



SLOVENSKI STANDARD

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Osteopatska zdravstvena oskrba

Osteopathic healthcare provision

Osteopathische Gesundheitsversorgung

Prestations de soins d'ostéopathie

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Osteopathic healthcare provision

Prestations de soins d'ostéopathie

Osteopathische Gesundheitsversorgung

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COMITÉ EUROPÉEN DE NORMALISATION
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Contents

Page

European foreword	4
Introduction	5
1 Scope	6
2 Terms and definitions	6
3 Description of Osteopathy	8
4 Clinical practice	9
4.1 General	9
4.2 Essential competencies for osteopathic practice	9
4.3 Case History, examination and interpretation of the findings	10
4.4 Osteopathic treatment	10
4.5 The osteopathic profession	11
4.5.1 General	11
4.5.2 Continuing professional development	11
4.5.3 Quality management	11
5 Ethics	12
6 Education and Training	12
6.1 General	12
6.2 Forms and/or categories of education	12
6.2.1 General	12
6.2.2 Common features of both Type I and Type II programmes	12
6.2.3 Type I programmes	13
6.2.4 Type II programmes	13
6.3 Core competencies: the context of osteopathic education	14
6.4 Osteopathic teaching, learning and assessment	15
6.4.1 Teaching and learning	15
6.4.2 Practical skills	15
6.4.3 Clinical education	16
6.4.4 Assessment	17
6.5 General management requirements	18
Annex A (informative) Osteopathic models	19
A.1 General	19
A.2 Biomechanical Model	19
A.3 The respiratory/circulatory model	19
A.4 The neurological model	19
A.5 The biopsychosocial model	20
A.6 The bioenergetic model	20
Annex B (normative) Ethics for osteopaths	21
B.1 General	21
B.2 Acting in the patient interest	21
B.3 Working in partnership with the patient	21

B.4	Maintaining public trust and confidence in the osteopathic profession	22
B.5	Maintaining, respecting and protecting patient information	22
B.6	Working in partnership with healthcare providers	23
Annex C (informative) Types of techniques used in osteopathic treatment.....		24
C.1	General	24
C.2	Direct techniques	24
C.3	Indirect techniques.....	24
C.4	Balancing techniques	24
C.5	Combined techniques	24
C.6	Reflex-based techniques	24
C.7	Fluid techniques	24
Annex D (informative) A-deviations		25
Bibliography.....		35

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SIST EN 16686:2015

<https://standards.iteh.ai/catalog/standards/sist/3c533453-a074-4a04-96eb-e10bf9b143f4/sist-en-16686-2015>

European foreword

This document (EN 16686:2015) has been prepared by Technical Committee CEN/TC 414 “Project Committee - Services in osteopathy”, the secretariat of which is held by ASI.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by January 2016, and conflicting national standards shall be withdrawn at the latest by January 2016.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN [and/or CENELEC] shall not be held responsible for identifying any or all such patent rights.

Attention is drawn to the fact that in certain countries specific national regulations apply and take precedence over this European Standard. Users of this European Standard are advised to inform themselves of the applicability or non-applicability for this European Standard by their national responsible authorities.

According to the CEN/CENELEC Internal Regulations, the national standards organisations of the following countries are bound to implement this European Standard: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

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Introduction

Osteopathy is a primary contact and patient-centred healthcare discipline, that emphasizes the interrelationship of structure and function of the body, facilitates the body's innate ability to heal itself, and supports a whole-person approach to all aspects of health and healthy development, principally by the practice of manual treatment.

Patients who choose osteopathic treatment have to be assured of the quality and the standard of care that they will receive.

This standard is concerned with the provision of osteopathic diagnosis, treatment and care. It aspires to set a standard that provides for high quality clinical practice, education, safety and ethics for the benefit of patients.

This European Standard does not supersede national legislation.

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EN 16686:2015 (E)

1 Scope

This European Standard specifies the requirements and recommendations regarding the healthcare provision, facilities and equipment, education, and ethical framework for the good practice of osteopathy.

2 Terms and definitions

For the purposes of this document, the following terms and definitions apply.

