



Working group EROP- FORE

Definitions about Osteopathy, Osteopath and Osteopathic Physician

What are the definitions we all use in Osteopathy and in the Profession

Osteopathy in the definition of WHO (World Osteopathic Health organisation)

Osteopathy is an established recognized system of healthcare which relies on manual contact for diagnosis and treatment. It respects the relationship of body, mind and spirit in health and disease; it lays emphasis on the structural and functional integrity of the body and the body's intrinsic tendency for self-healing. Osteopathic treatment is viewed as a facilitative influence to encourage this self regulatory process.

Osteopathic Physician in the EROP Declaration:

"A fully licensed medical doctor with or without a medical specialty. Additional postgraduate academic and professional training in OM leading to the granting of a diploma. The acquisition of diagnostic and therapeutic skills for OM requires an educational training program of at least 700 hours within a minimum time period of 4 years. The educational standard in OM requires knowledge and skills in all three osteopathic areas, the parietal, the visceral and the cranio-sacral systems. The osteopathic physician completes and broadens the standard medicine in the context of an integrated patient care. He emphasizes both an evidence informed and patient centred medicine."

Osteopathic Profession in FORE:

“The osteopathic profession is a distinct healthcare profession with specific education and training requirements, and may be described essentially by the following:

- **Osteopathy emphasises a patient-centred**, rather than a condition/disease-centred, system of healthcare.
- **Osteopathy is an autonomous system of primary contact healthcare** that focuses on the diagnosis, management, treatment and prevention of impaired health, without the use of drugs or surgery.
- **Osteopaths, in close collaboration with the patient, seek to identify the causes of** impaired health and restore the optimum functioning of the body, aiding its own intrinsic ability to heal. Diagnosis involves the use of a combination of specific osteopathic methods and conventional medical examination procedures. Treatment is based on the skilled application of osteopathic manual techniques tailored to the individual person, and reinforced by other self-help measures, such as guidance on diet, lifestyle and exercise. The approach emphasises the integration of the musculoskeletal system with other body systems and the influence that the impaired function of each has on the other, as well as the empowerment of patients in facilitating their own recovery to good health.”

Common competencies shared by osteopaths and osteopathic physicians

(WHO guideline draft of 2007)

Osteopathic practitioners, (osteopath and osteopathic physician) share a set of core competencies that guide diagnosis, management and treatment of their patients and form the foundation for the osteopathic approach to health care. The following are essential competencies for osteopathic practice.

- A strong foundation in osteopathic history and philosophy and its approach to health care.
- An understanding of the basic sciences within the context of the philosophy of osteopathy and the five models of structure-function specifically the role of vascular, neurological, lymphatic and biomechanical factors in the maintenance of normal and adaptive biochemical, cellular and gross anatomical functions in states of health and disease.
- Ability to form an appropriate differential diagnosis and treatment plan.
- An understanding of the mechanisms of action of manual therapeutic interventions and the biochemical, cellular and gross anatomical response to therapy.
- Ability to critically appraise medical and scientific literature, and incorporate valid evidence into clinical practice.
- Competency in the palpatory and clinical skills necessary to diagnosis dysfunction in the aforementioned systems and tissues of the body, with an emphasis on osteopathic diagnosis.
- Competency in a broad range of osteopathic manipulative treatment (OMT) skills.
- Proficiency in physical examination and the interpretation of relevant tests and data, for example diagnostic imaging and laboratory results.
- An understanding of the biomechanics of the human body including but not limited to the articular, fascial, muscular and fluid systems of the extremities, spine, head, pelvis, abdomen and torso.
- Expertise in the diagnosis and osteopathic manipulative treatment of neuromusculoskeletal disorders.
- Thorough knowledge of the contraindications and indications for osteopathic treatment.
- Basic knowledge of commonly used traditional medicine and complementary/alternative medicine.

