



iO
THE INSTITUTE
of OSTEOPATHY

Quality in Osteopathic Practice

A report by the Institute of Osteopathy

This document brings together existing research on the patient experience, clinical effectiveness and safety of osteopathic practice.

We would like to extend our sincere thanks to the National Council for Osteopathic Research (NCOR) for their assistance in creating this document.



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INTRODUCTION

About Quality in Osteopathic Practice

The Quality in Osteopathic Practice report brings together existing research on the patient experience, clinical effectiveness and safety of osteopathic practice.

It is relevant to anyone who has an interest in finding out more about osteopathic practice and the evidence there is available. This includes:

- Members of the public and patients of osteopaths
- The NHS and associated organisations
- Other private and NHS commissioners of service
- Other healthcare colleagues

This document is also designed to be a resource for the osteopathic profession itself, to signpost best practice and inspire excellence.

Each of the research articles referenced in this document are summarised, with the name of the study provided so you can look up and read the study in full, should you wish to do so.

What is quality?

NHS England's Five Year Forward View ¹, published in October 2014, states that the definition of quality in health care, enshrined in law, includes three key aspects:

- Patient experience
- Clinical effectiveness
- Patient safety

A high-quality health service will exhibit all three. The Care Quality Commission also inspects against these elements of quality. We have therefore chosen to focus on the evidence available in these three key areas, to indicate to readers our commitment to providing quality in osteopathic healthcare.

¹ NHS England's Five Year Forward View, <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>

About osteopathic practice

Osteopathic practice is a safe and effective therapy, that aims to promote the health of patients through the use of manual therapy, exercise and health advice.



Osteopaths are highly trained, healthcare professionals who are experts in the musculoskeletal system (muscles, bones, joints and associated tissues) and its relationship with other systems in the body.

Osteopaths use a wide range of gentle “hands-on” techniques that focus on releasing tension, improving mobility and optimising function. This is often used together with exercise, education, and helpful advice, designed to help patients to relieve or manage pain, keep active and maintain the best of health.

Osteopathic care is suitable for people of all ages from babies to the elderly. People from a wide range of backgrounds seek osteopathic treatment, whether elite or recreational sports people, pregnant women, manual workers or office professionals. Patients seek treatment for a variety of conditions, including (but not exclusively) back pain, changes to posture in pregnancy, postural problems caused by driving or work strain, the pain of arthritis and minor sports injuries.

Osteopaths also work closely with other health care professionals, in a variety of fields and provide onward referral where required.

Since 1993, when osteopathic practice underwent statutory regulation, the demand for and popularity of osteopathy has been steadily increasing. Today an estimated 30,000 people consult an osteopath every working day.²

About the Institute of Osteopathy

The Institute of Osteopathy (iO) is a professional membership body for osteopaths, dedicated to uniting, promoting, developing and supporting the osteopathic profession for the improvement of public health and patient care. The Institute is proud to now represent over two-thirds of osteopaths in the United Kingdom. iO membership affords assurances to the public and patients that its members provide the highest standards of service and care to those in their communities, exceeding the minimum requirements of professional regulation

² Source: The General Osteopathic Council, <http://www.osteopathy.org.uk/news-and-resources/research-surveys/statistics/>

SECTION 1: Patient expectations and experience of osteopathic care

Osteopathic practice has a patient-centred approach that places the wellbeing of patients at the heart of care. Implicit in this patient-centred approach is the need to closely monitor and evaluate whether the delivery of osteopathic care is meeting patients' expectations, to examine patients' experience of care, and to evaluate patients' satisfaction with their experience of osteopathy.

Patients' expectations

The General Osteopathic Council (GOsC) is the regulatory body for the osteopathic profession. In 2010, the GOsC commissioned research to examine patients' expectations of osteopathic care³. This mixed methods study, undertaken by Dr Janine Leach, included a qualitative study to identify patients' expectations, before, during and after an osteopathic consultation, and a national patient survey.



