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KAUNIHERA HAUMANU TUAHIWI O AOTEAROA | OSTEOPATHIC COUNCIL OF NEW ZEALAND

RESPONSIBLE AUTHORITY PERFORMANCE REVIEW REPORT SUBMISSION

The final report for this responsible authority's review is submitted to the Ministry of Health and the review was completed as below.

AUTHORITY NAME	Kaunihera Haumanu Tuahiwi o Aotearoa Osteopathic Council of New Zealand
DATE OF REVIEW	30 & 31 March 2026
FINAL REPORT DATE	25 May 2026

Review Team		
Name	Role	Background
Donna Gordon	Lead Reviewer	Qualified and experienced lead assessor and Registered Nurse.
Tupotahi Maniapoto	Bi-Cultural Reviewer	Qualified and experienced assessor.

Stakeholder interviews	
Name/role/de-identified	comments
Ms A- Practitioner	<p>Ms A has found the connection to the RA easy to access, The Registrar is fully open and transparent when called or emailed seeking guidance.</p> <p>They have found the RA or the Registrar to be professional and clear with any subject matter relating to Osteopathy.</p>
Mr S - Practitioner	<p>Mr S has had a professional relationship with the RA for a long time. He has enjoyed working on some great developments within the RA and their organisation.</p> <p>He is New Zealand trained with a Current APC.</p> <p>He stated he has found the process for APC easier now with the easier online process. He feels his experience as a stake holder to the RA has been on point and forward looking.</p>
Mr Y, - Osteopath NZ	<p>As a provider for the RA, they find the RA to be very respectable in regards to their practice and their organisation. They have had great dialogue regarding, the educational environment especially during Covid and post covid.</p> <p>Communication between Osteopath New Zealand and the RA has always been a good and clear pathway. Governance</p>

	<p>between the two groups crosses from time to time, with a workforce less than 600 in New Zealand, Many practitioners maintain regular contact via Osteopath New Zealand</p>
<p>Ms E, - Osteopath stakeholder/provider</p>	<p>As the Program lead for our organisation, Tim (Registrar) has been fantastic with clarity with the scope of practice and with details regarding our program the RA has been very supportive.</p> <p>We maintain a good ongoing relationship with the RA or Tim and have no concerns or worries to share regarding our connection to the organisation.</p>
<p>Mrs L - Practitioner Stakeholder</p>	<p>Mrs L stated the Osteopath RA are approachable but are also clear about boundaries. They will clearly identify if any question is a matter that does not sit in their remit.</p> <p>Mrs L has found the RA to be clear and supportive throughout the growth and development of practitioners training through the program.</p> <p>She has regular contact with the RA through the Mentoring she does with upcoming practitioners and overseas practitioners gaining registration in NZ.</p>
<p>Summary</p>	<p>All stakeholders are current APC holders. Non identified as trained overseas. All found the online webpage easy to navigate.</p> <p>Common Themed narrative:</p> <p>Open and easily contactable</p> <p>The Registrar is very approachable.</p> <p>As practitioners the RA has been clear with the scope of practice.</p> <p>Overall response from the stakeholders was very positive with no obvious concerns regarding communication and access.</p>

Responsible Authority Core Performance Standards Review Report

Authority Name	Te Kaunihera Haumanu Tuahiwi o Aotearoa Osteopathic Council of New Zealand
Date of Review Report	26 April 2026
Name of reviewing Designated Auditing Agency	BSI New Zealand

Executive Summary

Te Kaunihera Haumanu Tuahiwi o Aotearoa | Osteopathic Council of New Zealand (the Council) comprises seven members, consisting of a mixture of practitioner and lay members ([Meet the Council](#)). The Council is supported by a Registrar and an Administrator.

The Registrar took up their position in June 2021 and had been the previous chair of the Council. The Registrar is employed by the Nursing Council of New Zealand and is a member of their executive leadership team. The Nursing Council of New Zealand through a service level agreement provides secretariat, and full regulatory services for the Council. The Council is independent (from the Nursing Council of New Zealand) and receives timely reports from the Registrar including, financial, registration updates, notifications received, and emerging issues for the sector.

The Council's previous Regulatory Authority Performance Review (the Review) was completed in 2021. The three recommendations made were then incorporated into the Council's work plan. An update follows:

- (i) It is recommended the reviews outlined in the Council's strategic goals are completed – namely reviewing the cultural competencies to better reflect te Tiriti o Waitangi obligations and review the osteopathic scope of practice.

Since the Review the Council has updated their competencies [Osteopathic Practice Competencies Jan23](#). The competencies include a domain related to te Tiriti o Waitangi partnership responsibilities. All scopes are required to adhere to these competencies.

Council's consideration of the osteopathic scopes of practice identified the Western Medical Acupuncture scope as a priority for review following feedback from the profession and a changing educational environment. This will then lead to a more general review of the osteopathic framework.

- (ii) It is recommended that engagement with Māori continue, and the reviews outlined in the Council's strategic goals are completed.

The Council has invested heavily in developing relationships and engagement with Māori, culminating in the establishment of Te Mana Tautoko as the Council's Māori advisory group in early 2024. Te Mana Tautoko provides advice on projects and practitioner-facing guidance.

The Council has reviewed and strengthened its [Code of Conduct November 2023](#) since the previous review. In addition to stakeholder consultation a *Critical Te Tiriti Analysis* was undertaken by the eventual Te Mana Tautoko Chair. The Council now describes its Te Tiriti expectations clearly in both the Code of Conduct and the Osteopathic Practice Competencies.

- (iii) It is recommended that the Council's strategic goal two is completed - *To develop and maintain effective engagement with the public, Māori and other stakeholders, to foster greater awareness and understanding of the roles and responsibilities of the Council.*

The Council invested heavily in engagement with Māori resulting in the establishment of Te Mana Tautoko. Te Mana Tautoko comprises a layperson (Chair) and three Māori osteopathic members. The Council saw Te Mana Tautoko as not only a vital source of advice, but a way to foster the development of osteopaths and potentially increase representation of Māori on the Council. In late 2024 the appointment of a Te Mana Tautoko member to the Council was seen as a measure of success.