Comparing the core competencies/Practice Standards of EROP and FORE

The following are the original wordings in the EROP and FORE publications

EROP	FORE
7 Core Competencies and Practice standards	5 Sections for Core Competencies
<ol style="list-style-type: none"> 1. Medical professionalism and complementary medicine 2. Principles and scientific basis of Osteopathic Medicine 3. Personal qualities and skills 4. Clinical practice 5. Patient partnership 6. Practice-Based Learning 7. Systems-Based Practice 	<ol style="list-style-type: none"> 1: Background 2: Nature and context of osteopathic healthcare and education 3: Knowledge, understanding and skills 4: Teaching, learning and assessment 5: Academic and practitioner standards
	<p>16 Sections for Osteopathic Practice</p> <ol style="list-style-type: none"> 1: Relevant knowledge for osteopathic practice 2: Understanding of osteopathic concepts and principles 3: Interaction with patients 4: Personal qualities and skills 5: Communication 6: Identifying and evaluating patients' needs 7: Acquiring, using and enhancing palpation skills 8: Planning, monitoring and justifying osteopathic treatment 9: Undertaking osteopathic treatment and patient management 10: Evaluation of post-treatment process and change 11: Promoting and maintaining health 12: Processing information and data 13: Providing a high quality environment for osteopathic healthcare 14: Working with other healthcare professionals 15: Professional and ethical responsibilities 16: Audit and continuing professional development

Details of Core Competencies/Practice Standards

EROP	FORE
<p>1. Medical professionalism and complementary medicine</p>	<p>Distinctiveness of Osteopathic Practice</p>
<p>The Charta of medical professionalism is based on three main principles:</p> <ul style="list-style-type: none"> 1.1.1. Well-being of patient (“salus aegroti suprema lex”) 1.1.2. Autonomy of the patient 1.1.3. Medical and social fairness <p>1.2. Commitments to achieve these principles:</p> <ul style="list-style-type: none"> 1.2.1. Professional expertise 1.2.2. Honesty to the patient 1.2.3. Professional discretion 1.2.4. Good doctor-patient-relationship 1.2.5. Good treatment quality 1.2.6. Reducing of barriers in patient care 1.2.7. Costs efficiency 1.2.8. State of medical science 1.2.9. Publication of conflicts of interest 1.2.10. Collegiality <p>1.3. Reliability in standard and osteopathic medial care:</p> <ul style="list-style-type: none"> 1.3.1. Accurate method for diagnostic and treatment process 1.3.2. Continuous effort for profound medical knowledge and progress of knowledge 1.3.3. Knowledge of the own limits in diagnostics and therapy 1.3.4. Knowledge of the most important alternatives in diagnostics, therapy and their limits 1.3.5. Inform the patient about the theoretical and empiric fundaments for your own decision process 1.3.6. Respect for the patient in his individual priorities and his decision process 1.3.7. Reasonable prices for medical work 1.3.8. No false pretences of success to achieve financial or ideal profit 	<p>Osteopathic practice seeks to blend a philosophical approach with intellectual and practical skills to guide the use of therapeutic intervention to help the patient by using an individual 'package of care' most suited to facilitating a particular person's return to and maintenance of optimum health. It is characterised by the following distinctive principles and practical features. Emphasis is on the patient and not just on their condition. This has been a longstanding tenet for osteopathy, and it is a conceptual principle that informs the whole of the osteopathic approach to care of the patient. It is about seeing a person not as someone with a disorder, but as someone who is seeking the facilitation of optimum health. It involves viewing the person as having an integrated blend of influences that combine to effect health. Osteopathy seeks to identify and address the key influences that will lead to restored health and well-being.</p> <ul style="list-style-type: none"> • The intention to enhance the intrinsic health-maintaining and health-restoring capabilities of the individual person. This involves the consideration of a broad range of factors to identify and resolve the causes of impaired health. • Individually tailored intervention and advice encompassing a range of specific technical treatment modalities and approaches. These may include specific osteopathic manipulation techniques, exercise advice, lifestyle advice, dietary advice, coping strategies, and other advice to enable the patient to understand the cause and contributing factors of their impaired well-being. • An approach that emphasises the integration of the musculoskeletal system with other body systems, the reciprocal influences that impairment of function of each may have, and the adverse effects such impairment may have on the health of an individual. • Close collaboration between the patient and osteopath to identify the factors contributing to the patient's impaired well-being, and to determine the clinical and other changes needed to restore optimum health. • Enabling the patient to understand and implement measures to take responsibility for assisting their own recovery and enhancing their health. • Using critical reasoning to apply knowledge and skills in an integrated and informed manner.

