

General Osteopathic Council

Monitoring report

2025/26

The General Osteopathic Council (GOsC) regulates Osteopaths across the UK.

There are

5,653

Osteopaths on the register as
at 31 March 2026

This report covers the
period 1 April 2025 to
31 March 2026

Key findings and areas for improvement

Standard 3 on Equality, Diversity and Inclusion

The GOsC did not meet our Equality, Diversity and Inclusion (EDI) Standard this year because we did not have sufficient assurance that it was meeting one of the four outcomes that we require under our approach to this Standard. The GOsC demonstrates a clear commitment to EDI, with appropriate governance, strategies and guidance in place, and has made progress in embedding EDI across its regulatory functions. However, significant gaps remain in the completeness, analysis and use of its EDI data. The GOsC told us that its work to date has not shown unfairness in its regulatory processes and fitness to practise outcomes or disproportionality in its referrals, however, it has provided insufficient data collection and analysis to evidence this assessment.

See overleaf for more detail

Review of the Osteopathic Practice Standards

The GOsC launched a call for feedback on the Osteopathic Practice Standards (OPS) between January and March 2026 as part of a planned review. It has also gathered feedback from students and patients through focus groups and is setting up an independently chaired Collaborative OPS Review Reference Group made up of interested parties. The GOsC plans to publicly consult on a set of revised OPS from September 2026.

Legislation on Protection of Title

The GOsC held a public consultation this year on its plan to request amendments to the Osteopaths Act 1993. The consultation drew strong support for amending the Act to include terms like “osteopathic treatment” and “osteopathic manipulation.” Most respondents recognised the growing misuse of osteopathic terminology and were concerned about it. The GOsC has since written to the Department of Health and Social Care (DHSC) about the consultation outcomes and continues to work with the Advertising Standards Authority (ASA) to address protection of title cases.

Standards met: 17 out of 18



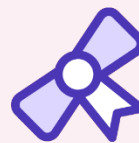
General
Standards

4 out of 5



Guidance and
Standards

2 out of 2



Education
and Training

2 out of 2



Registration

4 out of 4



Fitness to Practise

5 out of 5

Previous years

2024/25

18 out of 18

2023/24

18 out of 18

Our performance review process

We have a statutory duty to report annually to Parliament on the performance of the 10 regulators we oversee. We do this by reviewing each regulator's performance against our **Standards of Good Regulation** and reporting what we find. The judgements we make against each Standard incorporate a range of evidence to form an overall picture of performance.

Meeting a Standard means a regulator has demonstrated satisfactory performance in that area. It does not mean there is no room for improvement. Our oversight does not stop when we publish our report. It is an ongoing, continuous process and, where we have identified areas for improvement, we pay particular attention to these as we continue to monitor the regulator's performance.

Our performance reviews are usually carried out on a three-year cycle; every three years, we carry out a more intensive 'periodic review' and in the other two years we monitor performance and produce shorter monitoring reports. **Find out more about our review process.** We welcome hearing from people and organisations who have experience of the regulators' work. We take this information into account alongside other evidence as we review the performance of each regulator.

General Standards

The GOsC met four out of five General Standards this year.

These five Standards cover a range of areas including: providing accurate, accessible information; clarity of purpose; equality, diversity and inclusion; reporting on performance and addressing organisational concerns; and consultation and engagement with stakeholders to manage risks to the public. This year the GOsC did not meet our equality, diversity and inclusion Standard.

This section of our report focuses on Standard 3 because the GOsC has not met the Standard this year.

Our assessment of the GOsC's performance against Standard 3

In 2024, we introduced a new approach to assessing regulators against Standard 3, which focuses on equality, diversity and inclusion (EDI). As part of that approach, we have broken down the Standard into four separate outcomes. For a regulator to meet the Standard, we need to be assured that it has met all four outcomes. Our assessment of the GOsC's performance against the four outcomes is set out below.

Outcome 1: The regulator has appropriate governance, structures and processes in place to embed EDI across its regulatory activities

The GOsC has clear governance, structures and processes in place to embed EDI. It is progressing delivery of its 2024-30 Equality, Diversity, Inclusion and Belonging (EDIB) Framework which it annually reports on to Council. As was the case last year, it has a clear EDI governance structure overseen by its Council and continues to carry out and publish equality impact assessments with a methodology review conducted this year to improve consistency in its approach.

The GOsC's recruitment processes for its non-executive roles have been independently assessed as robust and equitable. It last collected, analysed and published EDI data from its senior leadership, Council, committees, decision-makers and fitness to practise panellists in August 2024. Although the GOsC has implemented inclusive recruitment processes and received independent assurance as to their fairness, it has not updated or expanded its EDI data collection and analysis to reflect recent changes in governance membership. As a result, the GOsC cannot demonstrate that senior leadership, Council, committees and decision-makers are increasingly reflective of the diversity of the community within which it operates.