The Council has also continued their professional development through activities such as attending a full day workshop run by the Pakeha Project and attending a noho marae at Te Rau Karamu Marae. The noho marae incorporated workshops on Te Ao Māori and Māori governance, as well as providing the opportunity for Council to hold their regular Council meeting in this prestigious space.

The current review

The Council's work programmes are led by the Council's strategic priorities (2024-2026) which include:

- We will empower osteopaths to provide safe care
- We will foster a mature working relationship with the osteopathic profession
- We will engage with the public to inform and support healthcare decisions
- We will uphold and implement te Tiriti throughout our work.

The Council has maintained oversight of a relatively stable practising workforce, with 654 osteopaths holding current annual practising certificates as of 31 March 2025. This compares to 551 registered as at the end of March 2021.

The Council has seven scopes of practice, all are required to adhere to the Osteopathic Practice Competencies and the Code of Conduct. The competencies and the code were reviewed, consulted on and published in 2023. The Council's consideration of the osteopathic scopes of practice identified the Western Medical Acupuncture and Related Needling Techniques scope as a priority for review following feedback from the profession and a changing educational environment. This will then lead to a more general review of the osteopathic framework. There are prescribed qualifications for each scope which are aligned with the Council's standards of competence.

There is now only one accredited education programme leading to registration as an osteopath. This is because Unitec has ceased to offer the Master of Osteopathy programme. At the time of this review, it is understood there will be no further Unitec graduates applying for registration. Ara, who offer a Bachelor of Musculoskeletal Health and Postgraduate Diploma in Osteopathy, was accredited in 2022 and will be due to reaccreditation in 2027. The Council Chair and Registrar acknowledge there is risk in having one accredited programme leading to registration in the general scope. There are Accreditation Standards for Education Programmes leading to Registration as an Osteopath (November 2021). The standards include Te Tiriti o Waitangi responsibilities, public safety, academic governance and quality assurance, programme of study, student experience, assessment. The Council has mechanisms that can be put in place for those providers who may not meet the required standards, such as imposing shortened period/s of accreditation and/or implementing intensive monitoring regime.

The Council's website includes a public register that is accessible and supported by a digital platform enabling real-time regulatory oversight. There are four registration pathways including applicants from a New Zealand accredited programme, applicants registered in Australia, applicants from a Council recognised jurisdiction and applicants from a non-recognised jurisdiction. All overseas applicants are required to complete a 12-month Competent Authority Pathway Programme (CAPP). Overseas qualified registrants' scope of practice will be subject to a condition 'preceptorship' on their annual practising certificate (APC). The Council is reviewing the CAPP programme to ensure requirements are targeted and efficient while meeting the expected standard.

The Council has a competence framework designed to give effect to the purpose of the Act. The competence programme audits 5% of registrants biannually. Core requirements include 50 hours of CPD in every two-year recertification cycle. Mid and end-of-cycle reporting suggests practitioners are completing CPD activities,

however some upskilling may be required in developing learning plans and reflective practice. The mandatory child and adolescent health recertification programme that was implemented in 2017 continues to be considered by the Council. The Council has determined that registrants holding a Bachelor of Musculoskeletal Health and Postgraduate Diploma in Osteopathy are exempt as there is sufficient coverage across the programmes.

The Council has established, fair, transparent and proportionate mechanisms to support effective management of complaints and notifications relating to the conduct of osteopaths. Information is accessible on the Council's website. The Council manages complaints and notifications using the Nursing Council of New Zealand's framework. The Registrar attends the Nursing Council of New Zealand's twice weekly case management meetings when a notification is made about an osteopath's practice. The case management meetings include completion of a risk assessment and where any risk of harm or serious harm is identified, the Registrar and Deputy Registrars consider whether interim orders may be required to ensure public protection. The practitioner is fully informed as the process progresses. The Nursing Council of New Zealand apply the Tukatuku Rau¹ framework to their fitness-to-practice processes, this means the Council notifications processes are being managed using the intent of the framework. The Council Chair and Registrar indicated interest in further discussion with the Council around implementing Tukatuku Rau principles across other Council functions.

The Council demonstrates an understanding of the environment in which it works and gave examples of developing working relationships with the New Zealand Chiropractic Board and Physiotherapy Board of New Zealand. The Council is clear of its core purpose as demonstrated on the website, in the strategic plan and annual reports to name a few.

In effecting the Council's strategic priority to uphold and implement te Tiriti throughout their work they have established Te Mana Tautoko - an advisory body that works with the Council to ensure its strategic focus, projects and standards reflect te ao Māori. Additionally, significant resources have been invested in strengthening engagement with osteopaths who identify as Māori and other intersectional identities across all projects. The Council's Osteopathic Practice Competences and Code of Conduct with their inclusion of te ao Māori demonstrate a commitment to te Tiriti in their work.

The Council has made substantive progress against the recommendations of the previous Review through updating competencies and strengthening conduct

¹ Tukatuku Rau - in 2021 the Tukatuku Rau framework for a new way of regulation was developed. Tukatuku Rau complements and strengthens existing frameworks by offering a values-based, Māori led approach to regulation. It is a relational approach and has resulted in a more effective way of working with practitioners while ensuring public safety is maintained.

expectations, establishing Te Mana Tautoko and Māori engagement to actively inform the Council's programmes of work, and progressing a targeted scope review that responds to identified risk and sector change. The Council has also continued to engage in continual improvement of Council functions and processes, including utilising the efficiencies that arise from the relationship with the Nursing Council of New Zealand.

Recommendations

Te Kaunihera Haumanu Tuahiwi o Aotearoa | Osteopathic Council of New Zealand has fully achieved all the core performance standards.

Functions under section 118 HPCA Act 2003 and their related core performance standards

Purpose and requirements

Responsible Authorities are designated under the Health Practitioners Competence Assurance Act 2003 (the Act) to fulfil certain functions. An amendment in 2019 to the Act adding section 122A, required a performance review of all Responsible Authorities be conducted within three years of enactment, with subsequent reviews conducted at intervals of no more than five years. The Ministry of Health (the Ministry) is responsible for the facilitation of these reviews.

Performance reviews provide assurance to the Crown and the public that responsible authorities are performing their functions efficiently and effectively. This includes the assurance that: the responsible authorities are carrying out their required functions in the interests of public safety, their activities focus on protecting the public without being compromised by professional self-interest, and their overall performance supports high public confidence in the regulatory system.

