

# Annual Fitness to Practise report 2016

**General  
Chiropractic  
Council**



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## Preface

In the following report we have used the data that we hold to produce an analysis of Fitness to Practise activities. Considerable caution must be exercised in looking at this data. There is a limited base of complaints received from year to year so small numbers can impact on the total numbers and skew figures dramatically. It would be inappropriate and potentially misleading to draw broad conclusions from it.

In 2016, the GCC received a large number of complaints that related to advertising claims made on registered chiropractors' websites. For the purpose of the following report these are excluded from the 'Complaints received' section and have their own dedicated section ('Advertising allegations').

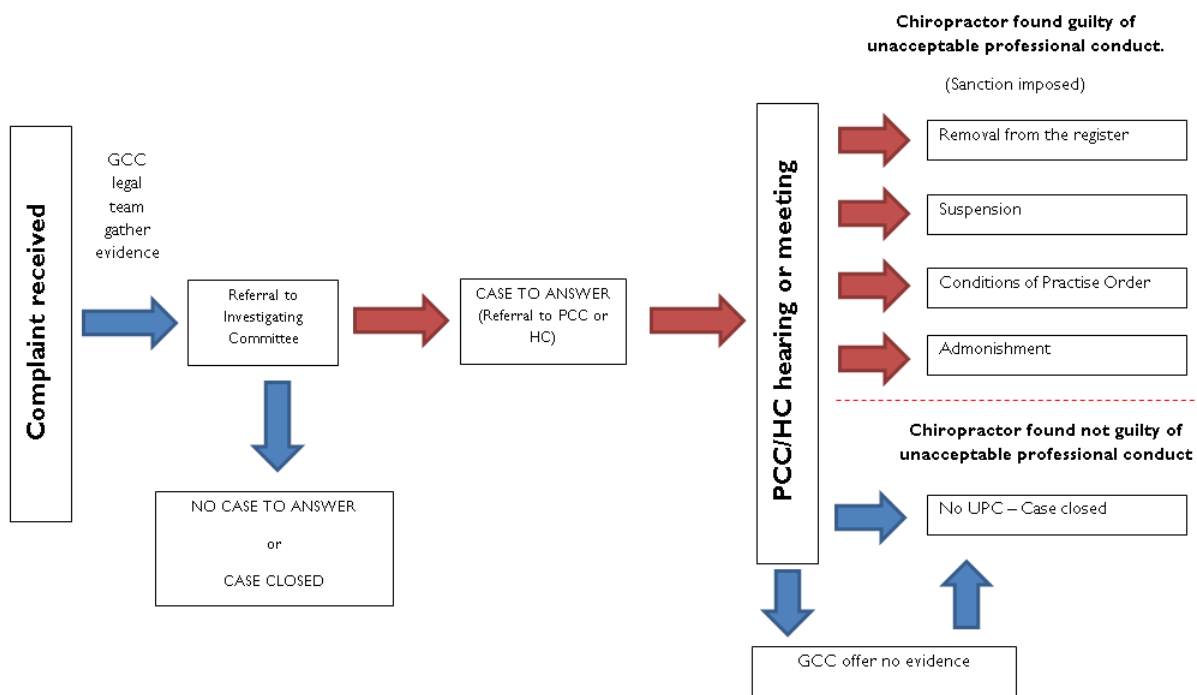
## FTP Process

The GCC’s in-house fitness to practise team gathers evidence in relation to each complaint, before that complaint is determined by the Investigating Committee (IC). There is a specific process in place that the team follows.

The IC determines whether the chiropractor has a case to answer. If the IC determines that the chiropractor does not have a case to answer, the case is closed. If the IC determines that there is a case to answer, the case progresses to the next stage and is referred to the Professional Conduct Committee or Health Committee (PCC/HC). There were no HC cases determined in the year.

