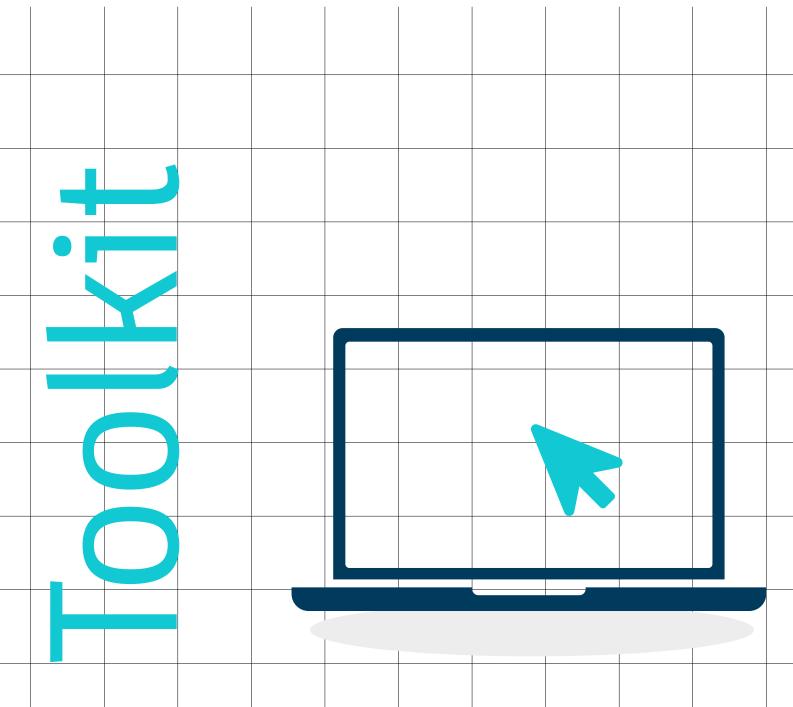


GCC Registrant Toolkit Websites



Your virtual shop window

Tim Berners-Lee, inventor of the World Wide Web, has expressed his surprise at the rapid growth and cultural and economic significance of his invention. From its creation in 1989, and public release in 1993, the internet has undeniably become an integral part of today's society.

As accessibility, ease of use and functionality of websites have increased, so too have the benefits to business. Today, businesses large and small can develop an online presence quickly and cost-effectively, presenting their products and services to an ever-growing global marketplace. In recent years, as we move from desktop to mobile devices, websites have become the first port of call for many customers. They have become the de facto shop window for many businesses.

Today, almost all chiropractors have an online presence, be it a business website and/or a social media profile. However, there are several requirements that a chiropractor must consider, when marketing or communicating their service or business via the internet.

In recent years, the GCC and Advertising Standards Authority (ASA) have received complaints regarding registrant websites, many of which have led to changes being required to their content. Today, the GCC continues to receive referrals on concerns about misleading or incorrect content.

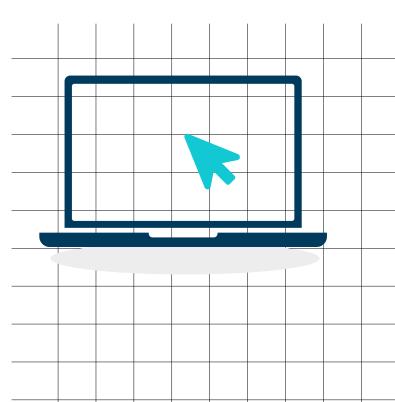
Standards B3, B4 and B5 of the GCC's Standards of Conduct, Performance and Ethics for Chiropractors (the GCC Code) contain several provisions relating to marketing and communicating of chiropractic services or businesses. Furthermore, since 2011, the ASA CAP Code has extended its remit to cover advertising content on company websites and social media accounts.

The purpose of this GCC website toolkit, is to help chiropractors avoid some of the more common issues that have arisen when promoting their chiropractic practices or services, some of which have led to Fitness to Practise complaints.

The toolkit is not exhaustive but provides you with top-line definitions of what is likely to be acceptable or unacceptable in respect of website content. We would also recommend reading the GCC **advertising** and **social media** toolkits for further guidance.

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Your website

"Put simply, if it's on your website, it's your responsibility and liability."

For the purposes of the ASA and the GCC, "your website" is defined as an online platform where you are in control of the content. Some businesses contract out the management of their websites to third-party providers. This can range from IT maintenance to content provision. However, regardless of whether you partly or fully contract out online activity, responsibility for ensuring that all content (original or third-party) is vetted and complies with the ASA and GCC Codes, remains with you.