2.1

care

interventions that are designed to maintain and improve health

2.2

case history

detailed account of a patient's health and disease status and other information provided by them

2.3

clinical record

document which relates to the case history, examination, assessment, evaluation, diagnosis, treatment or care provided to a patient, and any necessary administrative information

2.4

co-morbidities

concomitant but unrelated pathological or disease processes

2.5

consent

acceptance by a patient of a proposed course of action to be taken by an osteopath after having been informed of relevant factors relating to it

2.6

continuing professional development

CPD

means by which members of a profession maintain, improve and broaden their knowledge and skills relating to that profession

2.7

diagnosis

the development by an osteopath of working hypotheses of dysfunction(s), and recognition of signs and symptoms of illness or disease using diagnostic processes of examination, assessment and evaluation

Note 1 to entry: This definition is being used in this European Standard, whether or not the legislation of an individual state prevents such a term being used by an osteopath.

2.8

dysfunction

area of the body with impeded biomechanical, neuroelectrical, vascular, biophysical, biochemical or cellular function which is causing a decrease in health

2.9

health

state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity

2.10**healthcare**

activity carried out by a professional in the field of the health and/or well-being of the person

Note 1 to entry: This definition is being used in this European Standard, whether or not the legislation of an individual state prevents such a term being used by an osteopath.

2.11**osteopath**

osteopath (in some circumstances and some countries referred to as an osteopathic physician or osteopathic practitioner) is an individual who has completed an appropriate education in osteopathy and continues to demonstrate the required standards

2.12**osteopathy**

primary contact and patient-centred healthcare discipline, that emphasizes the interrelationship of structure and function of the body, facilitates the body's innate ability to heal itself, and supports a whole-person approach to all aspects of health and healthy development, principally by the practice of manual treatment

Note 1 to entry: The terms osteopathy and osteopathic medicine are sometimes, and in some countries, used interchangeably.

2.13**patient confidentiality**

right of an individual to have information about them kept private

2.14**primary contact profession**

profession that a patient may consult directly but does not imply managing the multidisciplinary care of the patient

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Note 1 to entry: This definition is being used in this European Standard, whether or not the legislation of an individual state prevents such a term being used by an osteopath.

2.15**referral**

transfer of responsibility for care to a third-party for a particular purpose, such as additional investigation, care or treatment that is outside the referring practitioner's competence

2.16**treatment**

interventions that are designed to improve, maintain and support health, relieve symptoms, or reduce dysfunction and disease

3 Description of Osteopathy

The practice of osteopathy uses osteopathic, medical and scientific knowledge to apply the principles of osteopathy to patient diagnosis and treatment.

The aim of osteopathy is to improve and support all aspects of health and healthy development. Osteopathic treatment may be preventive, curative, palliative or adjuvant.

Osteopaths analyse and evaluate the structural and functional integrity of the body using critical reasoning of osteopathic principles to inform individual diagnosis and treatment of the patient.

These principles are:

- the human being is a dynamic functional unit, whose state of health is influenced by the body, mind and spirit; if one part is changed in the system, the balance of the whole pattern will be affected;
- the body possesses self-regulatory mechanisms and is naturally self healing; the human being always tries to regain its own dynamic balance and establish homeostasis; and
- structure and function are interrelated at all levels of the human being.

The osteopathic approach to healthcare is patient-centred and focused on the patient's health rather than disease-centred.

Scientific rigour and evidence-informed practice are an important part of patient treatment and case management.

Osteopaths use manual contact to identify and evaluate movement in all structural and functional aspects of the patient, identifying alterations of function and movement that impede health and addressing these. The highly developed sense of touch and attention to complex systems as a unit is typical of an osteopathic approach.

Osteopathy is an independent healthcare discipline. Osteopaths should also cooperate with practitioners of other disciplines.

Osteopathy is based on principles drawn from human physiology, anatomy, embryology and other bio-medical sciences. In consequence of the complexity of the human organism there are a number of different models that are used in osteopathy.

The models set out in Annex A articulate how an osteopath seeks to influence a patient's physiological responses. These models influence the gathering of diagnostic information and the interpretation of the significance of structural findings in the overall health of the patient. Typically a combination of models will be appropriate for an individual patient and adapted to the patient's diagnosis, co-morbidities, other therapeutic regimens, and response to treatment.

The terms osteopathy and osteopathic medicine are sometimes, and in some countries, used interchangeably.

4 Clinical practice

4.1 General

Osteopathy is focused on the patient's health rather than being disease-centred. Osteopaths shall have an understanding of osteopathic and non-osteopathic models of health and disease and how these inform a critical consideration of practical patient care and management. They shall have a critical awareness of relevant research and of principles and practice of relevant healthcare approaches for adequate referral, cooperation and adjuvant treatment.