If it is determined that the chiropractor is not guilty of unacceptable professional conduct (UPC) the case is closed. If the chiropractor is found guilty of UPC then a sanction is imposed by the panel. The sanctions available to the PCC are to remove the chiropractor from the register, suspend the chiropractor for a maximum of two years, impose conditions on the chiropractor’s practice or admonish the chiropractor. The sanctions available to the Health Committee are to impose conditions or suspend.

The flowchart below shows the main stages of the GCC fitness to practise process<sup>1</sup>.



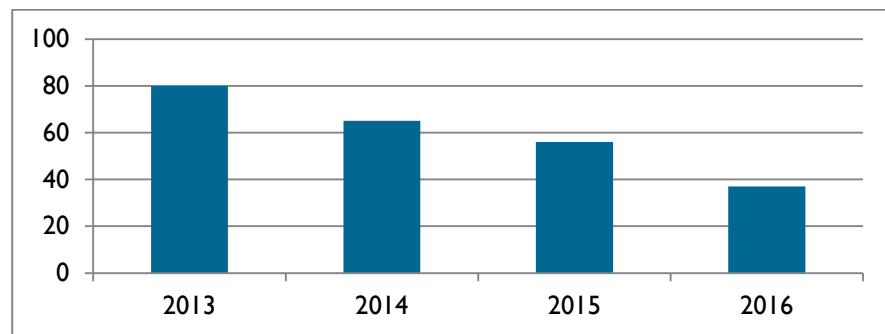
<sup>1</sup> The flowchart does not include the interim suspension process

## Complaints received

In 2016, the number of complaints received about chiropractors' fitness to practise continued to fall, continuing a trend that began in 2013.

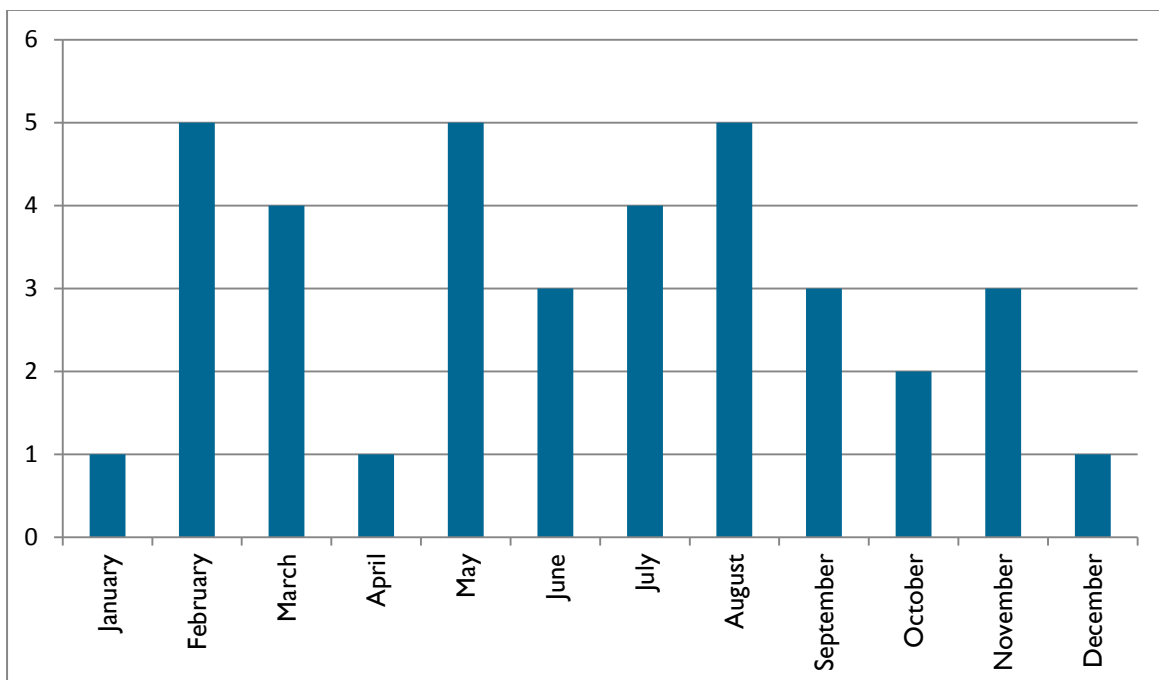
There were 37<sup>2</sup> complaints received in 2016. One registrant had two complaints made against them.