EROP	FORE
2. Principles and scientific basis of Osteopathic Medicine	The principles and scientific basis of osteopathy
<p>2.1. Medical knowledge:</p> <p>Osteopathic Physicians are expected to demonstrate and apply knowledge of general accepted standards in medicine and in their respective specialty area. They should remain current with new developments in medicine, participate in life-long learning activities and include research.</p> <p>2.2. Understanding of Osteopathic principles, diagnostic and therapeutic concepts:</p> <p>Osteopathic Physicians are expected to demonstrate and apply knowledge of accepted standards in Osteopathic Manipulative Treatment (OMT) appropriate to their specialty. They should remain dedicated to life-long learning and developing their knowledge and skills in OMT. These concepts and principles should be applied critically and continuously to patient care.</p> <p>Osteopathic physicians must be able to demonstrate:</p> <p>2.2.1 a comprehensive understanding of the principles and concepts of osteopathy and how these inform and guide rational medical and osteopathic decision-making,</p> <p>2.2.2. an understanding of how osteopathic principles are expressed and translated into integrated patient care and how such approaches can be selected and modified to meet the needs of an individual patient,</p> <p>2.2.3. a critical appreciation of the highly skilled sense of touch - known as palpation - which is employed in patient evaluation and treatment,</p> <p>2.2.4. an ability to analyse and crosslink patient data and results of evaluation with the cross linked functions of all body systems,</p> <p>2.2.5 an ability to critically integrate medical and osteopathic concepts for the needs of the patient.</p>	<ul style="list-style-type: none"> • osteopathic history and philosophy and its distinctive perspective on healthcare. • the reciprocal relationship of structure and function that underpins the osteopathic approach to healthcare. • the relative and absolute contra-indications of osteopathic treatment modalities. • the range of complexity implicit in the social and psychological contexts of health, and the influence these may have on osteopathic treatment outcomes. • the role of osteopathic intervention in assisting adaptation of structure and function during disease or periods of ill health. • principles of health promotion and preventative care. • the normal structure and function of the major body systems and how they interrelate and vary between individuals. • the normal changes in structure and function during the stages of growth, development, maturity, reproduction and ageing. • how and why structure and function may be compromised and how this may be recognised. • pharmacology, main categories of drugs used, and their beneficial and adverse effects. • principles of nutrition and dietetics. • the application to osteopathy of relevant principles and theories from biomechanics, physics, exercise physiology/science and ergonomics. • the principles of paediatrics relevant to the safe and effective osteopathic care of children. • the limitations of medical and osteopathic treatment modalities.

EROP	FORE
<p data-bbox="183 309 598 338">3. Personal qualities and skills</p> <p data-bbox="183 376 746 562">Osteopathic Physicians are expected to demonstrate interpersonal and communication skills that enable them establishing and maintaining professional relationships with patients, families and other members of health care professions.</p> <p data-bbox="183 600 719 658">Osteopathic physicians must be able to demonstrate:</p> <ol data-bbox="183 667 778 1144" style="list-style-type: none"> <li data-bbox="183 667 778 853">3.1. an ability to reflect on and identify his/her own personal and professional strengths and limitations and address these through self-development, including continuing professional development, <li data-bbox="183 862 778 1010">3.2. problem-solving and thinking skills in order to inform and guide the interpretation of all patient data, in order to justify clinical reasoning and decision-making, <li data-bbox="183 1019 778 1144">3.3. an ability to adopt appropriate strategies for physical and psychological self-care during interactions with patients, in order to maintain their own health. 	<p data-bbox="802 309 1190 338">Personal qualities and skills:</p> <p data-bbox="802 376 1396 405">The osteopath should be able to demonstrate:</p> <ol data-bbox="802 414 1396 1167" style="list-style-type: none"> <li data-bbox="802 414 1396 465">4.1 a sufficient level of coordination and dexterity to deliver high standards of osteopathic care <li data-bbox="802 474 1396 584">4.2 a highly developed appreciation of personal and professional strengths and limitations sufficient to promote a commitment to active and planned self-development <li data-bbox="802 593 1396 651">4.3 an ability to recognise the need to seek assistance from professional colleagues <li data-bbox="802 660 1396 801">4.4 evidence of problem-solving and thinking skills to a level that informs and guides the interpretation of clinical and other data and contributes to effective clinical reasoning and decision-making <li data-bbox="802 810 1396 891">4.5 a commitment to engage in self-directed learning activities as an integral part of professional osteopathic practice <li data-bbox="802 900 1396 952">4.6 a willingness, to support and assist osteopathic colleagues <li data-bbox="802 960 1396 1041">4.7 the practical application of theories and models associated with making professional judgements <li data-bbox="802 1050 1396 1167">4.8 an ability to care for him/herself and to operate with an appropriate degree of self protection consistent with maintaining an acceptable standard of care for a patient