4.2 Essential competencies for osteopathic practice

Osteopaths share a set of core competencies that guide them in the diagnosis, management and treatment of their patients and form the foundation for the osteopathic approach to healthcare. The following are essential competencies for osteopathic practice which could be included in all training programmes (see 6.3 below):

- a) osteopathic history, principles, and approach to healthcare;
- b) basic sciences relevant to osteopathic practice;
- c) diagnosis and treatment planning;
- d) knowledge of the mechanisms of action of manual therapeutic interventions and the biochemical, cellular and gross anatomical response to treatment;
- e) ability to appraise medical and scientific literature critically and incorporate relevant and contemporary information into practice;
- f) competency in the palpatory and clinical skills necessary to diagnose dysfunctions of the body, with an emphasis on osteopathic diagnosis (see Annex A);
- g) competency in a broad range of osteopathic skills;
- h) proficiency in physical examination and the understanding of relevant tests and data, including diagnostic imaging and laboratory results;
- i) understanding and expertise in diagnosis and osteopathic treatment using the osteopathic models (see Annex A) and evaluation of the outcomes;
- j) thorough knowledge of the indications for osteopathic treatment, and contraindications to specific osteopathic techniques;
- k) ethical and legal aspects of healthcare;
- l) a basic knowledge of commonly used conventional medicine and Complementary and Alternative Medicine;
- m) a knowledge of practice, financial and data management, and regulation relevant to osteopathic practice; and
- n) self awareness and the ability to be self-critical, and to be able to respond positively to feedback from patients and peers.

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4.3 Case History, examination and interpretation of the findings

Osteopaths shall take a case history of the patient and analyse the patient's presenting complaint. They shall be able to interpret verbal and non-verbal information. This information shall be individually recorded and stored safely. Confidentiality shall be maintained at all times.

Osteopaths shall give patients the information they need and in a way they can understand and benefit from. There should be an explanation of benefits and risks and as a result, consent given by the patient for the treatment/procedure.

Osteopaths shall formulate and record a diagnosis or rationale for care or referral, based on the osteopathic evaluation and the case history. The diagnosis and rationale for care shall be kept under review while caring for the patient.

Osteopaths shall select an appropriate course of action based on a rational decision-making process which includes a critical consideration of limits of competence, the likely effects of osteopathic treatment, relevant research and the patient's wishes.

Osteopaths shall demonstrate a detailed knowledge and understanding of human structure and function, with great emphasis on functional interrelation of all the systems of the body. This shall be sufficient to recognize, identify and differentiate between normal and abnormal structures and processes in the living body. Osteopaths consider and recognize through an understanding of the models (see Annex A) and principles that the presenting problem may be caused by underlying health concerns.

Osteopaths shall conduct an effective assessment and undertake a thorough, sensitive and appropriately detailed evaluation.

As well as using clinical skills to evaluate a patient, osteopaths shall also be able to determine whether further investigations are necessary.

Osteopaths shall have a knowledge and understanding of human disease and dysfunction sufficient to inform clinical judgement and to diagnose and to recognize disorders not suitable for specific osteopathic techniques.

4.4 Osteopathic treatment

Osteopaths shall generate accurate, contemporaneous clinical records of the outcomes of the patient evaluation and treatment process.

Osteopaths shall be able to justify how osteopathic treatment is applied to the patient.

Osteopaths shall select, use and modify a wide range of osteopathic techniques and patient management approaches. Osteopaths shall assess the effect of treatment during and after its application, where possible.

The purpose of osteopathic treatment may be preventive, curative, palliative or adjuvant. Osteopaths shall endeavour to help the patient regain as much of their natural structural integrity and function as possible. Osteopaths shall guide the patient to an understanding of the significance of the potential effect of the treatment and enhance the patient's understanding and commitment to individual exercise, preventive measures, adapting lifestyle and diet, as well as making use of healthcare disciplines, as appropriate. Osteopaths shall make clear the importance of these aspects and self-care activities for the patient's health. This includes explanation of its potential benefits, risks and limitations.

Osteopaths shall help patients to make informed choices about their personal healthcare maintenance. The osteopath shall educate the patient in the understanding of their disorders and how to manage their conditions or prevent recurrence.