2013	80
2014	65
2015	56
2016	37



## Complaints received by month

On average we received three cases per month in 2016.



<sup>2</sup> This number may change as time progresses. Some 'enquiries' that we receive in a year may not become a full section 20 'complaint' initially or at all. The date the 'complaint' is received may overlap with the date that we decide it has become a section 20 matter, for example, an enquiry could be received in 2016, but the decision that it should be considered as a section 20 'complaint' may not occur until 2017.

## Source of complaints

An analysis of the complaints that we received shows that predominantly the complaints were made by a patient or a relative of a patient. These account for 68% of all complaints.

The split of the complaints is as follows:

	2016		2015 %
Patient/Relative of	25	68%	75%
Registrar	5	14%	4%
Chiropractor/Clinic where worked	3	8%	2%
Member of public/private org.	2	5%	11%
Public Sector Org (e.g. Police)	1	3%	0%
Anonymous	1	3%	0%
Self referral	0	0%	8%
<b>Total</b>	<b>37</b>		

## Nature of complaints

The nature of each complaint can be difficult to categorise. In some cases, multiple issues are raised by the complainant. For example, they may be unhappy with the treatment they have received (clinical care) and may also raise a concern about the chiropractor's manner (relationships with patients). For this analysis, the more prevalent aspect of the complaint has been used for categorisation.

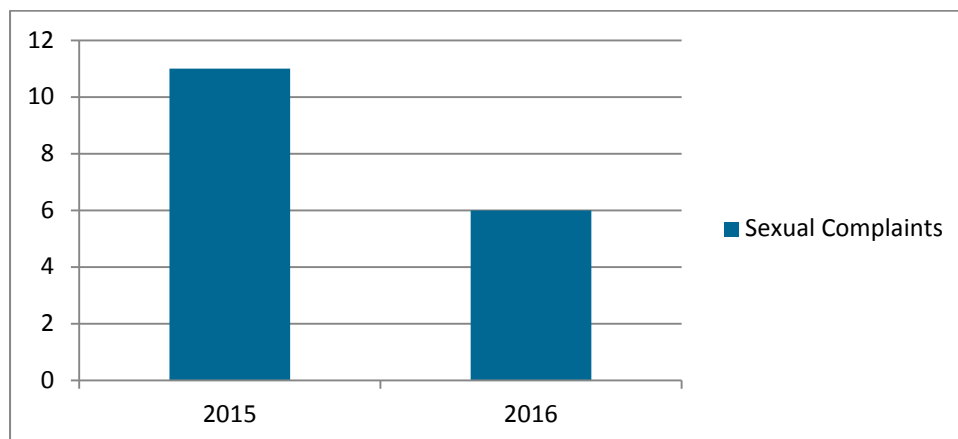
For the sake of consistency, we have adopted the categories used in an independent report commissioned by the GCC in March 2014: 'Independent Review of General Chiropractic Council Fitness to Practise Cases 2010 – 2013'<sup>3</sup>. It should be noted that complaints of a sexual nature are categorised with 'Relationships with patients' rather than 'Clinical Care'.

Nature of Complaint	2016		2015%
Clinical care (substandard treatment) etc.	21	57%	58%
Conviction/criminal offence	5	14%	6%
Relationships with patients (communication issues/sexual boundaries) etc.	3	8%	23%
Probity (relating to patient data/deception) etc.	2	5%	9%
Advertising (non-website)	2	5%	0%
Working with colleagues	2	5%	0%
Other	2	5%	0%
<b>Total</b>	<b>37</b>		

<sup>3</sup> Author: Sally Williams - <http://www.gcc-uk.org/UserFiles/Docs/Thematic%20review%20of%20ftp%20cases%202010-2013%20PUBLIC%20FINAL.pdf>

## Sexual Complaints

We have identified six complaints made in 2016 that were of a sexual nature. These have been categorised in either 'relationships with patients' e.g. sexualised comments made to the complainant or in 'conviction/criminal offence' e.g. convictions of a sexual nature. This is a reduction from the number of sexual complaints received in the prior year. In 2015 we received eleven complaints of a sexual nature.