Performance reviews will assess a responsible authority's performance against the full set of *Core Performance Standards*. These standards are aligned with the functions under section 118 of the HPCA Act. The Ministry may require review of additional aspects of Responsible Authorities' performance.

Risk management

Identify the degree of risk to patient safety and/or public confidence that is associated with the level of attainment the responsible authority achieves for each criterion. Review the 'risk' in relation to its possible impact based on the consequence and likelihood of harm occurring if the responsible authority does not fully attain the criterion. Use the risk management matrix when the audit result for any criterion is partially attained or unattained.

To use the risk management matrix, you need to:

1. consider what consequences for consumer safety might follow from the responsible authority achieving partially attained or unattained for a criterion, within a range from extreme/actual harm to negligible risk of harm occurring
2. consider how likely it is that this adverse event will occur due to the provider achieving partially attained or unattained for a criterion, within a range from being almost certain to occur to rare
3. plot the findings on the risk assessment matrix to identify the level of risk, and prioritise risks in relation to severity
4. approve the appropriate action the provider must take to eliminate or minimise risk within the timeframe. Note that timeframes are set based on full resolution of the requirement, which may include a systems change or staff training programme. Anything requiring urgent attention is identified in the report, along with any longer timeframe needed to make sustainable change.

The Risk management matrix uses a probability versus impact quadrant with the following risk categories: low, low-med, medium and high.

Function 1: Section 118a) To prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
1.1	The RA has defined clear and coherent competencies for each scope of practice	<p>The Council has seven scopes of practice:</p> <ol style="list-style-type: none"> 1. General Osteopath (Gazette notice 2013); amendment for prescribed quals Gazette 2022) (654 practitioners) 2. Extended Scopes: Western Medical Acupuncture and Related Needling Techniques (Gazette notice 2013)² (39 practitioners) 3. Vocational³: <ol style="list-style-type: none"> i. Gerontology (Gazette notice 2013) (no practitioners) ii. Pain Management (Gazette notice 2013) 5 practitioners iii. Child and Adolescent Health (Gazette Child and Adolescent 2017) (no practitioners) 4. Special Purposes (Gazette notice 2013)⁴ 5. Trainee Osteopath (limited to six months, can be extended) (Gazette notice 2013)⁵ <p>All scopes adhere to Osteopathic Practice Competencies Jan23 and Code of Conduct November 2023. The vocational and extended scoped require a practitioner to be concurrently registered in the General Osteopathic Scope of Practice.</p> <p><u>Work underway:</u></p>	FA			

² Require practitioner to be concurrently registered in the General Osteopathic Scope of Practice. As of 31 March 2025, there were 39 Osteopaths holding extended scope.

³ As per footnote 1.

⁴ As at 31 March 2025, one active practitioner holds this scope as an educator.

⁵ There are currently no practitioners registered under this scope and, as the Unitec programme has recently completed a teach-out process, it is expected that this scope will no longer be required after the final students either complete or withdraw from the programme.

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		<p>In December 2024 the Council recognised that Osteopaths were commonly using needling techniques, however no standards of training were determined leading to competency in practice and no sustainable means of developing and delivering training programmes existed. A draft competency framework for Western Medical Acupuncture (WMA) was developed, with the aim of supporting and guiding the use of safe needling techniques within osteopathic practice.</p> <p>This work included appropriate consideration of the principles of Te Tiriti o Waitangi as described in the Osteopathic Council Code of Conduct and incorporates advice and feedback from Te Mana Tautoko, the Māori advisory group to the Council.</p> <p>Feedback from the consultation on this framework has led to a further review of the underlying WMA scope of practice itself to improve its clarity and practicality (in progress).</p>				
1.2	The RA has prescribed qualifications aligned to those competencies for each scope of practice	<p>Each scope of practice has prescribed qualifications for both New Zealand trained and internationally qualified osteopaths. The vocational and extended scoped require a practitioner to be concurrently registered in the General Osteopathic Scope of Practice.</p> <p>New Zealand qualifications as outlined below:</p> <ul style="list-style-type: none"> • General osteopath: qualification accredited by the Council - Master of Osteopathy or Bachelor of Musculoskeletal Health and Postgraduate Diploma in Osteopathy • Extended scope: hold one of the qualifications prescribed for registration and hold: <ul style="list-style-type: none"> ○ PGC in Western Acupuncture (AUT) OR ○ PGC in Western Medical Acupuncture (University of Hertfordshire). • Vocational: 	FA			

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Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		<ul style="list-style-type: none"> ○ Gerontology: registered in general scope, hold PGDip in Health Science in Oder Adult (AUT) (or similar) ○ Pain Management: registered in general scope, hold PGDip in Health Science endorsed in Pain and Pain Management (Otago) ○ Child and Adolescent Health: registered general osteopathic scope and hold a postgraduate diploma in health science in child health (AUT) ● Special purposes: previously registered in the general osteopathic scope of practice, or meet the requirements for general registration and satisfy the Council that they have advanced standing or specialist skills in one of the designated areas ● Trainee Scopes (limited to six months): Registered trainee osteopaths are primary healthcare practitioners who are enrolled in the prescribed qualification for the General Osteopathic Scope of Practice (the Unitec Institute of Technology Master of Osteopathy course – refer footnote 5) 				
1.3	The RA has timely, proportionate, and transparent accreditation and monitoring mechanisms to assure itself that the education providers and programmes it accredits deliver graduates who are competent to practise the relevant profession	<p>Accreditation Standards for Education Programmes leading to Registration as an Osteopath (November 2021), can be found here: Policies And Guidelines. There are six standards – Te Tiriti o Waitangi responsibilities, public safety, Academic governance and quality assurance, Programme of study, Student experience, Assessment.</p> <p>Possible accreditation outcomes include:</p> <ul style="list-style-type: none"> - Unconditional accreditation granted to programmes that meet all standards. Unconditional accreditation is granted for up to five years - Conditional accreditation may be granted where the programme does not satisfy one or more standards. Conditional accreditation may be granted for up to two years. 	FA			