Overall, while the GOsC meets the requirements of Outcome 1, further work is needed to refresh, analyse and use EDI data to demonstrate impact and continuous improvement in leadership diversity and representation.

Outcome 2: In terms of EDI, the regulator ensures that registrants and students are equipped to provide appropriate care to all patients and service users, and have appropriate EDI knowledge and skills

The GOsC has a strong and coherent framework of standards, guidance and quality assurance arrangements designed to ensure that students and registrants are furnished with appropriate EDI knowledge and skills and equipped to provide care to all patients and service users. EDI considerations are clearly embedded within the Graduate Outcomes, Standards for Education and Training and professional guidance, and are supported by revised disability and health condition guidance published in this review period. The GOsC also provides guidance and resources to support registrants' ongoing development of EDI knowledge and skills, with further enhancements planned through Continuing Professional Development (CPD).

When considering the progress the GOsC and education and training providers have made to equip students and registrants to provide appropriate care to all patients and service users the GOsC has several initiatives planned or at an early stage, including educator workshops and the analysis of the curricula through an EDI lens. There is limited evidence of completed actions, outcomes or measurable impact within the review period, however, we did not consider that this undermined the overall assurance provided by the regulatory framework and oversight in place, which means that this year the Outcome is met.

Outcome 3: In terms of EDI, the regulator makes fair decisions across all regulatory functions

The GOsC implemented its new Customer Relationship Management system (CRM) in January 2026 (it had planned to have it in place by December 2024). It also carried out an EDI survey of the registrant body which generated responses from 20% of the Register. This marks a significant improvement on the level and range of data held last year; however, this highlights that the GOsC does not hold complete data for its registrant base. The GOsC now plans to use its CRM to collect EDI data at registration and renewal. Due to its legislation the GOsC does not have a set renewal date for its registrants so it will not hold comprehensive registrant EDI data until the full renewal cycle is complete.

Last year we identified that, at the end of the review period, the GOsC only had a single piece of fitness to practise guidance which made reference to discriminatory behaviour. This year the GOsC addressed that gap and completed its planned review of its fitness to practise guidance to include clearer and stronger references to racist and other discriminatory behaviour. It continues to provide EDI training to members of staff, Council members and decision-makers.

It is developing layered guidance for its CPD scheme and plans to evaluate its impact once implemented. The new CPD materials were informed by focus groups, neurodiverse registrants and expert advice to ensure that the materials were suitable for neurodiverse people.

The GOsC continues to hold limited EDI data from complainants and those raising concerns which presents challenges as to how meaningful analysis can be in this area. The GOsC has embarked on work to try to increase the EDI data it receives from fitness to practise complainants.

The GOsC told us that its work to date, including an independent audit of its early-stage fitness to practise cases, and analysis for every decision-making stage of its fitness to practise process, has not shown unfairness in its regulatory processes and fitness to practise outcomes, or disproportionality in its referrals.

Whilst we understand the context within which the GOsC operates as a small regulator with a small registrant population and datasets, we think it can and should do more. We have not seen sufficient data collection or analysis by the GOsC in order to demonstrate that it is assured by the evidence that there is no unfairness. In the light of such limited data collection and analysis there is insufficient assurance that, in terms of EDI, the GOsC can demonstrate that it consistently makes fair decisions across all regulatory functions. On that basis we have concluded it has not met this Outcome this year.

Outcome 4: The regulator engages with and influences others to advance EDI issues and reduce unfair differential outcomes

In this review period, the GOsC appointed two Patient Partners to join Council meetings and contribute to discussions. This is an innovative pilot which other regulators are interested in learning about, especially as it places the patient voice at the heart of strategic decision-making. This pilot programme will be evaluated by the GOsC's Council later in 2026.

The GOsC is consistently and meaningfully engaging with a range of stakeholders, including patients, students and registrants and with others across the health and social care regulatory landscape, in ways that are relevant to EDI. It has engaged in a range of activity with other organisations this year including the Health and Care Professions Council (HCPC) to support allied health professionals and as part of a cross-sector group in the development of consent principles.

It uses research and evidence including the **UrGEnT (Underrepresented Groups' Experiences in Osteopathic Training) research**¹ and the National Council for Osteopathic Research (NCOR) reports to inform its work. The 2024 NCOR report contained some EDI complainant data, but it was too limited to meaningfully inform the GOsC's ability to target action to mitigate the risk of unfair differential outcomes.