The national survey examined 51 aspects of patient expectations and included responses from over 1649 patients. The main outcome measured was whether patients' perceived levels of expectations were met or unmet. **Results found that a total of 80% of the 51 aspects of patient expectations were met. The most prevalent among those met expectations included listening, respect for the patient, and information giving.**⁴

The headline figure from this research is, however that **96% of respondents said they were satisfied or very satisfied with their osteopathic care.** This is powerful evidence of patient satisfaction and a clear affirmation of the quality of the practitioner-patient relationship that typifies osteopathic care.

“96% of respondents were satisfied or very satisfied with their osteopathic care.”

University of Brighton, 2009 – 2010
(commission by The General Osteopathic Council)

Patients' experience

Several studies have investigated patients' experience of osteopathic care. One study in the UK investigated patients' experience of osteopathy in a survey of the general population and

³ Source: GOsC Osteopathic Patient Expectations (OPEn) study <http://www.osteopathy.org.uk/news-and-resources/document-library/research-and-surveys/what-patients-expect-from-their-osteopath/>

⁴ Leach CM, Mandy A, Hankins M, Bottomley LM, Cross V, Fawkes CA, Fiske A, Moore AP.

Patients' expectations of private osteopathic care in the UK: a national survey of patients. BMC Complement Altern Med. 2013;13:122. doi: 10.1186/1472-6882-13-122. <https://www.ncbi.nlm.nih.gov/pubmed/23721054>.

in a clinic attached to an osteopathic educational institution^{5,6}. The survey of the general population identified that, from a sample of 764 responses 71.4% of patients reported a good experience, 19.5% reported neither a good nor bad experience and 8.9% reported a bad experience with osteopathic care.

Patients reporting a good experience were significantly more likely to show an improvement in their symptoms. Notwithstanding, patients reporting a bad experience still said they would recommend osteopathy to their friends and family. **A total of 88.7% of patients attending a teaching clinic reported a good experience of osteopathic care.**⁶

In more recent work, Patient Reported Outcome Measures (PROMs) data collection has been taking place across the osteopathic profession. PROMs enable patients to give feedback on their care independent to osteopathic practice. The summary data from patients allows osteopaths to compare their outcomes of care to findings from others in the profession. Encouragingly, the GOSc research suggests that 9 out of 10 patients felt that it was very important to be able to provide feedback about their experience to their osteopath⁷

Information collected by PROMs so far indicates that at six weeks post treatment, 93.2% of patients felt that their experience of osteopathy was very good.

“93.2% of patients felt that their experience of osteopathy was very good.”

PROMs Data Collection August 2017

In terms of patient satisfaction levels, at six weeks post treatment 87.2% of patients rated their satisfaction with osteopathic care as very good.

“87.2% of patients rated their satisfaction with osteopathic care as very good.”

PROMs Data Collection August 2017

Although the use of the PROMs data collection facility is in its infancy in the profession, the preliminary results suggest that the majority of people who use an osteopath have a positive experience and there are high levels of patient satisfaction. (For results from PROMs on the effectiveness of treatment, see Section 2)

Public perception

In 2014, the General Osteopathic Council (GOSc) commissioned a large programme of work to learn more about the general public’s awareness of the osteopathic profession.⁸



⁵ Drysdale I.P., Rolfe.K.J., Hinkley H., ‘POSTE’ study (Patients OSTeopathic Experience): a UK national survey of patients: Part III. International Journal of Osteopathic Medicine 2013a:16:e23-24

⁶ Drysdale I.P., Rolfe.K.J., Hinkley H., Patient perception of osteopathic training in the United Kingdom and patient experience. International Journal of Osteopathic Medicine 2013b:16:187 – 191.

⁷ GOSc Magazine, The Osteopath, Aug/Sept 2015

⁸ Report GOSc research regarding public confidence levels in osteopathy (published in The Osteopath, June 2015, page 4) <http://bit.ly/gosc-public-patient-perceptions>