Function 1: Section 118a) To prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		<ul style="list-style-type: none"> - Provisional accreditation may be granted to new or revised programmes which have yet to have graduates emerge. - Declined accreditation where the provider fails to meet several standards. <p>There are monitoring mechanisms in place that include Council site visits and annual reporting.</p> <p>Unitec (provided the Master of Osteopathy) has now ceased offering this programme after a prolonged 'teach-out' process. Council completed a final Monitoring visit in 2022. Unitec noted that only one student was outstanding as of June 2024, but that they would have until the end of 2025 to complete their thesis. Final confirmation had not been received at the time of the review; however, it is expected this student will now not complete the qualification and there will be no further Unitec graduates applying for registration.</p> <p>Ara was established as a new accredited provider delivering a cojoined Bachelor of Musculoskeletal Health and Postgraduate Diploma in Osteopathy and were most recently accredited in 2022 and will be due for re-accreditation in 2027.</p> <p>The Council Chair and Registrar acknowledge the risk of having only one accredited provider leading to registration in the general scope.</p>				
1.4	The RA takes appropriate actions where concerns are identified	<p>The Accreditation Standards for Education Programmes leading to Registration as an Osteopath (November 2021) (Policies And Guidelines) details the actions that will be taken if concerns are identified during the monitoring process.</p> <p>Monitoring results were discussed.</p>	FA			
1.5	Reviews prescribed qualifications and scopes of	There are seven scopes of practice – as above. The Council has considered all scopes of practice and determined the WMA extended	FA			

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	practice (at minimum of once every five years)	<p>scope as a priority. This was in response to feedback from the profession and a changing educational environment.</p> <p>Review of the WMA extended scope initially focused on developing clear competence standards for the scope - Consultations (2024) - but has progressed to a full review of the scope of practice, competence standards and educational requirements due to the feedback received from the initial consultation.</p> <p>A more general review of the scope of practice scheme will follow and include consolidation of the current gazette notices, which include multiple amendment notices.</p> <p>During the review the Council Chair and Registrar discussed the current work programme underway in respect of the WMA competencies and a wider consultation on the seven scopes. There are no perceived roadblocks to progressing this wider review.</p>				

**Function 2: Section 118b) To authorise the registration of health practitioners under this Act, and to maintain registers.
Section 118c) To consider applications for annual practicing certificates**

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
2.1	The RA maintains and publishes an accessible, accurate register of registrants (including, where permitted, any conditions on their practice)	<p>The public register (Find A Osteopath) is accessible (sighted) and supported by iMIS (a digital platform). iMIS enables real-time monitoring, decision-making, and regulatory oversight. The system supports the full lifecycle of registration, annual practising certificates (APC), fitness to practise management and historical record-keeping. The website draws information directly from the iMIS database and updates in real time.</p> <p>Random review of the register showed Osteopaths with extended scope and/or vocational registration.</p>	FA			
2.2	<p>The RA has clear, transparent, and timely mechanisms to consider applications and to:</p> <p>a) Register applicants who meet all statutory requirements for registration</p>	<p>There are four registration pathways:</p> <ol style="list-style-type: none"> 1. Applicants from a New Zealand accredited programme 2. Applicants registered in Australia (via TTMR) 3. Applicants from a Council recognised jurisdiction (only UK) 4. Applicants from a non-recognised jurisdiction <p>Documentation required for registration is specified on the Councils website (New Zealand Applicants). Each of the different application types have specific requirements to be provided for assessment by the Council.</p> <p>New Zealand graduates and TTMR applicants receive a decision within an average of one day from the time the Council receives all necessary information, increasing to five days for those holding recognised overseas qualifications.</p>	FA			

Function 2: Section 118b) To authorise the registration of health practitioners under this Act, and to maintain registers.

Section 118c) To consider applications for annual practicing certificates

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		<p>Applicants who do not have English as a first language are required to provide evidence demonstrating their English language proficiency (English Language Policy for Registration 2025.pdf).</p> <p>Those applying from a non-recognised jurisdiction will have their qualifications considered on a case-by-case basis. Guiding documents have been updated – Overseas Applicants (2025) and Guidelines for Assessors for the assessment of qualifications and capability to practise (2024).</p> <p>Delays to processing registration applications are primarily related to the assessment of complex applications from those holding non-recognised qualifications. The average time taken from initial application can be up to 29 days for these groups (including requesting further information from the applicant and external services, such as police vetting). Council has a target decision time of 32 days for non-recognised overseas qualification applications.</p> <p>All overseas applicants are required to complete a competent authority pathway programme (CAPP) with the support of a Council approved preceptor. Preceptors receive training and provide reports to the council on a quarterly basis. The CAPP programme is 12 months. Overseas qualified registrants' scope of practice will be subject to the condition 'preceptorship' and is noted on their practising certificate. CAPP's are completed through an education provider. The Council is currently undertaking a review of the CAPP programme (Consultations).</p> <p>Return to practice policy (2024) is in place outlining the additional information Council may request and any requirements to be met prior to issuing a practising certificate for those without recency of practice (three-five years). This may include completion of whole</p>				

Function 2: Section 118b) To authorise the registration of health practitioners under this Act, and to maintain registers.

Section 118c) To consider applications for annual practicing certificates

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		or part of the CAPP. All potential requirements are outlined in policy on the Councils website (Policies And Guidelines).				
	b) Issue practicing certificates to applicants in a timely manner	The Council's online application portal allows registrants to apply for and for those who meet the necessary requirements receive APCs automatically. Those who answer application questions adversely may still be considered to hold an APC until the Registrar manually reviews the application. Where concerns may exist, the Council may also require that a practitioner manually applies for an APC (i.e. to prevent application and automated approval through the online system).	FA			
	c) Manage any requests for reviews of decisions made under delegation	The Council follows the provisions for appeals set out in Part 5 of the Health Practitioners Competence Assurance Act. The Council has not received any requests for decisions made under delegation to be reviewed by Council.	FA			

Function 3: Section 118d) To review and promote the competence of health practitioners.

Section 118e) To recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners.