EROP	FORE
<p>4. Clinical Practice: Osteopathic physicians must demonstrate the ability to effectively treat patients. They provide medical care that incorporates medical and osteopathic knowledge, patient empathy, awareness of behavioral issues, the incorporation of preventive medicine and health promotion.</p> <p>Osteopathic physicians must be able to demonstrate:</p> <ol style="list-style-type: none"> 4.1. an ability to analyse where the presenting problem or complaint may mask underlying pathologies, 4.2. a knowledge of human psychology and sociology, sufficient to provide a context for clinical decision-making and patient management, 4.3. an advanced knowledge of the palpatory characteristics of normal and dysfunctional tissues in different body systems, 4.4. a well-developed level of palpatory skills for effective use in diagnosis, treatment and monitoring of treatment changes, 4.5. a broad and sophisticated range of osteopathic techniques to address the dysfunctional tissues for improving and restoring health in an individual patient, 4.6. a clear and critical treatment plan for the whole patient in an understanding of integrated patient care. This requires continuous patient management in the medical, osteopathic, psychological and social area. 4.7. an advice and expertise for preventive medical and osteopathic strategies in improving and maintaining health. 	<p>Acquiring, using and enhancing palpation skills:</p> <p>The osteopath should be able to demonstrate:</p> <ol style="list-style-type: none"> 7.1 a critical appreciation of the therapeutic value of touch and palpation 7.2 the use of relevant knowledge to recognise and understand the structure and function of the tissues during palpation 7.3 an advanced knowledge of the palpatory characteristics of the normal and abnormal functioning of discrete body tissues and systems 7.4 a high level of palpatory skill 7.5 a commitment to use palpation selectively as part of the evaluation process 7.6 the ability to use palpation effectively both as a diagnostic and therapeutic medium 7.7 the ability to make accurate and appropriate records of palpatory findings 7.8 the ability to use palpation in conjunction with other evaluation methods before forming a diagnostic hypothesis 7.9 the effective use of palpation as a means of continuously monitoring the effects of treatment <p>Communication: Osteopaths must be able to communicate with diverse groups of individuals about the claims, aspirations, strengths and limitations of osteopathy and its practice. This should be from an informed perspective based on the critical evaluation of published research. This is particularly important as interest grows for the use of osteopathy within public healthcare systems.</p> <p>The osteopath should be able to demonstrate:</p> <ol style="list-style-type: none"> 5.1 an appreciation of the range and forms of human communication and their strengths and limitations in specific clinical encounters 5.2 the ability to select and move between different forms of communication with patients and colleagues whilst maintaining a commitment to ethical values and considerations 5.3 skill in relating, integrating and responding to information and data acquired by verbal and non-verbal means 5.4 an ability to speak from an informed perspective about osteopathy, its limitations, strengths and potential 5.5 the ability to discuss and critically evaluate research and other findings concerning the efficacy and application of osteopathic interventions and the therapeutic claims of other healthcare disciplines

EROP	FORE
<p>5. Patient partnership:</p> <p>Osteopathic physicians are expected to care for patient partnership and patient trust. They promote advocacy of patient welfare, adherence to ethical principles, life-long learning and sensitivity to a diverse patient population. Physicians should be cognizant of their own physical, mental and psychological health in order to care effectively for patients.</p> <p>Osteopathic physicians must be able to demonstrate:</p> <p>5.1. an empathetic approach, which ensures that patients' privacy and dignity is respected and that each patient is considered as an individual,</p> <p>5.2. an ability to maintain a professional manner in situations in which personal incompatibility arises with a patient, ensuring patient care is maintained,</p> <p>5.3. an ability to deal with clinical uncertainty, so that effective management takes place, to ensure that the patient receives high-quality care and is kept appropriately informed about his status and alternatives,</p> <p>5.4. the skills and self-awareness required to manage clinical challenges posed by familiar circumstances or environments,</p> <p>5.5. an awareness of the importance of maintaining a high level of physical, mental and psychological health, in order to ensure clinical effectiveness and ensure patient safety,</p> <p>5.6. maintenance of patient confidentiality and that the physician is acting only with the informed consent of the patient in compliance with the international code of medical ethics.</p>	<p>Identifying and evaluating patients' needs:</p> <p>Osteopaths must be able to operate within a high standard practice environment conducive to establishing an effective and secure therapeutic relationship with each patient.</p> <p>Osteopaths must be sensitive to the concerns of the patient and identify their needs by taking a comprehensive and relevant case history.</p> <p>Osteopaths must also be able to conduct a thorough and detailed physical examination of the patient using observational, palpatory, and other relevant skills to inform clinical reasoning and differential diagnosis, and to guide the formulation of possible osteopathic diagnoses.</p> <p>Osteopaths should be able to accurately record their findings and prognoses, justifying possible courses of action which reflect the critical interpretation of clinical findings and other relevant information.</p> <p>The osteopath should be able to demonstrate:</p> <p>6.1 effective and efficient completion of a detailed case history of the patient and an analysis of the patient's presenting complaint</p> <p>6.2 a recognition of the relative importance of the bio-psychosocial context of the patient's presenting complaint</p> <p>6.3 the appropriate arrangement for specific clinical investigations as required for a patient</p> <p>6.4 the ability to conduct an effective biomechanical assessment of the patient</p> <p>6.5 the ability to undertake a thorough, sensitive and appropriately detailed palpatory evaluation</p> <p>6.6 the ability to generate a number of diagnostic hypotheses to explain the patient's presenting complaint to aid the formulation of a treatment plan or referral to another healthcare professional</p> <p>6.7 the sensitivity and ability to consult effectively with the patient at all stages of the evaluation</p> <p>6.8 an ability to recognise the characteristics and consequences of non-verbal communication and issues of ethnicity, gender, religious beliefs, sexuality, disability and socio-economic status as they may impact on the patient's health</p> <p>6.9 the ability to generate complete and accurate records of the outcomes of the patient evaluation</p> <p>6.10 an ability to generate and discuss the content of referral letters and other forms of communication with professional colleagues</p>