## Advertising allegations

In 2016, we received a total of 300 allegations that related to advertising claims made on registered chiropractors websites, all of which originated from one organisation. These were received throughout the year at a rate of 25 cases per month. We also received a further 3 allegations relating to websites from different sources (members of the public).

Council agreed a policy in March 2015 on the manner in which advertising allegations would be categorised as below:

- An allegation may be such that no further action is required or any involvement by the GCC (for example, where claims are made against someone who is not under our jurisdiction or the advertisement cannot reasonably be questioned). The complainant will be notified accordingly;
- The website allegations raise such serious issues of professional conduct (as defined by the GOsC v Spencer<sup>4</sup> case) that they need to be investigated immediately by the GCC.
- All other advertising complaints will usually be referred to the Advertising Standards Authority (ASA) as the specialist agency. Once the ASA has concluded its determination, the case will be examined to see what, if any, further action needs to be taken by the GCC.

The GCC is in the process of dealing with the advertising allegations in line with the policy above.

<sup>4</sup> Spencer v General Osteopathic Council [2012 EWHC 2147]

## Equality data for complaints received in 2016

From our records we know the age and gender of chiropractors who are referred to us. We also ask all chiropractors to complete a diversity monitoring form. Provision of this information is entirely voluntary and we have received forms from 74% of the registrant population. We have used the data that we hold to produce an analysis of the diversity of the chiropractors that are complained about. As previously mentioned, considerable caution must be exercised in looking at this data.

### Complaints by Gender

50% of the register is male and 50% female

	2016		2015 %
Male	31	84%	83%
Female	6	16%	17%
	37		

### Complaints by Age range

Age ranges for the register are:  
20 – 29 (15%), 30 – 39 (31%), 40 – 49 (26%),  
50 – 59 (20%), 60+ (8%)

	2016		2015 %
20 – 29	1	3%	13%
30 – 39	9	24%	30%
40 – 49	15	41%	26%
50 – 59	7	19%	30%
60+	5	14%	0%
	37		

### Complaints by Race

	2016		2015 %
White	25	68%	60%
Black	1	3%	9%
Mixed	1	3%	4%
Asian	1	3%	0%
Unknown	9	24%	26%
	37		

### Complaints by Sexual Orientation

	2016		2015 %
Heterosexual	7	19%	25%
Unknown	30	81%	75%
	43		

### Complaints by Disability

	2016		2015 %
No	27	73%	74%
Unknown	10	27%	26%
	37		

### Complaints by Religion

	2016		2015 %
Christian	4	11%	15%
No Religion	2	5%	6%
Muslim	1	3%	0%
Jewish	0	0%	2%
Unknown	30	84%	77%
	37		