Section 118k) To promote education and training in the profession

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
3.1	<p>The RA has proportionate, appropriate, transparent and standards-based mechanisms to:</p> <p>a) Assure itself that applicants seeking registration or the issuing of a practicing certificate meet, and are actively maintaining, the required standard</p>	<p>Continuing competence programme for osteopaths (effective 1 April 2021) (Policies And Guidelines) was launched following substantive review. The updated programme commenced at the start of the 2021-2022 APC year and included guidance for practitioners on the new system. The competence programme audits 5% of registrants biannually. Core requirements include 50 hours of CPD in every two-year recertification cycle.</p> <p>This recertification programme places more responsibility on the practitioner to plan and reflect on their own development; the Council has taken an educative approach to auditing CPD engagement. Mid and end-of-cycle reporting shows that practitioners are completing CPD activities. Some upskilling may be required in developing learning plans and reflective practice.</p> <p><u>Child and adolescent health recertification programme</u></p> <p>In 2017 Council implemented a Child and adolescent health recertification programme requiring all practising osteopaths to complete training requirements within three years of registering. Several practitioners have not met requirements, and those practitioners have been prohibited from treating under 18's until such time as the programme is completed. A condition to that effect is placed on the practitioner's APC: <i>Has not satisfactorily completed a profession-wide education requirement in child and adolescent health and may not treat individuals under 18 years old until this education is completed and Council has removed this restriction on practice.</i></p> <p>The Council has subsequently determined registrants holding a Bachelor of Musculoskeletal Health and Postgraduate Diploma in Osteopathy are exempt as there is sufficient coverage across the</p>	FA			

Function 3: Section 118d) To review and promote the competence of health practitioners.

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Section 118k) To promote education and training in the profession

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		programmes. At the time of this review Council is considering this mandatory requirement.				
	b) Review a health practitioner's competence and practice against the required standard of competence	<p>The Council requires all overseas registrants (both those registering with recognised qualifications and those with unrecognised qualifications) complete the CAPP (see 2.2).</p> <p>The Council is reviewing the programme to ensure requirements are targeted and efficient while meeting the expected standard for safe osteopathic practice in New Zealand. The aims of the revised programme are to provide for both the development of competence in areas of practice unique to the New Zealand context, as well as the demonstration of competence against the New Zealand Osteopathic Practice Competencies. (CAPP Consultation 2024v2.pdf)</p>	FA			
	c) Improve and remediate the competence of practitioners found to be below the required standard	<p>The Osteopathic Council utilises the Nursing Council's competence review process with minor variations. This includes establishing a competence programme to support remediation through targeted education, supervision and reflective practice. Where significant risk is identified, the practitioner may have additional conditions placed on their practice.</p> <p>Where the Council Fitness to Practice policies or guidelines may have significant differences from the corresponding NCNZ policy, a separate policy or guideline for Council has been developed.</p> <p>The Osteopathic Council holds separate policies and guidelines for competence reviews, noting these are based on Nursing Council policies and guidelines and adapted for the osteopathic context.</p>	FA			

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Section 118k) To promote education and training in the profession

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
	d) Promote the competence of health practitioners	<p>The Council initiated annual conferences in 2011 to promote engagement with the profession, discuss current and planned developments in regulation and to provide a forum for the profession to discuss contemporary topics related to safe and competent practice.</p> <ul style="list-style-type: none"> In 2022: the Council utilised a commercial webinar hosting platform to facilitate practitioner accessibility. In 2023: to promote face-to-face communication (post COVID) the conference was presented in a hybrid forum with both face-to-face and remote attendance options. In 2024: In response to feedback from the profession, webinars consisted of three remote sessions held during September and November. In 2025: Aligning with the updated Osteopathic Competencies, the 2025 webinar series included a strong focus on cultural safety, Te Tiriti o Waitangi and responsiveness to Māori. To support practitioner development around Te Tiriti o Waitangi responsibilities, the Council also provides guidance listing useful learning resources. Mandatory Recertification requirement was implemented (working with an accredited provider) to ensure all osteopaths are competent in treating children and adolescents. <p>The Council also participates in external educational opportunities, such as conferences run by the Professional Association, Osteopaths New Zealand.</p>	FA			

Function 4: Section 118f) To receive information from any person about the practice, conduct, or competence of health practitioners and, if it is appropriate to do so, act on that information.

Section 118g) To notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public.

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
4.1	<p>The RA has appropriate, timely, transparent, fair, and proportionate mechanisms for:</p> <p>a) Providing clear, easily accessible public information about how to raise concerns or make a notification about a health practitioner</p> <p>b) Identifying and responding in a timely way to any complaint or notification about a health practitioner</p>	<p>The Council website has clear contact instructions and a dedicated form for members of the public to report concerns and has developed guidance for both the public and practitioners on the complaint's investigation process. (Making a Complaint).</p> <p>The Council has undertaken a Public Engagement Campaign and website review to enhance awareness and the accessibility of information for the public.</p>	FA			
		<p>The Osteopathic Council utilises the Nursing Council's complaint and notification process and has adopted the Nursing Council's investigation policies, with amendments to reflect the osteopathic context.</p> <p>There are twice weekly case management meetings led by the Nursing Council. Where a notification has been received about an Osteopath, the Registrar attends the case management meeting. The case management meetings are attended by the Nursing Council's Deputy Registrars. A formal risk assessment is completed at the case management meeting, and where any risk of harm or serious harm is identified, the Registrar considers whether interim orders may be required to ensure public protection.</p> <p>The Council's 2025 Annual Report reports outlines number of notifications and complaints received as being six (2024-2025). Of these four required no further actions following response from the practitioner, one was referred to Health and Disability Commissioner and one to the Professional Conduct Committee.</p>	FA			

Function 4: Section 118f) To receive information from any person about the practice, conduct, or competence of health practitioners and, if it is appropriate to do so, act on that information.

Section 118g) To notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public.

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		<p>One case of professional misconduct was heard by a Professional Conduct Committee in the 2024-2025 year referred during the previous year. The Professional Conduct Committee determined a charge of misconduct would be laid before the Health Practitioners Disciplinary Tribunal.</p> <p>The Nursing Council uses the Tukutuku Rau framework across fitness to practice functions. The Nursing Council report Tukutuku Rau as being <i>a relational approach and has resulted in a more effective way of working with nurses while ensuring public safety is maintained</i>. The Osteopath Council has yet to fully consider embedding Tukutuku Rau across all of its functions, however it is fair to note the Council and osteopaths are exposed to the framework principles in working with the Nursing Council across fitness to practice functions.</p> <p>Interview with the Registrar and Council Chair, indicate an interest in seeking Council support to further embed Tukutuku Rau across functions.</p>				
	c) Considering information related to a health practitioner's conduct or the safety of the practitioner's practice	<p>Where the seriousness of the concern/ notification or the Council's jurisdiction is unclear, additional information is sought and practitioners are given the opportunity to respond before escalation occurs.</p> <p>The Council contracts legal advice when needed to provide assurance that decisions are legally sound and appropriately aligned with the HPCA Act.</p>	FA			

Function 4: Section 118f) To receive information from any person about the practice, conduct, or competence of health practitioners and, if it is appropriate to do so, act on that information.