6. Practice-based Learning:

Osteopathic physicians must demonstrate the ability to critically evaluate their methods of clinical practice, integrate evidence-based medicine into patient care, show an understanding of research methods and focus on the patient centred view of Osteopathy.

Osteopathic physicians must be able to demonstrate:

- 6.1. an ability to critically evaluate research and other findings concerning the efficacy and application of osteopathic interventions and the therapeutic claims of other healthcare disciplines,
- 6.2. **an ability to develop a "human based medicine" which looks for both, an evidence informed and patient centred medicine,**
- 6.2. an ability to integrate and respond to information, data and body reactions acquired by verbal and non-verbal means,
- 6.3. an ability to make complete, legible and accurate records of the outcomes of the patient evaluation, the treatment and the follow up.

Interaction with patients:

The therapeutic relationship in osteopathy is characterised by many ethical challenges for the osteopath and for the patient. A key characteristic of osteopathy is the use of informed touch and this needs mutual trust and confidence between the patient and osteopath. Osteopaths must be able to establish and maintain an ethical, sincere and appropriately empathetic relationship with a patient. The osteopath must also be able to enter into a professional relationship with a patient to ensure that all actions and interventions are conducted in accord with their national code of practice / EFCOP. The osteopath must be able to demonstrate an understanding and commitment to equal opportunity issues

The osteopath should be able to demonstrate:

- 3.1 an awareness and understanding of ethical issues likely to confront a practitioner and to have justifiable and acceptable management strategies
- 3.2 an ability to deal with uncertainty without loss of professional self confidence and the ability to manage the case
- 3.3 a range of integrated skills and self-awareness sufficient to manage clinical challenges effectively in unfamiliar circumstances or situations
- 3.4 an ability to maintain high standards of care in situations of personal incompatibility with a patient
- 3.5 a strong commitment to maintaining patient confidentiality and to act only with the informed consent of the patient in compliance with the national code of practice / EFCOP
- 3.6 an ability to maintain a high standard of professional effectiveness by adopting appropriate strategies for physical and psychological self-care during interactions with patients
- 3.7 a willingness to exchange and use critically the perspectives and approaches of other healthcare professions