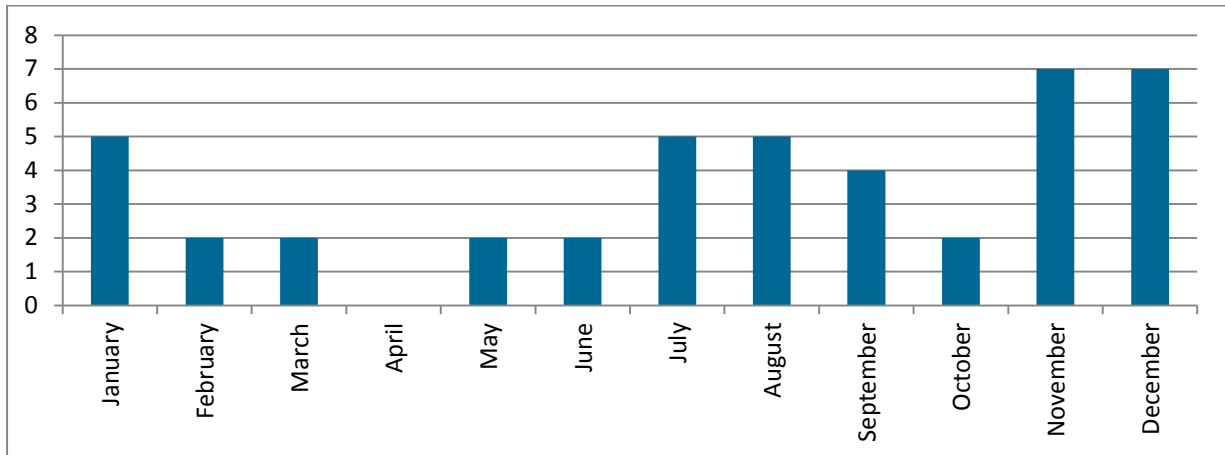
### Complaints by Nationality

Nationality for the register is British (80%), Australian (3%), American (2%), Canadian (2%), Irish (2%), South African (2%), Other (9%)

	2016		2015 %
British	26	70%	62%
Irish	4	11%	0%
American	2	5%	11%
Australian	1	3%	6%
South African	1	3%	6%
Norwegian	1	3%	2%
Danish	1	3%	4%
New Zealander	1	3%	4%
Other	0	0%	6%
	37		

## Investigating Committee

In 2016, the Investigating Committee determined **43** cases.



	Number of cases determined in 2016	Number of cases determined in 2015
January	5	5
February	2	7
March	2	0
April	0	0
May	2	5
June	2	4
July	5	4
August	5	6
September	4	0
October	2	3
November	7	0
December	7	7
	<b>43</b>	<b>41</b>

The number of cases determined in the year when compared to the number of complaints received in the year was 116% (2015: 79%).

Of the 43 cases that were determined, 1 of the complaints was received in 2013, 25 were received in 2015 and 17 were received in 2016.

Year complaint received	Concluded	%
2013	1	2%
2015	25	58%
2016	17	40%
	<b>43</b>	



At the end of 2016, there were 26 cases that were awaiting a decision by the Investigating Committee. At the end of 2015 there were 29 cases that were awaiting a decision.

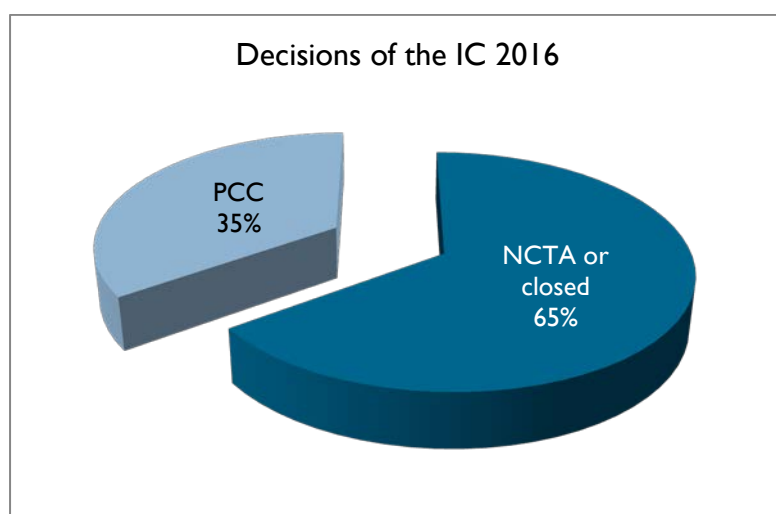
### Open IC Cases at the year end

<b>Open IC cases at year end</b>		<b>%</b>
Within 4 months	7	27%
Within 6 months	5	19%
Within 9 months	6	23%
Over 9 months	8	31%
<b>Total</b>	<b>26</b>	<b>100%</b>

## Decisions of the Investigating Committee

Of the 43 cases that were determined by the IC in 2016, 15 were referred on to the Professional Conduct Committee (35%).