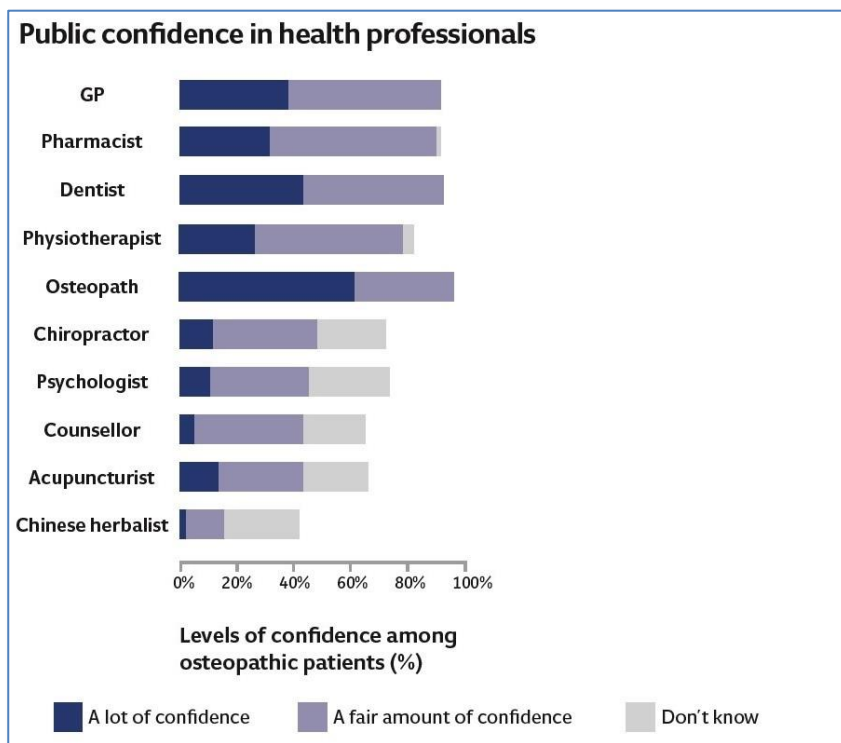
The first phase of this project involved focus groups with members of the public from around the country led by an independent market research company. The groups consisted of participants aged between 18 – 80 from diverse backgrounds, some of whom had previously consulted an osteopath and others who had no prior experience of osteopathic care.

A quantitative survey was conducted also by YouGov including a nationally representative sample of 1,566 members of the UK public. The results of the survey demonstrated that patients have a high level of confidence and satisfaction with osteopathic practice, as well as scope for increasing confidence further amongst those who had no experience of osteopathy.

Amongst osteopathic patients, 96% expressed confidence in osteopathic treatment and advice.

GOSc commissioned You Gov Public Perceptions Survey
April 2015

Amongst osteopathic patients, 96% expressed confidence in osteopathic treatment and advice.



Taken from the GOSc survey, the diagram above shows the level of confidence held by patients who have experienced osteopathic care compared with health professionals in different fields including dentists, GPs and pharmacists. This research demonstrates the high level of trust that osteopathic patients place in their osteopath.

Accessibility to osteopathic care

Demands placed on an ever-stretched healthcare system means that the length of time taken for a patient to be seen by a healthcare practitioner in the NHS can be considerable. Research taken from the National Council for Osteopathic Research, Patient Reported Outcome Measurement data found that **50.4% of patients who visited an osteopath had been experiencing symptoms for 13 weeks or more, but 61.1% of people were seen within three days of requesting an osteopathic appointment.**

Timely access to care is important to try to effect as good an outcome as possible⁹. The time dedicated to each individual patient is valued by members of the public. **In the GOsC Public & Patient Perceptions Research, ‘taking time to listen to you and understand your problem’ was a quality that 48% of osteopathic patients value.**¹⁰

An osteopathic consultation lasts up to an hour and includes the taking of a full medical history, as well as asking the patient about any concerns, symptoms or injuries that they are seeking help with and then undertaking a physical examination. This consultation is very comprehensive. We also know from the iO Census (2017) that osteopaths spend an average of 30 minutes with their patients, (an hour for new patients) allowing them the time to develop positive patient partnerships that support shared-decision making for improved outcomes.

“50.4% of patients who visited an osteopath had been experiencing symptoms for 13 weeks or more, but 61.1% of people were seen within three days of requesting an osteopathic appointment.”

PROMs Data Collection August 2017

SECTION 2: Evidence of the effectiveness of osteopathic practice

The research and information detailed so far provides the reasons why someone may visit an osteopath and their levels of satisfaction after they have done so. The next section examines the evidence there is on the effectiveness of osteopathic practice.