EROP	FORE
<p>7. Systems-based Practice</p> <p>Osteopathic physicians are expected to demonstrate an understanding of health care delivery systems, provide effective and qualitative patient care within the system and practice cost-effectiveness and sustainable medicine.</p> <p>Osteopathic physicians must be able to demonstrate:</p> <ul style="list-style-type: none"> 7.1. an awareness of the scope of his/her competence and the need to treat patients solely within the confines of that level of competence, 7.2. an appreciation of the complementary approach of osteopathic medicine in general healthcare in combination with other complementary or alternative approaches, 7.3. an ability to practise osteopathy safely, competently and lawfully, 7.4. an ability to identify and work within his/her limitations with respect to medical standards in order to maintain patient safety, 7.5. an ability to critically evaluate the cost effectiveness of medical/osteopathic diagnosis and treatment, 7.6. an ability to interact effectively with external individuals and organisations, including other healthcare professionals and public service organisations in the interests of the safety and care of patients, 7.7. an ability to advocate for sustainable health care, engagement for a healthy environment and practicing medicine in a sustainable manner. 	<p>Planning, monitoring and justifying osteopathic treatment:</p> <p>The osteopath should be able to demonstrate:</p> <ul style="list-style-type: none"> 8.1 a detailed analysis and reflection on information gathered during patient history taking and evaluation 8.2 the generation and justification of a number of diagnostic hypotheses for the aetiology of the patient's presenting complaint 8.3 the selection of an appropriate course of action based on a rational decision-making process which includes a critical consideration of personal limits of competence, the likely effects of osteopathic treatment, relevant high quality research and the patient's wishes 8.4 whether or not to treat the patient and if not, select the most appropriate course of action 8.5 the formulation of a treatment plan and prognosis <p>Undertaking osteopathic treatment and patient management:</p> <p>The osteopath should be able to demonstrate:</p> <ul style="list-style-type: none"> 9.1 the ability to select and use a wide range of osteopathic techniques and patient management approaches 9.2 a thorough and critical understanding of the theory, principles and practice of osteopathy, and relevant high quality research 9.3 an awareness of the indications and contraindications of using specific osteopathic techniques or their modification 9.4 an ability to justify the selection and mode of use of an osteopathic treatment or approach for the care of an individual patient 9.5 the commitment and ability to monitor stringently the effect of treatment during and after its application 9.6 the ability to adapt an osteopathic technique and justify its use in relation to the palpatory feedback received from the patient's tissues 9.7 the ability to reflect on the patient's progress and modify accordingly the working diagnostic hypothesis and the approach to the management of the patient <p>Evaluation of post-treatment progress and change:</p> <p>The osteopath should be able to demonstrate:</p> <ul style="list-style-type: none"> 10.1 the ability to gather and organise a comprehensive range of qualitative and quantitative data and evidence relevant to the response of an individual patient to osteopathic treatment 10.2 a justification for the decision to continue, modify or cease osteopathic treatment based upon the critical evaluation of the patient and any other relevant factors 10.3 the ability to recognise adverse reactions to osteopathic treatment and to initiate appropriate responses, including referral when appropriate 10.4 an open-minded approach and acceptance

	<p>of treatment outcomes that do not conform to expectations, but may offer deeper insight to the clinical meaning of the patient's presenting problems</p> <p>10.5 the ability and commitment to record evaluation findings and their interpretation accurately and accessibly in the case notes of an individual patient</p> <p>10.6 a commitment to continuous self-monitoring to identify the potential influence of unintended effects whilst undertaking osteopathic treatment</p> <p>Promoting and maintaining health:</p> <p>The osteopath should be able to demonstrate:</p> <p>11.1 a critical appreciation of the key concepts and organisation of health education and health promotion used in the relevant country of practise</p> <p>11.2 an understanding of the significance and potential effect of bio-psychosocial and economic factors in helping patients to make informed choices about their personal healthcare maintenance</p> <p>11.3 the ability to assist patients to undertake and become committed to self-care activities including exercise and lifestyle adjustments</p> <p>11.4 the ability to offer realistic advice concerning the location and effective use of appropriate healthcare-promoting activities</p> <p>11.5 an understanding of the importance for the professional to maintain health and care for themselves</p> <p>11.6 an awareness of the potential benefits and limitations of referring an individual patient to other healthcare professionals</p> <p>Providing a high quality environment for osteopathic healthcare</p> <p>The osteopath should be able to demonstrate:</p> <p>13.1 an awareness of the need to comply with the legal requirements of operating a modern osteopathic practice with the necessary facilities for patient and staff comfort. This includes adherence to national health and safety standards</p> <p>13.2 an awareness of the need to maintain financial and other practice operation details in accordance with legal and ethical requirements</p> <p>13.3 an awareness of and willingness to undertake clinical audit and monitor the quality of practice. This will contribute to the generation of operational and strategic plans</p> <p>13.4 an awareness of the need to manage professional and support staff effectively and efficiently in accordance with identified practice needs and in compliance with legal requirements</p> <p>13.5 the effective maintenance of patient records and information in compliance with legal and ethical requirements of confidentiality and peer support</p> <p>13.6 an awareness of the need to interact effectively and to a high standard with external agencies including other healthcare professionals, insurance companies and public</p>
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service organisations