Decision of the IC	2016	%	2015	%
No Case to Answer/Closed	28	65%	25	61%
Referred to PCC	15	35%	16	39%
<b>Total</b>	<b>43</b>	<b>100%</b>	<b>41</b>	<b>100%</b>



### Time taken for IC cases to be determined

We aim to complete cases in a timely manner to ensure fairness and proportionality for both registrant and complainant.

Of the 43 cases that the IC determined in 2016, 70% of cases (30) were determined within 9 months of the complaint being received.

IC Cases Determined	2016	%	2015	%
Within 4 months	4	9%	23	56%
Within 6 months	9	21%	9	22%
Within 9 months	17	40%	7	17%
Over 9 months	13	30%	2	5%
<b>Total</b>	<b>43</b>	<b>100%</b>	<b>41</b>	<b>100%</b>

	<b>Jan - Mar</b>	<b>Apr - Jun</b>	<b>Jul - Sep</b>	<b>Oct - Dec</b>	<b>Total</b>
Cases closed within 4 months	0	2	0	2	4
Cases closed within 5 - 6 months	6		0	3	9
Cases closed within 7 - 9 months	2	2	8	5	17
Cases closed after 9 months	1		6	6	13
<b>Total</b>					<b>43</b>
% closed within 9 months					70%

## Equality data for complaints determined in 2016

The 43 cases determined in 2016 involved 35 individual chiropractors. This is due to some chiropractors having more than one complaint made against them. For the purpose of the following data this information will be duplicated to show all 43 separate complaints, rather than the 35 individuals.

### Complaints by Gender

50% of the register is male and 50% female

Male	34	79%
Female	9	21%
	43	

### Complaints by Age range

Age ranges for the register are:  
20 – 29 (15%), 30 – 39 (31%), 40 – 49 (26%), 50 – 59 (20%), 60+ (8%)

20 – 29	2	5%
30 – 39	10	23%
40 – 49	18	42%
50 – 59	8	19%
60+	5	12%
	43	

### Complaints by Race

White	31	72%
Black	3	7%
Asian	1	2%
Unknown	8	19%
	43	

### Complaints by Disability

No	34	79%
Unknown	9	21%
	43	

### Complaints by Religion

Christian	6	14%
No Religion	2	5%
Unknown	35	81%
	43	

### Complaints by Sexual Orientation

Heterosexual	9	21%
Unknown	34	79%
	43	

### Complaints by Nationality

Nationality for the register is British (80%), Australian (3%), American (2%), Canadian (2%), Irish (2%), South African (2%), Other (9%)

British	28	65%
South African	4	9%
Irish	4	9%
Norwegian	2	5%
American	2	5%
Indian	1	2%
Australian	1	2%
Danish	1	2%
	43	

## Professional Conduct Committee

In 2016 there were 11 hearings determined by the PCC. Two of the cases that were considered involved more than one complaint against the chiropractor. This meant that despite there being 11 hearings heard, there were 13 complaints/cases dealt with by the PCC.