Research

Low back pain is the most common reason for a patient to visit an osteopath and accounts for 36% of an osteopath’s patient

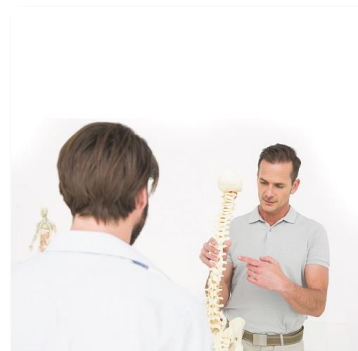


⁹ Foster NE, Hartvigsen J, Croft PR. Taking responsibility for the early assessment and treatment of patients with musculoskeletal pain: a review and critical analysis. *Arthritis Research & Therapy* 2012;14:205

¹⁰ The GOsC Public and Patient Perceptions Research, April 2015 <http://www.osteopathy.org.uk/news-and-resources/document-library/research-and-surveys/public-perceptions-study-full-report/>

workload¹¹ and around 7% of a GP's workload.¹² The prevalence of low back pain alone constitutes a burden on both individuals and the health care system alike. The National Institute for Health and Care Excellence (NICE) produced extensive updated guidance for the assessment and management of low back pain and sciatica.¹³ The NICE guidelines, published in 2016, are based on extensive reviews of high quality evidence and expert consensus. **This guidance recommends manual therapy as part of an overall package of care for those with low back pain.** The package recommendations include encouraging self-management for patients, psychological support and exercise, which osteopaths routinely provide.¹²

Two particularly large high quality randomised controlled trials have also shown that the type of interventions offered by osteopaths are beneficial and have sustained effects on pain and function over one year for low back pain (UK BEAM 2004, Licciardone *et al.*, 2013)^{14,15}.



Systematic reviews involve an extensive analysis of evidence for conditions and/or therapies. A review by Clar *et al.*, in 2014 examined the clinical effectiveness of manual therapy for the management of musculoskeletal (conditions of the bones, muscles and joints) and non-musculoskeletal conditions¹⁶. The review showed that the sort of techniques that osteopaths may choose to use in a consultation (*i.e.* spinal manipulation and mobilisation) were effective for adults with low back pain (independent of how long they have been living with the pain); migraine; headache caused by muscle and joint issues in the neck (Cervicogenic headaches) and dizziness. Other similar techniques were seen to be beneficial for several joint conditions including shoulder pain (rotator cuff disorder.)

The role of self-management in patient care is being advocated increasingly. A trial with chronic low back patients included a self-management programme that was delivered by clinicians including osteopaths who facilitated the development and confidence of patients to manage their long-term condition (Taylor *et al.*, 2016). This trial showed that these patients had sustained beneficial effects at 6 months for depression, social integration, anxiety, self-efficacy and acceptance¹⁷.

Osteopathy is recognised as a complex intervention involving multiple components (including manual 'hands-on' therapy, psychological support, exercise and general health advice designed to support self-management) and, as a result, research into osteopathic practice is

¹¹ Fawkes CA, Leach CM, Mathias S, Moore AP. A profile of osteopathic care in private practices in the United Kingdom: a national pilot using standardised data collection. *Man Ther.*2014;19(2):125-30

¹² Bernstein I, Malik Q, Carville S, Ward S *et al.* Low back pain and sciatica: summary of NICE guidance. *BMJ* 2017;356:i6748

¹³ NICE, the assessment and management of low back pain and sciatica www.nice.org.uk/guidance/ng59/chapter/Recommendations

¹⁴ UK BEAM Trial Team. United Kingdom back pain exercise and manipulation (UK BEAM) randomised trial: effectiveness of physical treatments for back pain in primary care. *BMJ*, 2004, doi:10.1136/bmj.38282.669225.AE

¹⁵ Licciardone JC1, Kearns CM, Minotti DE. Outcomes of osteopathic manual treatment for chronic low back pain according to baseline pain severity: results from the OSTEOPATHIC Trial. *Man Ther.* 2013 Dec;18(6):533-40. doi: 10.1016/j.math.2013.05.006. Epub 2013 Jun 10

¹⁶ Clar C *et al.* Clinical effectiveness of manual therapy for the management of musculoskeletal and non-musculoskeletal conditions: systematic review and update of UK evidence report. *Chiropractic & manual therapies.* 2014, 22:12

¹⁷ Taylor SJ, Carnes D, Homer K, *et al.* Novel three-day community based non-pharmacological group intervention for chronic musculoskeletal pain (COPERS): a randomised clinical trial. *PLoS Med.* 2016, 13

particularly challenging. However, these components make osteopaths ideally placed to deliver the ‘package of care’ recommended in the earlier NICE guidelines.