Working with other healthcare professionals:

The osteopath should be able to demonstrate:

14.1 a critical appreciation of the development of osteopathy and its contribution to healthcare provision in the country where they practise

14.2 an appreciation of the evolution and the current development of healthcare delivery with particular reference to primary healthcare

14.3 a critical awareness of the specific claims of a range of conventional and non-conventional healthcare professions and how these relate to the practice of osteopathy

14.4 a critical evaluation of the current claims of osteopathic practice worldwide and with respect to national circumstances

14.5 an understanding of the range and limitations of operational relationships between osteopaths and other healthcare professionals including referral procedures

14.6 an awareness of the need to participate effectively in the planning, implementation and evaluation of multi-professional approaches to healthcare

Professional and ethical responsibilities:

The osteopath should be able to demonstrate:

15.1 an appreciation of the concept and significance of professional regulation where appropriate and the healthcare regulatory systems operating in their country of practice

15.2 an appreciation of the significance of the individual's professional role to practise osteopathy safely, competently and lawfully

15.4 a commitment to abide by the standards of ethics and conduct stated in their national code of practice and EFCOP

15.6 a commitment to maintaining the integrity of the profession and not bringing it into disrepute by claiming qualifications, skills, experience or knowledge not possessed or with no right to use

Audit and Continuing Professional Development

The osteopath should be able to demonstrate:

16.1 a commitment to undertaking clinical audit and continuing professional development

16.2 an appreciation of the need for self-reflective practice and to document this, when necessary

16.3 an awareness of the need to be able to participate in, and contribute to, structured courses and conferences in relevant professional areas

16.4 an awareness of the need to be able to organise and participate in group activities relevant to the development and enhancement of osteopathy as a profession

16.5 an appreciation of the need to produce and submit, where relevant, self-audit reports to the standard required by the relevant competent authority / registering body

EROP	FORE
<p>Educational Standards</p> <p>All EROP physicians are M.D.s with an extended education in medicine and in Osteopathy.</p> <ul style="list-style-type: none"> • The medical study is 6 years minimum fulltime with at least 6400 hours • The medical study is followed by 1 year fulltime Internship 1100 hours • The M.D. degree is comparable to a master degree • In all European countries every M.D. must specialize full time with a 3-5 year minimum education of 3500-5500 hrs 4000 hours • EROP requirements for Osteopathic physician diploma are 4 years part time training with a minimum of 700 hours <p>An EROP physician with a Diploma in Osteopathic medicine covers 12200 hours</p>	<p>Educational Standards</p> <p>It is preferable to focus on outcomes, as encouraged by the Framework for Qualifications of the European Higher Education Area¹², however it is also useful to indicate what might be a suitable duration for an osteopaths' programme. As an approximate guide, the notional number of contact hours of study would be in the region of 4,000 – 4,800 of this total, osteopathic clinical training should account for no less than 1,000 hours. Whatever the length of training, it is important that the focus is on the quality of outcomes to be achieved by students. The guidance given for course duration should not be read in isolation of the recommendations made in the whole document.</p> <p>With this in mind, it is the osteopathic community's experience to date that the duration of osteopathic education and training is 4-6 yrs full-time or the equivalent part-time, depending on national systems and cultures. Whilst the current approach may be towards the award of a bachelor's qualification, a move to a master's qualification might be more appropriate</p>
<p>Osteopathic Training Topics (Minimum):</p> <ol style="list-style-type: none"> 1) Osteopathic History 2) Osteopathic Philosophy 3) Osteopathic Diagnosis Osteopathic Palpation and Structural Exam 5) Osteopathic Nomenclature 6) Osteopathic Somatic Dysfunction 7) Barrier Concept in Osteopathic Medicine Osteopathic Manipulative Treatment-Overview 9) Osteopathic Manipulative Techniques: <ol style="list-style-type: none"> a) Counterstrain b) Muscle-Energy c) Myofascial Release d) Craniosacral e) Visceral f) Functional Technique g) High velocity-low amplitude 10) Osteopathic disease management 11) Health Maintenance in Osteopathic Medicine 12) Osteopathic Research 	<p>Master Level</p> <p>Throughout the curricula of osteopathic programmes leading to eligibility for professional practice, there are many aspects that could already be considered to meet elements of Master's level qualifications, in particular those requiring sound judgement in complex and unpredictable professional circumstances. There has been recent interest by the European osteopathic academic community in developing master's degrees in osteopathy, and these may be considered broadly to be of two types:</p> <ol style="list-style-type: none"> 1. an integrated and enhanced programme of study that is designed to prepare students for professional osteopathic practice leading to eligibility for registration as an osteopath 2. a programme that extends the breadth and depth of osteopathic study beyond that required of a bachelor's (first cycle) degree in osteopathy. This study would occur following relevant professional registration as an osteopath. <p>It would be expected that a master's programme should identify outcomes consistent with the specific national requirements for a master's qualification in a particular country.</p>

Discussions at the Antwerp meeting:

What is common?

