council

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### National Council for Osteopathic Research

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Fax: +44 (0)20 7357 0011  
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### Forum for Osteopathic Regulation in Europe

FORE Secretariat  
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176 Tower Bridge Road  
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Tel: +44 (0)20 7357 6655 x245  
Email: [foresecretariat@osteopathy.org.uk](mailto:foresecretariat@osteopathy.org.uk)  
[www.forewards.eu](http://www.forewards.eu)



### Osteopathic International Alliance

OIA Secretariat  
142 E Ontario  
Chicago IL 60611  
USA  
Phone: +1 312 202 8184  
Fax: +1 312 202 8484  
Email: [oia@osteopathic.org](mailto:oia@osteopathic.org)  
[www.oialliance.org](http://www.oialliance.org)

## Osteopathic Educational Institutions



### British College of Osteopathic Medicine

Lief House  
120–122 Finchley Road  
London NW3 5HR  
Tel: +44 (0)20 7435 6464  
Fax: +44 (0)20 7431 3630  
Email: info@bcom.ac.uk  
www.bcom.ac.uk



THE BRITISH SCHOOL OF OSTEOPATHY

### The British School of Osteopathy

275 Borough High Street  
London SE1 1JE  
Tel: +44 (0)20 7407 0222  
Fax: +44 (0)20 7089 5300  
Email: info@bso.ac.uk  
www.bso.ac.uk



### The College of Osteopaths

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Borehamwood WD6 2DG  
Tel: +44 (0)20 8905 1937  
Fax: +44 (0)20 8953 6140  
Email: admin@collegeofosteopaths.ac.uk  
www.collegeofosteopaths.ac.uk



### European School of Osteopathy

Boxley House, The Street  
Boxley, Maidstone  
Kent ME14 3DZ  
Tel: +44 (0)1622 671 558  
Fax: +44 (0)1622 662 165  
Email: info@eso.ac.uk  
www.eso.ac.uk

### The College of Osteopaths at Keele University

The Osteopathy Programme  
School of Health and Rehabilitation  
MacKay Building  
Keele University  
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### The London College of Osteopathic Medicine

8–10 Boston Place  
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### London School of Osteopathy

50–60 Nelson Street  
London E1 2DE  
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www.lso.ac.uk



### Oxford Brookes University Programme of Osteopathy

School of Health and Social Care  
Jack Straw's Lane  
Marston Road  
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Email: osteopathy@brookes.ac.uk  
www.brookes.ac.uk



### Surrey Institute of Osteopathic Medicine (SIOM) at NEScot

NESCOT  
Reigate Road  
Ewell, Epsom  
Surrey KT17 3DS  
Tel: +44 (0)20 8394 1731  
Email: info@nescot.ac.uk  
www.nescot.ac.uk

Applications to the GOsC for Recognised Qualification (RQ) status for these two osteopathic courses are at an advanced stage. Until final approval is granted, graduates of these courses will not be eligible to register with the GOsC and practise as osteopaths in the UK:

### Leeds Metropolitan University

Osteopathy  
Faculty of Health  
Leeds Metropolitan University  
Civic Quarter  
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www.leedsmet.ac.uk/health/osteopathy





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