If contracted to a practice or clinic, you are still responsible for ensuing all content relating to you, including your credentials and the treatments you provide, is correct.

Content versus advertising

There are three general types of content that you may create and use to promote your online business presence, with most businesses using all three to varying degrees. These are content marketing, advertising and content advertising.

Content marketing: Where you, or a third-party contractor, create relevant content that is of interest and value to existing or potential patients. Content marketing helps build credibility and brand awareness for your business or service. If the content is considered insightful and helpful, it will hopefully encourage users to return to your website and use your services. Some common examples of content marketing are blogs, videos, webinars, podcasts and infographics.

This type of content is not deemed advertising, as you are not "pushing" your business or service for a sale, but providing commentary, insights or advice. It is therefore outside the remit of the ASA. However, the GCC may investigate if content is in breach of the **GCC Code**. Advertising: Content aimed at raising awareness of your brand and, in turn, the services or products that you offer. Its purpose is to grab attention and stimulate, persuade and activate the customer to purchase your product or service. There are many types of online and offline channels and tools available.

All advertising, including that contained within business websites, is overseen by the ASA. Refer to the GCC advertising toolkit for guidance on how to ensure your advertising is ASA and GCC compliant.

Content advertising: Created content that is advertised through paid-for channels. Its purpose is to encourage people to visit your website, eg. the Google Ads that generally appear at the top of search results, or social media advertisements. Like advertising, the ASA may review content advertising to ensure that it is compliant with the CAP Code (see back page for information on the ASA and the CAP Code).

Overseas content and advertising

Some website platforms or companies are based outside the UK, and therefore ASA CAP Code jurisdiction can be harder to define or apply, even if targeted at UK customers/patients.

As a rule, the ASA CAP Code applies if:

- 1. the third-party contractor or website company has a UK-registered company address
- 2. marketing communications appear on websites with a ".uk"
- 3. marketing and communications specifically target people in the UK

Even if none of these rules apply, you can still be investigated by the relevant authority from where the advertising or content originated. As a member of the European Advertising Standards Alliance, the ASA may refer a complaint via the Alliance's cross-border complaints system.

Chiropractic and medical content

Any website content that contains medical detail, whether chiropractic in nature or not, can fall under both the ASA CAP Code and the GCC Code. Therefore, it is essential that you ensure content is accurate and compliant with current UK medical practices and the ASA CAP Code on what a chiropractor can advertise (see What treatments can I advertise? on page 7).

Chiropractic content can often originate from outside the UK, especially from the United States and Australia. However, you are still responsible for ensuring all content is compliant with UK medical and advertising practices and guidelines, even if uploaded by a thirdparty contractor.

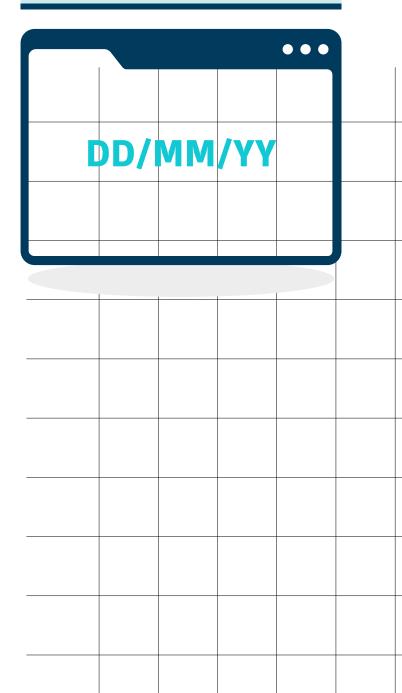
Weblinks to third parties

If you use weblinks to another website, it is still your responsibility to ensure that the linked content remains compliant with ASA and GCC standards, even if sourced from outside the UK.

By the provision of a weblink, you are essentially "adopting" the content for your business. This is the reason why many websites contain weblink disclaimers. However, this is not a valid reason or excuse to link to content that breaks either the ASA or GCC Code.

TIP:

Date marking each page of your website will help you remember when the content was created, uploaded or revised.



Four rules when creating website content





The business or service being advertised must be legal and comply with all relevant UK laws.

Example: A person cannot advertise or promote themselves as a chiropractor if they are not registered with the General Chiropractic Council. This would be a breach of Section 32 of the Chiropractors Act 1994.



Content should not cause serious or widespread offence, especially in the areas of race, religion, gender, sexual orientation, disability and age.

Example: A chiropractor creates website content looking to attract more female patients to their practice. They state that women are less able to tolerate pain than men. This would likely cause widespread offence to women on the basis of their gender.