Section 118g) To notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public.

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
	d) Ensuring all parties to a complaint are supported to fully inform the authority's consideration process	The complainant and practitioner are kept informed as any investigation progresses. Where complaints progress to a Professional Conduct Committee (PCC), complainants can contact the PCC investigator directly and are generally interviewed in person.	FA			
	e) Enabling action, such as informing appropriate parties (including those specified in section 118(g)) that a practitioner may pose a risk of harm to the public <i>NB: 118 g) To notify employers, the ACC, the Director General of Health, and the HDC that the practice of a health practitioner may post a risk of harm to the public</i>	The Council has a Notification of risk of harm policy (January 2026) that outlines the threshold for risk of harm. In the 2024-2025 year there was one notification referred to the Health and Disability Commissioners' Office.	FA			

Function 5: Section 118h) To consider the cases of health practitioners who may be unable to perform the functions required for the practice of the profession.

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
5.1	<p>The RA has clear and transparent mechanisms to:</p> <p>a) Receive, review, and make decisions regarding notifications about health practitioners who may be unable to perform the functions required for the practice of the profession</p>	<p>The Council utilises the Nursing Council's health process, and has adopted the Nursing Council's Health Policies, with amendments to reflect the osteopathic context.</p> <p>As above, new notifications are considered twice weekly through case management meetings with the Registrar and Deputy Registrars. The Council's Registrar attends case management meetings when an Osteopath notification is received.</p> <p>Each notification is assessed using the Nursing Council's risk assessment framework. Where a risk of serious harm is identified, the Council considers whether immediate regulatory action is necessary, including interim conditions or suspension.</p> <p>The practitioner is contacted to discuss their current health, their intentions regarding practice, and the safest approach to support both their wellbeing and public protection. The Registrar, in consultation with the Convener of the Health Committee, has delegated authority to suspend a practising certificate or impose conditions when appropriate.</p>	FA			
	<p>b) Take appropriate, timely, and proportionate action to minimise risk</p>	<p>Every effort is made to acknowledge notifications in writing within one week of receipt. The least restrictive approach is adopted when imposing conditions. As practitioners work as independent business owners' conditions need to be put in place that are not necessarily dependent on an employer supporting practice.</p> <p>Conditions that may reveal a practitioner's health issues are kept confidential and are not published on the public register.</p> <p>Practitioners with conditions or undertakings are closely monitored to ensure compliance and ongoing safety.</p>	FA			

Function 6: Section 118i) To set standards of clinical competence, cultural competence (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by health practitioners of the profession.

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
6.1	<p>The RA sets standards of clinical and cultural competence and ethical conduct that are:</p> <p>a) Informed by relevant evidence</p>	<p>The current Osteopathic Practice Competencies were released in 2023 and replace the previous Capabilities of Osteopathic Practice. The competencies take a modernised, high-level approach to defining competencies compared to the previous Capabilities.</p> <p>The competencies underpin expectations around competent practice across registration, accreditation or training programmes, assessment of competence, and consideration of continuing competence programme activities.</p> <p>As part of this review the Council introduced Te Tiriti of Waitangi partnership responsibilities as a domain of competence despite mixed feedback from the profession.</p> <p><i>Te Tiriti o Waitangi & the Code of Conduct journey</i></p> <p>The Council began development of an updated Code of Conduct in 2018 to replace the previous Code of Ethics.</p> <p>The development involved consultation with the osteopathic profession through mail-out and interactive conference discussions. Broad support was given to adopting the Nursing Council Code of Conduct with some changes to reflect osteopathic practice. This initial Code of Conduct was released in 2020.</p> <p>The Council then recognised the Code of Conduct needed to be strengthened in its discussion of Māori responsiveness and recognition of Te Tiriti o Waitangi. In 2021 there was a Council-led conference focusing on working with Māori and engagement with te Tititi and a second round of consultation followed. The</p>	FA			

Function 6: Section 118i) To set standards of clinical competence, cultural competence (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by health practitioners of the profession.

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
	b) Clearly articulated and accessible	<p>Council contracted a Māori advisor⁶ to undertake an analysis of the draft Code of Conduct. This provided valuable improvements to be made on the draft Code, allowing greater responsiveness to Te Tiriti o Waitangi, and provided valuable experience for the Council in incorporating this type of analysis into the development process.</p> <p><i>Western Medical Acupuncture Scope of Practice Review</i></p> <p>The Council recognised it was necessary to develop a set of competence standards for this extended scope. In 2023 the Council released a Request for Proposal, looking for researchers to assist with the development of a set of standards based on contemporary evidence. The RFP highlighted the importance of engagement with practitioners and consideration of the principles of Te Tiriti o Waitangi.</p> <p>The New Zealand based research group provided a report proposing a new set of standards. These standards went through an alignment process to ensure they aligned with the existing Osteopathic Practice Competencies prior to a wider consultation process. This consultation process included targeted consultation with Te Mana Tautoko (the Council's Māori advisory group). The feedback from the profession highlighted broader concerns around the scope of practice and associated educational requirements. This extended work is now underway.</p> <p>The Council's website has clear and accessible information relating to the reviews undertaken above.</p>	FA			

⁶ Te Miri Rangi (Ngāti Tūwharetoa, Te Arawa, Ngāti Raukawa) is now the Chair of Te Mana Tautoko (the Council's Māori advisory group).

Function 6: Section 118i) To set standards of clinical competence, cultural competence (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by health practitioners of the profession.