Patient Reported Outcome Measures

Preliminary findings from the Patient Reported Outcome Measures (PROMs) data, referenced in section one, can also be used to evidence the clinical effect of osteopathic interventions.

The PROM data collection system, developed by the National Council for Osteopathic Research (NCOR) includes a validated PROM enabling osteopaths to invite their patients to contribute data. This data collected independent of practices reduces bias and allows osteopaths to compare their summary practice data to that of their peers.

Findings from current data collected indicates that at one-week post treatment, 3.9% of patients reported that they were completely recovered, and 47.4% reported being much improved.

At six weeks post treatment, 10.8% of osteopathic patients reported they were completely recovered, and 62.2% reported being much improved.

Over 50% of patients reported an improvement in their symptoms one week after osteopathic treatment and 73% reported an improvement in their symptoms at 6 weeks post-treatment.

PROMs Data Collection August 2017

SECTION 3: Evidence of the safety of osteopathic practice

Safety in manual therapy

Any health intervention, for example having surgery or taking medication, potentially has both risks and benefits. It is therefore only natural that patients ask about the risks associated with osteopathy and manual therapy.

In 2007/8 the GOsC and NCOR commissioned a systematic review to investigate the risks associated with manual therapy. Sixty articles were identified that contained information about adverse events following manual therapy. The review examined topics such as the incidence, prevalence, nature and type of adverse events.

Findings from the review reported that mild adverse events such as muscle soreness, aching and headaches post treatment affected around 40 – 50% of patients but most of these

“Osteopathy has an extremely safe reputation and a major adverse event occurrence is very rare, rarer than from taking medication.”

Carnes D, Mars TS, Mullinger B, Froud R, Underwood M Study by Barts and The London School of Medicine and Dentistry, University of London Warwick Medical School and the European School of Osteopathy, into ‘Adverse events in Manual Therapy’ (2009)

resolved within 24 hours (Carnes *et al.*, 2009)¹⁸. Osteopaths often advise patients that they may experience some discomfort and soreness after treatment.

Major adverse events such as death, strokes and neurological problems were very rare, estimated at 1: 1,000,000 (Carnes *et al.*, 2009).

As such, it can be concluded that osteopathic practice is relatively safe in comparison to other interventions such as long-term anti-inflammatory medication use.

Training and registration requirements of osteopaths

Patient safety is of paramount importance to the osteopathic profession as evidenced by the rigorous training and registration requirements and the high standards of governance and practice detailed over the following pages. These stipulations ensure that osteopathic treatment and care continue to demonstrate safety, effectiveness, and patient satisfaction.



To practise as an osteopath, you must meet the required standards set out below in three key areas:

Training

Osteopaths are trained to degree standard attaining either a Bachelor of Science (B.Sc.) or integrated Masters (M.Ost.) level. Any osteopath who qualified before 1990 will hold the award of Diploma in Osteopathy (D.O). Courses typically last four years full-time, or five years part-time and are a combination of academic and over 1,000 hours of direct patient-facing, clinical contact.

This intensive training equips osteopaths with an in-depth knowledge of anatomy, physiology, psychology, pathology and robust clinical methods examination techniques for the cardiovascular, respiratory, neurological systems and the abdomen.

An increasing number of osteopaths are also undergoing postgraduate training for M.Sc., M.Res. and Ph.D. awards.