In the WHO guideline-draft of 2007 (which was a broad consensus in the Osteopathic world) we had a chapter "Common competencies shared by osteopaths and osteopathic physicians"

- Do the EROP and FORE guidelines fulfil these common parts?
- Are there any differences?

The 7 core competencies/practice standards of EROP cover the WHO guideline-draft in all points

The 5 sections of core competencies and 16 sections for osteopathic practice of FORE-EFO cover the WHO guideline-draft in all points.

Differences: If we focus on the WHO guideline-draft, we have no differences in common competencies.

What is different between Osteopathic Physicians and Osteopaths?

EROP	FORE
<p>Educational background:</p> <ul style="list-style-type: none"> • High school (or higher school level) • Minimum of 6 years fulltime medical study • Including 1 year Internship • Minimum specialisation 3-5 years <p>Starting Osteopathic training requires prerequisite medical academic training of minimum 7 years, with specialisation 10 -12 years</p> <p>Osteopathic training: Osteopathic training can be started after finishing internship, during medical specialisation,</p> <p>Duration: a minimum time of 4 years part time.</p> <p>Training hours: 700 hours minimum. Many EROP members have more training hours. 700 hours is a minimum standard</p>	<p>Educational background:</p> <ul style="list-style-type: none"> • High school (or higher school level) • Alternative middle school level and diploma in a health care profession • the bachelor prerequisites from the Bologna process are not obligatory for all FORE members? <p>Osteopathic training in FORE document: Bachelor level:</p> <ul style="list-style-type: none"> • 4 years fulltime • 4000-4800 hours <p>Master level:</p> <ul style="list-style-type: none"> • 2 years fulltime • including master thesis <p>Background:</p> <ul style="list-style-type: none"> • the bachelor level of FORE is a general educational standard for all members • In many FORE countries we have part time education for physiotherapists with 1350 hours. This is a transitional step to an academic training. • FORE wants to develop the educational standards from bachelor to a master of science level
<p>Scope of Practice: Osteopathic Physician (WHO guideline draft of 2007):</p> <p>A professional who has achieved those competencies which allow them to have a scope of full medical practice which incorporates osteopathic principles and philosophy. Osteopathic physicians are licensed or registered to practice osteopathic</p>	<p>Scope of Practice: Osteopath (WHO guideline draft of 2007):</p> <p>A professional who has achieved those competencies which allow them to independently practice osteopathy. Osteopaths are primary contact health care providers. Osteopaths work as an alternative, parallel, adjunct or complement to standard medical care, based on the scope of</p>

diagnosis and treatment. In addition, osteopathic physicians have a full scope of medical practice, which includes, but is not limited to prescription medicine, obstetrics and/or surgery. They are primary contact health care providers and serve as primary care physicians as well as specialist physicians.

their training.

Questions from FORE :

- Does EROP support FORE on the way of establishing Osteopathy in all European countries ?
- Does EROP think Osteopathy is on the right way, are there any dangers?
- Does EROP support FORE in the CEN process

Answers from EROP:

- EROP will support FORE on a high educational level, this is as a minimum the bachelor level. Osteopaths with a bachelor level are able to independently practice Osteopathy in primary care. In countries where we have not yet this academic level the Osteopaths need a prescription from an M.D.
- Osteopathy has strong enemies. Osteopaths must fight against physiotherapist organizations. They think Osteopathy as a concept is not necessary, they want to absorb osteopathic techniques but not Osteopathy. Osteopathic physicians must fight against manual medicine societies. They want to adept osteopathic techniques too but not Osteopathy.
- Concerning the CEN process EROP must get the actual information, what is already done. IN general EROP is willing to go on with FORE in this process.

Discussion topics for further meetings:

- Discussion about the CEN process: can we develop a common stand point for Osteopathy?
- Different scope of practice, details, limits, interactions

EROP board January 2011

Dr. Johannes Mayer MD, DOM, President EROP

Dr. Jean Michel Besnard MD, DO , Vice-president EROP