The GOsC has carried out a range of work to improve the clarity and transparency of its fitness to practise process (for registrants, employers and the general public) in order to help reduce barriers to raising concerns, including making changes to its website, the

¹ The Research's three main recommendations are that Osteopathic Education Institutions prioritise actions to clarify institutional policies and processes to ensure they are accessible and effective in maintaining an inclusive educational environment; to review the adequacy of current student support services, particularly for underrepresented groups; and to provide EDI and communications skills training for staff to increase awareness about students' learning needs and explore attitudinal barriers to change.

format of its annual fitness to practise report, and the publication of a podcast and audiograms. Additionally, it has reviewed its Threshold Criteria for Unacceptable Behaviour and is to consider what next steps it might take in this area.

In terms of the diversity of student admissions and progression, the GOsC has appropriate standards and guidance in place; it collects and disseminates annual student data so that issues of recruitment and retention might be explored through engagement with education providers. It also has education workshops and a curriculum analysis planned. Whilst we note that structural barriers affecting diversity within osteopathic education remain largely outside the GOsC's control, we have not yet seen evidence of any measurable impact of the GOsC's engagement on the diversity of student admissions and progression.

Although evidence of measurable impact remains limited in several areas, the GOsC is active, visible and engaged on EDI issues, it collaborates across the sector, promotes routes for feedback and challenge and uses evidence to inform its work. The GOsC has met this Outcome.

The GOsC generally performed well against Outcomes 1, 2 and 4. It demonstrates a clear commitment to equality, diversity, inclusion and belonging across its regulatory functions. However, significant gaps remain, particularly in the completeness, analysis and use of EDI data to identify potential unfairness and disproportionality and demonstrate impact in reducing differential outcomes, most notably within fitness to practise. We did not have sufficient assurance that it is meeting Outcome 3 for this review period. Under our approach, in order to meet the Standard, we would need to be assured that a regulator has met all four of the Outcomes. The GOsC's overall performance means we conclude that Standard 3 is not met. We will continue to monitor the GOsC's progress against Standard 3 in the next review period.

Guidance and Standards

The GOsC met both Standards for Guidance and Standards this year.

The GOsC carried out a call for evidence this year as part of its review of the Osteopathic Practice Standards (OPS). Overall, respondents indicated that they were generally positive about the OPS but suggested areas for improvement. To support the review, the GOsC plans to form an independently chaired Collaborative OPS Review Reference Group, which will include a wide range of interested parties, including representatives from the GOsC's patient forum. The GOsC will work with this group, taking in feedback received through its call for evidence and subsequent focus groups to prepare a set of revised standards to be considered by the GOsC's Policy and Education Committee (PEC) and Council, before a formal consultation is launched from September 2026. We will continue to monitor the GOsC's work in this area.

Education and Training

The GOsC met both Standards for Education and Training this year.

The GOsC continues to maintain up-to-date standards for education and training that prioritise patient and service user safety.

After last year's public consultation, this year the GOsC published two pieces of guidance² focused on students of osteopathic education. The guidance aims to support those thinking about studying osteopathy and current students who have a disability or health condition. The guidance also helps education providers to explore how to work with and support students to meet the Osteopathic Practice Standards (OPS).

Additionally this year, the GOsC published a **Joint statement on the use of Artificial Intelligence (AI) in health and care professional education** with the HCPC, General Chiropractic Council, General Optical Council, General Pharmaceutical Council and the Royal College of Veterinary Surgeons. The statement includes a set of guiding principles for education providers to proactively consider during the design and delivery of their programmes. The principles outline responsibilities with respect to accountability, academic integrity, development of AI literacy for staff and learners, and preparation for future practice.

The GOsC continues to quality assure (QA) education providers to ensure they are implementing the Standards for Education and that only students who meet the OPS are awarded a Recognised Qualification (RQ) that allows them to apply for registration. In last year's report we noted that the GOsC was moving its quality assurance processes in-house from July 2025 with a transition period until October 2025. Although it was too early in this review period to monitor the impact of this change, we heard from one stakeholder that the transition had been well-communicated, and we will monitor this area in the next review period.

Registration

The GOsC met all four Standards for Registration this year.

Fraudulent registration entry

In July 2025, for the first time since 2018, the GOsC's Council considered a Section 10³ investigation into a registrant who had failed to disclose ongoing investigations and findings against them in New Zealand when applying for restoration. Although the

² ***Studying Osteopathy with a Disability or Health Condition: Guidance for Applicants and Students*** and ***Students with a Disability or Health Condition: Guidance for Osteopathic Educational Providers***

³ A Section 10 investigation under the Osteopaths Act 1993 refers specifically to fraud or error in relation to registration.

registrant supplied recent police checks showing no criminal record, the GOsC did not request a Letter of Good Standing from the New Zealand regulator, the Osteopathic Council of New Zealand. The GOsC described its failure to request the Letter as an ‘oversight’. After receiving a report detailing allegations of sexual misconduct and gathering further information (including correspondence from the registrant), the GOsC suspended the registrant and sought information from the regulator. Based on the evidence, the Council concluded that the registrant’s entry had been fraudulently procured and removed them from the Register. The registrant did not appeal, and the GOsC published the decision on its website.