“An osteopathic degree takes a minimum of four years and requires completion of over 1000 hours of direct patient facing, clinical contact prior to qualification”

Institute of Osteopathy, 2017

¹⁸ Carnes D, Mars TS, Mullinger B, Froud R, Underwood M Study by Barts and The London School of Medicine and Dentistry, University of London Warwick Medical School and the European School of Osteopathy, into ‘Adverse events in Manual Therapy’ 2009

Regulation

The practise of osteopathy underwent statutory regulation in 1993 with the passing of the Osteopaths Act. This affords osteopaths a status of protection of title similar to a dentist or physiotherapist and guarantees patients the equivalent high level of care.

Osteopaths are autonomous primary healthcare professionals, able to act independently without oversight from a doctor. By law, an osteopath must be registered with the General Osteopathic Council (GOsC) who regulate the profession in the UK. There are currently in the region of 5,301 qualified osteopaths (March 2018) registered with the General Osteopathic Council. The GOsC promote patient safety by setting, maintaining and developing standards of osteopathic practice and conduct.

An osteopath's registration with the GOsC is renewed annually subject to certain requirements e.g. the retention of the necessary insurance, meeting mandatory continual professional development (CPD) requirements which keep skills and knowledge up-to-date, and the maintenance of high standards of professional practice.



Since 2017, osteopaths are now recognised as part of the NHS Allied Healthcare Professions.

SECTION 4: Standards in osteopathic practice

The Institute of Osteopathy (iO) believes that the public deserve a consistently high quality of patient care from the osteopaths that serve them, over and above the requirements of the regulator. We encourage this through a variety of schemes that are specifically designed to facilitate the highest standards in osteopathic practice.

Professionals standards

The GOsC set and promote the standards of practice and conduct expected of all osteopaths. These are set out in their document, [Osteopathic Practice Standards](#). Any osteopath registering with the GOsC is expected to be compliant with these standards.

Membership of the Institute of Osteopathy

Membership of the Institute of Osteopathy confers a level of quality and value of service and care to patients. Osteopaths who are members are expected to operate in line with the values and purpose of the iO, which afford assurances to the public, patients and colleagues, that they have the highest standards of integrity, professional and personal conduct.

To view the terms and conditions of membership, [click here](#).

The iO Patient Charter

To ensure osteopaths and their patients have the same expectations of osteopathic treatment, the Institute of Osteopathy (iO) has developed a Patient Charter to enable osteopaths to clearly communicate what a patient can expect in advance of their first appointment:

<http://www.osteopathy.org/osteopathy/the-patient-charter/>

This is supplemented by a document that osteopaths can use in their marketing materials: 'What to expect from your first appointment' (Appendix A).

SECTION 5: Conclusion

From the research detailed in the quality account, it is evident that patient satisfaction levels with osteopathic care are high. Research also demonstrates the high level of confidence that patients place in their osteopath. The majority of patients have also reported that their osteopath met their expectations and that osteopathy has been a good experience for them.

In terms of the clinical effect of osteopathic practice, initial data taken from the Patient Reported Outcome Measures (PROMs) study has been very positive and other research available suggests that manual therapy is effective for patients with low back pain, migraine and headaches, shoulder and neck pain. This is supported further by the recommendations in the updated guidelines by NICE from 2016.

Manual therapy, which is used as part of osteopathic practice, is a safe form of care. The likelihood of a major adverse event occurring has been found to be very rare, estimated at 1 in 1,000,000. As such, it can be concluded that osteopathic practice is very safe in comparison to other interventions such as long-term pain or anti-inflammatory medication use.

However, whilst patient satisfaction and experience levels with osteopathic practice is high and the clinical effect of osteopathic practice has been documented, more work needs to be undertaken to inform the public about osteopathic care and instil confidence in those who have never been to an osteopath before.

The iO is engaged in several streams of work to improve communications with other health professions to demonstrate the benefits of osteopathic care. This includes improved communication with other health professions so that they have the required knowledge and confidence in osteopathic practice, to enable appropriate referral to an osteopath. With some patients waiting a considerable amount of time for treatment, osteopathy offers an accessible and cost-effective alternative pathway to the NHS.



Quality in Osteopathic Practice is a working document which will be updated on a regular basis, as and when new research is undertaken and the findings are released.

If you have any comments or suggestions for future editions, then please email them to us at comms@iOsteopathy.org for consideration.

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