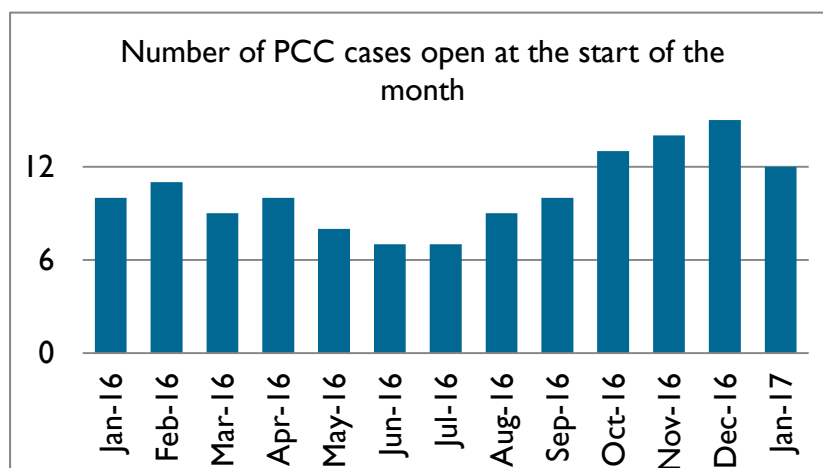
There was one chiropractor that was removed from the register in 2016. There was an additional case where a chiropractor was found guilty of unacceptable professional conduct but received a lesser sanction (conditions of practice).

The GCC offered no evidence in seven cases. The threshold test for referrals of cases to the PCC from the IC is 'case to answer'. This is the lowest threshold across all nine regulators. The test that the PCC applies, having heard all the evidence, is whether or not the allegation is well founded.

In three cases the chiropractor was found not guilty of unacceptable professional conduct.

PCC decision	2016	%	2015	%
Removal	1 (2 complaints)	9%	1	5%
Suspension	0	0%	1	5%
Conditions of Practice	1	9%	1	5%
Admonishment	0	0%	5	23%
No UPC	3	27%	8	36%
GCC offered no evidence	6 (7 complaints)	55%	6	27%
<b>Total</b>	<b>11</b> <b>(13 complaints)</b>	<b>100%</b>	<b>22</b>	<b>100%</b>

## PCC Caseload



At the end of 2016 there were 12 cases that were still to be determined by the PCC. This is a slight increase from the number open at the end of 2015.

## Equality data for registrants at PCC hearings in 2016

### PCC hearings by Gender

50% of the register is male and 50% female

	2016		2015 %
Male	10	91%	68%
Female	1	9%	32%
	11		

### PCC hearings by Age range

Age ranges for the register are:  
20 – 29 (15%), 30 – 39 (31%), 40 – 49 (26%),  
50 – 59 (20%), 60+ (8%)

	2016		2015 %
20 – 29	1	9%	5%
30 – 39	4	36%	41%
40 – 49	1	9%	23%
50 – 59	3	27%	27%
60+	2	18%	5%
	11		

### PCC hearings by Race

	2016		2015 %
White	3	27%	68%
Black	1	9%	0%
Asian	2	18%	9%
Unknown	5	45%	23%
	11		

### PCC hearings by Religion

	2016		2015 %
Christian	0	0%	9%
No Religion	1	9%	9%
Unknown	10	91%	73%
Sikh	0	0%	5%
Other	0	0%	5%
	11		