This has been the only case of its kind since 2018. The GOsC acted reasonably in suspending and then removing the registrant, and its acknowledgement of an oversight provides some assurance that such an error is unlikely to be repeated in the future. However, we will continue to monitor this issue to ensure the risk of repetition is appropriately managed and mitigated.

Legislation on protection of title

The GOsC consulted on strengthening legal protections of the term “osteopath” due to increasing misuse by unregulated individuals, which it sees as a risk to patient safety and the profession’s reputation. The consultation drew 375 responses, with strong support for amending the Osteopaths Act to include terms like “osteopathic treatment” and “osteopathic manipulation.” Most respondents recognised the growing misuse of osteopathic terminology and were concerned about it. The GOsC has since written to the Department of Health and Social Care (DHSC) about the consultation outcomes and continues to work with the Advertising Standards Authority (ASA) to address protection of title cases. In February 2026, it published a joint **message** with the ASA explaining their respective roles. We will continue to monitor the GOsC’s work in this area.

“The GOsC [sic] work to date to strengthen protection of the title ‘osteopath’ has been very good and demonstrates they are listening to the concerns raised by the profession.”

Stakeholder feedback

Mandating CPD activities

This year we planned to monitor the GOsC’s proposed changes to its CPD scheme, specifically making CPD activities on boundaries with patients and EDI mandatory. The GOsC consulted on proposed changes to its CPD guidance and the Peer Discussion Review (PDR) template between December 2024 and February 2025. The consultation engaged patients, educators, CPD providers, assessors and osteopaths who were generally supportive, though many felt the CPD guidance and PDR template needed further improvement. Concerns were raised about increased workload and the evidence

base for making the Equality, Disability, Inclusion and Belonging (EDIB) element mandatory.

The GOsC's Policy and Education Committee (PEC) reviewed the consultation outcomes in June 2025 and advised that boundaries and EDIB activities should initially be introduced as '*encouraged elements*' rather than mandatory ones, pending more evidence. The GOsC published the **consultation outcomes** in November 2025 and has developed supporting resources, including EDIB-focused case-study materials in collaboration with osteopaths, students and others. In March 2026, the PEC agreed to recommend to Council that professional boundaries and EDI become mandatory CPD elements. The Council will make the final decision on this and the revised resources at its May 2026 meeting. We will continue to monitor the GOsC's work in this area.

Fitness to Practise

The GOsC met all five Standards for Fitness to Practise this year.

The GOsC continues to have appropriate processes and guidance to enable people to raise concerns about its registrants. It has reviewed its concerns process with the aim of improving accessibility and transparency, making changes to its website to include visuals on the concerns process/timelines, myth busters, and hearing set ups. It has revised the format of its annual fitness to practise reports to include more detailed information about the process.

FTP investigations

In this review period, the GOsC has reported its highest number of open fitness to practise cases since 2017-18. The GOsC's processes for examining and investigating fitness to practise cases continue to operate in a fair and proportionate manner. Early-stage decision-making remains broadly timely, while overall timeliness, particularly at the Professional Conduct Committee (PCC) stage, continues to be affected by the complexity of serious cases, third-party investigations and the involvement of vulnerable witnesses. The GOsC has demonstrated its awareness of these challenges and has taken steps to manage them, including through targeted case management actions and the scheduling of back-to-back hearings. The GOsC plans to improve efficiency at the Investigating Committee (IC) stage while maintaining the quality of decision-making. Based on the available evidence we have seen in this review period, we consider that the GOsC continues to deal with cases as quickly as is consistent with a fair resolution and to prioritise public protection.

Managing risk

The GOsC continues to identify and prioritise cases that present a serious risk to patient or service user safety and seeks interim orders where appropriate. While there was an increase in the time taken to apply for interim orders in one quarter (Q2 2025-26) of this review period, the GOsC has provided a reasonable explanation for this increase that is linked to the complexity of cases involving vulnerable complainants. Once the need for an interim order is identified, the GOsC's decision-making times remain comparable with

previous years. We are satisfied that the GOsC's approach continues to prioritise public protection.

Support for people involved in Fitness to Practise cases

The GOsC continues to support all parties to a complaint to participate effectively in the fitness to practise process. In this review period, it has taken steps to improve the tone and empathy of its communications following an independent review and implemented electronic witness feedback forms. It has also introduced independent support for witnesses and registrants during breaks in remote hearings.

“...there is visible greater communication on the fitness to practise process and support available to those in the process. This is positive and builds trust.”

Stakeholder feedback

Quick links/find out more

- [Find out more about our performance review process](#)
- [Read the GOsC's 2024/25 performance review](#)
- [Read our Standards of Good Regulation](#)
- [Read our new evidence framework for Standard 3](#)

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