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
	c) Developed in consultation with the profession and other stakeholders	The Council has a database of stakeholders used when feedback is being sought.	FA			
	d) Inclusive of one or more competencies that enable practitioners to interact effectively and respectfully with Māori	The Osteopathic Practice Competences (January 2023) include a dedicated competence relating to engagement with Māori and responsibilities in respect of Te Tiriti o Waitangi.	FA			

Function 7: Section 118j) To liaise with other authorities appointed under this Act about matters of common interest

Section 118ja) To promote and facility inter-disciplinary collaboration and cooperation in the delivery of health services

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
7.1	The RA understands the environment in which it works and has effective and collaborative relationships with other authorities.	<p>The Council recognises the value that comes from collaboration and consultation with other regulatory authorities.</p> <p>As full regulatory support is provided to the Council by the Nursing Council, the Council benefits from many of the activities of the Nursing Council. The Registrar's involvement as a member of the Nursing Council Executive Team allows rapid collaboration and sharing of knowledge and expertise.</p> <p>The Council Registrar attends combined RA hui and workshops considering general business and special-topic sessions. The Registrar and Council Chair attend regular Allied Health Regulatory Authority Group meetings hosted by the Ministry of Health.</p> <p>The Council has continued to develop their relationship with the Physiotherapy Board of New Zealand and the New Zealand Chiropractic Board. Regular meetings with these RA's have restarted in 2026 with the addition of the Chinese Medicine Council of New Zealand with the aim to identify areas of commonality and potential shared work between the four RAs.</p> <p>The Council has participated in specific collaborative projects between RAs, including shared work on cultural safety and student placements. While the Council is aware of its role in the health system, it is also aware of the need to foster this recognition within the osteopathic profession. Council work in this area has included participation in the Osteopathy Sector Reference Group and hosting webinars presented by the Ministry of Health.</p>	FA			
7.2	The RA uses mechanisms within the HPCA Act such as scopes of practice,	The Council's core standards set out expectations around interdisciplinary practice including that osteopaths will practice as	FA			

Function 7: Section 118j) To liaise with other authorities appointed under this Act about matters of common interest

Section 118ja) To promote and facility inter-disciplinary collaboration and cooperation in the delivery of health services

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
	<p>competence standards, accreditation standards, and communications to promote and facilitate inter-disciplinary collaboration and cooperation in the delivery of health services.</p>	<p>part of a network of osteopaths and maintain a multidisciplinary approach through referral and co-management. More broadly, this domain requires osteopaths to maintain an understanding of the place of osteopathy within the healthcare system.</p> <p>The Code of Conduct for Osteopaths requires osteopaths to work respectfully with colleagues and other health services/practitioners to best meet health consumers' needs.</p> <p>The current Accreditation Standards require programmes to foster "intra-professional and inter-professional collaborative learning and practice" and prepare graduates for practice "in a range of [healthcare] settings".</p> <p>The Council has recently joined as a signatory to the combined Responsible Authorities Statement of Intent on Interprofessional Collaborative Practice in Interprofessional Education which will guide future work in this area.</p> <p>The Council has participated in, and facilitated, the development of the Osteopathy Sector Reference Group established by the Ministry of Health. This group has contributed to the development of a Snapshot Report for osteopathy in New Zealand. This work has been reinforced by the inclusion of a Ministry of Health contribution to the annual Council webinars over the last three years, focused on developing practitioner awareness of the broader health system.</p>				

Function 9: Section 118l) To promote public awareness of the responsibilities of the authority.						
Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
9.1	<p>The RA:</p> <p>a) Demonstrates its understanding of that the principal purpose of the HPCA Act is to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practice their professions</p> <p>b) Provides clear, accurate, and publicly accessible information about its purpose, functions and core regulatory processes</p> <p>c) In promoting public awareness, recognises opportunities to also promote public confidence in the profession and in the Responsible Authority</p>	<p>The Council's website is identified as a significant point of access for general information about Council activities, and it is regularly updated to provide contemporary information.</p> <p>The website also provides public access to:</p> <ul style="list-style-type: none"> • Dedicated information for the public regarding osteopathy and the Osteopathic Council • An online version of the register • A portal to make complaints or notify Council of concerns <p>Given the importance of the website as a communication medium, the Council has initiated a review of the website format and content to enhance the utility for the public, practitioners and other stakeholders. The Council has now engaged a designer to review and revise the website design.</p> <p>Council staff are generally available to respond to phone calls or email communication, and the small size of both the profession (and therefore public enquiry) and dedicated Osteopathic Council staff helps ensure agility in responding to any enquiries.</p> <p>In October 2020 the Council resolved to engage Wonderlab to assist in developing a public engagement strategy. This strategy was finalised and approved by Council in August 2021, with an implementation plan being approved in September 2021.</p> <p>This implementation plan incorporated the use of physical media (such as counter cards and posters) to be displayed in osteopathic clinics, as well as the use of digital media to broaden the reach of this messaging. By involving registrants in the implementation of the public engagement strategy, Council aims to also ensure practitioners are aware of, and engaged with, Council's role and responsibilities.</p>	FA			
			FA			
			FA			

Function 9: Section 118l) To promote public awareness of the responsibilities of the authority.						
Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		At this time, the Council also developed a dedicated FAQ page to be incorporated into the Osteopathic Council website to provide the public with targeted information about Council role in regulating the osteopathic profession.				

Function 10: Section 118m) To exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
10.1	<p>The RA:</p> <p>a) Ensures that the principles of equity and of te Tiriti o Waitangi/ the Treaty of Waitangi (as articulated in <i>Whakamaua: Māori Health Action Plan 2020-2025</i>) are followed in the implementation of all its functions</p>	<p>During the development of the Professional Code of Conduct in 2019/2020, the Osteopathic Council recognised that, as a Council, there was a need to further develop their own knowledge and understanding of te Tiriti o Waitangi. This led to the establishment of a Te Tiriti Committee in April 2020 to facilitate this development. Council believed this development of their own skills and knowledge was an important first step in ensuring that future work incorporated the principles of equity and of te Tiriti o Waitangi. `</p> <p>Two of the three recommendations in the 2022 Responsible Authority Core Performance Standards Review Report focused on this area, recommending that:</p> <ul style="list-style-type: none"> • engagement with Māori continue, and the reviews outlined in the council's strategic goals are completed; and, • the council's strategic goal two is completed - develops and maintain effective engagement with the public, Māori and other stakeholders, to foster greater awareness and understanding of the roles and responsibilities of the Council. <p>Since the 2022 Performance Review, the Council has invested heavily in developing relationships and engagement with Māori. Key to this work was establishing relationships with Māori and, more specifically, identifying leaders in this space who could facilitate Council's journey.</p> <p>This initial development work culminated in early 2024, with the establishment of Te Mana Tautoko, Council's Māori advisory group, consisting of a layperson as Chair and three Māori osteopathic members. While established by the Council, it was important that Te Mana Tautoko maintained a degree of independence and were able to set their own work priorities .</p>	FA			