### PCC hearings by Sexual Orientation

	2016		2015 %
Heterosexual	1	9%	32%
Unknown	10	91%	68%
	11		

### PCC hearings by Disability

	2016		2015 %
No	4	36%	82%
Unknown	7	64%	18%
	11		

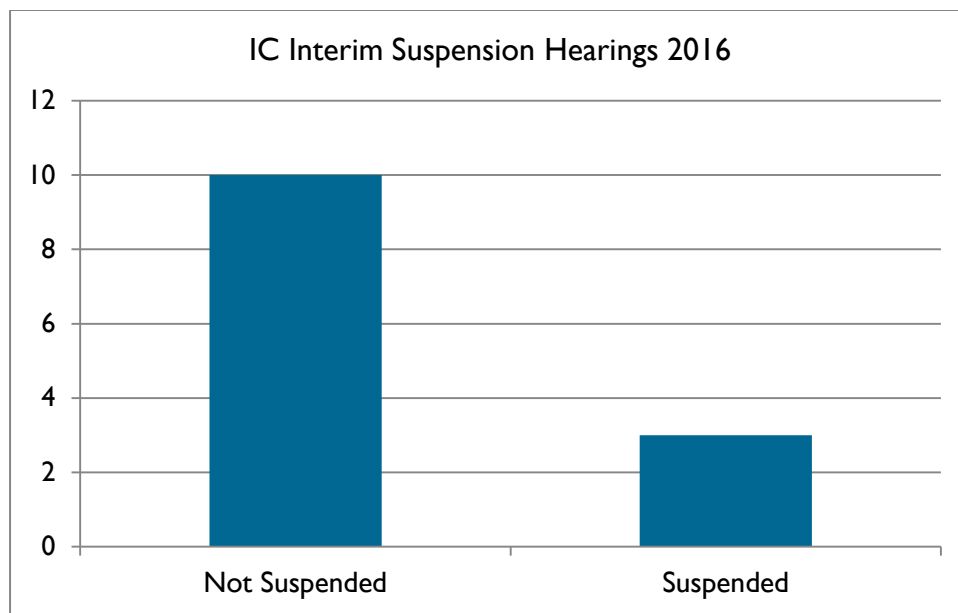
### PCC hearings by Nationality

	2016		2015 %
British	8	73%	68%
New Zealander	1	9%	0%
South African	1	9%	9%
Indian	1	9%	0%
Other	0	0%	25%
	11		

## IC Interim Suspension Hearings 2016

If the Investigating Committee is satisfied that it is necessary to do so in order to protect members of the public, it may order the Registrar to suspend the chiropractor's registration (an 'interim suspension order'). The order shall specify the period of the suspension, which shall not exceed two months beginning with the date on which the order is made.

Before making an order, the Investigating Committee shall give the chiropractor concerned an opportunity to appear before it and to argue his/her case against the making of the proposed order at a hearing. The chiropractor is entitled to be legally represented.



There were 13 IC interim suspension hearings held in 2016. 3 Chiropractors were suspended as a result of these hearings.

There were no PCC interim suspension hearings held in 2016.

## Review Hearings 2016

In cases where either a suspension or a conditions of practice order has been placed on the chiropractor's registration, the chiropractor is often required to attend a review hearing to determine whether they are fit to practice unrestricted.

There were two review hearings held in 2016, both were to consider whether the conditions of practice orders and the relevant requirements of these orders had been adhered to by the chiropractor. In both cases the PCC determined that the chiropractors were fit to practice unrestricted and revoked the conditions applied to their registrations.

## Annex A

## PSA Dataset for 2016 (FTP)

		Q1	Q2	Q3	Q4	Annual
Number of cases considered by an Investigating Committee/Case Examiner:		9	6	16	20	<b>51</b>
Number of cases concluded by an Investigating Committee/Case Examiner:		9	4	14	16	<b>43</b>
Number of cases considered by a final Fitness to Practise Committee/Case Examiner:		4	6	2	6	<b>18</b>
Number of cases concluded by a final Fitness to Practise Committee/Case Examiner:		4	4	0	5	<b>13</b>
Time from receipt of initial complaint to the final Investigating Committee/Case Examiner decision (in weeks):	Median	25	20	36	33	
	Longest case	46	35	89	157	
	Shortest case	21	4	28	4	
Median time to interim order committee decision (in weeks):	From receipt of complaint	10	6.5	5	8	
	From decision that there is information indicating the need for an interim order	5	4.5	4	5	
The number of interim orders which have not been reviewed by a committee within the required timeframe		0	0	0	0	<b>0</b>
Number of open cases (at the end of the quarter) which are older than:	52 weeks	3	1	8	11	
	104 weeks	1	1	1	1	
	156 weeks	0	0	0	0	
Number of cases that are closed due to the referrer being anonymous:		0	0	0	0	<b>0</b>
Number of occasions a case has been referred to another investigating body/regulator:		2	0	0	0	<b>2</b>
Number of cases concluded by an Investigating Committee/Case Examiner with the following outcome:	NCTA and Withdrawn/Closed	5	3	8	12	<b>28</b>
	Referral to Fitness to Practise Committee	4	1	6	4	<b>15</b>