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		<p>Given the low number of Māori osteopaths in the profession, the Council saw this group not only as a vital source of advice, but a way to foster the development of osteopaths who may want more experience in the regulatory space and increase representation of Māori on the Council.</p> <p>This saw success in late 2024, with the appointment of a Te Mana Tautoko member to the Council. Careful attention was also paid to the relationship between Council and Te Mana Tautoko, with the development of clear processes and expectations, to ensure consultation was genuine and to mitigate the inherent imbalance of power between Council and the advisory group. While the group has only been established for less than two years, they have provided valuable advice on a range of Council activity; from ad-hoc input to formal submissions on Council projects. The Council has also completed the reviews noted in the 2021 Performance Review recommendations.</p> <p>While the Code of Conduct review was completed prior to the establishment of Te Mana Tautoko, the Critical Te Tiriti Analysis of the Code was completed by the eventual Te Mana Tautoko Chair. Council's position and expectations around Te Tiriti o Waitangi responsibilities are now clearly described in both the Code of Conduct and Osteopathic Practice Competencies.</p> <p>In addition to the establishment of Te Mana Tautoko, and following the advice they have provided, the Council has continued their own professional development in this area. Recent activities have included attending a full day workshop run by the Pakeha Project and attending a noho marae at Te Rau Karamu Marae. The noho marae incorporated workshops on Te Ao Māori and Māori governance, as well as providing the</p>				

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Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		<p>opportunity for Council to hold their regular Council meeting in this prestigious space.</p> <p>A written submission was provided by the Chair of Te Mana Tautoko. He notes the Council has made meaningful progress in strengthening its approach to embedding Te Tiriti and equity across its work. Areas of progress reported as including establishing foundations for Te Tiriti responsiveness and investment in capability building. Future opportunities include public accountability for Te Tiriti performance and system change.</p>				
	b) Ensure the principles of Right-touch regulation are followed in the implementation of all its functions	<p>While the Council policy does not explicitly reference the principles of right touch regulation, the Council governance policy on Good Regulatory Practice is based on the expectations of good regulatory practice published by the New Zealand government.</p> <p>These expectations, in turn, share many similarities to the principles of right-touch regulation published by the Professional Standards Authority of the United Kingdom. Reference to right-touch regulation can also be seen in Council work (for example, the Competent Authority Pathway Programme Review consultation document, the Western Medical Acupuncture Review Request for Proposal, and Council's 2025 Annual Report.</p>	FA			
	c) Identifies and addresses emerging areas of risk and prioritises any areas of public safety concern	The Osteopathic Council Policy statement on Process for Risk Management describes the way Council can best ensure it is able to identify and addresses emerging areas of risk, while prioritising any areas of public safety concern.	FA			

Function 10: Section 118m) To exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment

Ref #	Related core performance standards	Reviewer's comments	Rating (FA/PA/UA)	Risk Level if PA /UA (L, L-M, M, H)	Recommendation	Suggested Timeframe (months / date)
		<p>At every Council meeting, the Registrar is required to present a current risk analysis and mitigation plan for Council's consideration. These risks are assigned a value based on both the impact and likelihood of the risk occurring, incorporating any mitigating actions or factors that may be involved. This process allows Council to consider where risks may lie, and how to best prioritise mitigating actions.</p> <p>Examples of Councils response to public safety risks include the mandatory recertification on Child and Adolescent Health for high-level risks, and lower-level interventions such as webinar topic selection and the publication of guidance for the profession.</p>				
	<p>d) Consults and works effectively with all relevant stakeholders across all its functions to identify and manage risk to the public in respect of its practitioners</p>	<p>The Council maintains strong relationships with stakeholders both within New Zealand and overseas.</p> <p>In the osteopathy sector, the Council holds regular meetings with osteopathic educators (including student representatives) and the professional association at 'Osteopathic Key Strategic Stakeholder' (OKSS) meetings.</p> <p>These meetings ensure that each party remains up to date in developments within the sector and allows for early dialogue and collaboration on any planned actions. The Council also maintains relationships with other health sector stakeholders, including the Health and Disability Commissioner (HDC) and ACC.</p> <p>The Council has recently updated their Memorandum of Understanding with the HDC and has open dialogue with ACC when needing to discuss matters of common interest.</p> <p>The Council has a strong relationship with osteopathic regulators in Australia and the United Kingdom. Council representatives meet regularly with the Osteopathy Board of Australia (OBA), including a face-to-face meeting between Boards in 2023, and</p>	FA			

Function 10: Section 118m) To exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment

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		<p>with the General Osteopathic Council (GOsC) of the United Kingdom. While allowing information sharing, this also provides a conduit for aligning standards (where appropriate). This has led to our current work of developing a mutual recognition of registration policy with GOsC, allowing practitioners to move more easily between the two jurisdictions.</p> <p>The Council also participates in global osteopathic forums, such as conferences held by the Osteopathic International Alliance. As one of the few jurisdictions where osteopathy has statutory regulation, the Council plays an active part in developing osteopathic regulation across the world.</p>				
	<p>e) Consistently fulfils all other duties that are imposed on it under the HPCA Act or any other enactment</p>	<p>The Council meets regularly during the year. Conflicts of interest are discussed and mitigation strategies put in place.</p> <p>The Council complies with the Privacy Act 2020 and Health Information Privacy Code including annual Privacy Week staff education. Attention is paid to the Privacy Act 2020 with respect to information held on the Register of Osteopaths, and have policies that relate to its security, access, and use.</p> <p>Regularly review fees and levies and consult on proposed changes. Annual Practising Certification Fee changes were under consideration at the time of this review.</p>				