Posting false and/or deceptive messages or facts with no grounds or merit to justify the statement.

Example: Chiropractors may treat patients who suffer from multiple sclerosis as a comorbid condition. However, to imply that a chiropractor can "treat multiple sclerosis" would create the false impression that chiropractic is an effective treatment for this condition.



The posting and/or content must not omit facts that may lead a person to believe something that is not true.

Example: A person posts a statement that they "studied chiropractic at university" when they attended the programme for only one day before leaving the course. The statement is correct (they did study chiropractic, albeit for one day) but not truthful, as most people reading that statement would assume the person had completed the programme and qualified as a chiropractor.

As outlined, the guiding principle of the ASA CAP Code, as reflected in B3 of the GCC Code, stipulates that all advertising or promotion must be legal, decent, honest and truthful. However, as healthcare professionals, you have a responsibility to ensure all claims made, be it via advertising, on your website or through social media, do not materially mislead the public and/or patients.

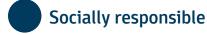
Therefore, throughout the CAP Code, and in supplementary CAP guidance on substantiation of health claims, registrants are required to ensure content aimed at patients and the public is accurate and verifiable, socially responsible and free from misleading claims.



Accurate and verifiable

Can you provide accurate, verifiable and robust proof for all the claims made about the service or business? If not, it will be deemed as misleading.

Example: A claim of being the "best chiropractor in the UK" can be made only if you have verifiable and independent documentation to justify this statement. If not, the claim is likely to be determined as misleading.



Not depicting, promoting, encouraging or condoning illegal, unsafe or anti-social behaviour.

Example: Discouraging vaccinations or promoting excessive concerns regarding the safety and efficacy of vaccines.



Misleading Claims

When applying the CAP Code, the ASA's approach is that advertising, direct marketing and/or sales promotions, including those on websites and social media, must not:

- 1) Claim an absolute guarantee of a cure
- 2) Claim that chiropractic treatment is risk-free or safer than other healthcare treatments
- Present anecdotal evidence as being proven or scientific
- Discourage an individual from seeking medical treatment from a general medical practitioner, if appropriate
- 5) Claim that chiropractic care can treat any condition unless that claim is substantiated in compliance with the CAP Code

What treatments can I advertise?

In 2017, guidance was produced by the Committee of Advertising Practice on treatments that chiropractors can claim to treat. They are:

Ankle sprain (short-term management)
Cramp
Elbow pain and tennis elbow (lateral epicondylitis) arising from associated mus-culoskeletal conditions of the back and neck, but not isolated occurrences
Headache arising from the neck (cervicogenic)
Inability to relax
Joint pains (including hip and knee pain from osteoarthritis as an adjunct to core osteoarthritis treatments and exercise)
General, acute and chronic backache, back pain (not arising from injury or acci-dent)
Generalised aches and pains
Lumbago
Mechanical neck pain (as opposed to neck pain following injury, ie. whiplash)
Migraine prevention
Minor sports injuries and tensions
Muscle spasms
Plantar fasciitis (short-term management)
Rotator cuff injuries, disease or disorders
Sciatica
Shoulder complaints (dysfunction, disorders and pain)
Soft tissue disorders of the shoulder

Although these treatments are listed, any promotion, online or otherwise, must still comply with all other CAP Code requirements and the four rules. For example, you cannot promote one of the permissible treatments if you have no experience in undertaking that procedure (the GCC Code, Standard G3: "Chiropractors must work within the limits of their own knowledge, skills and competence."). The GCC advises all registrants to check the latest Advertising Guidance regarding medical conditions that chiropractors can claim to treat (search: ASA Health Chiropractic), to ensure no updates or amendments have been made that may lead to an ASA or GCC complaint and/or investigation.

Claims and treatments beyond chiropractic

As outlined on page eight, there is a wide range of conditions for which chiropractors have been trained to diagnose, treat, manage and/or prevent. Furthermore, there is a substantial body of evidence supporting chiropractic treatment for these conditions. These conditions therefore meet the four ASA rules, as outlined on page five.

Beyond these conditions and/or treatments, chiropractors can also provide valuable guidance to patients, helping to improve their overall physical, emotional and social wellbeing. This can include preventative advice, suggesting exercises and routines, helping with posture, and providing general health and wellness advice.

However, the GCC and ASA have received complaints from registrants, the public and organisations when chiropractors have "suggested or implied" that chiropractic can address wider health issues without any credible evidence or substantiation.

One such claim which has received attention and complaints is subluxation, although "innate intelligence", "adjustment", "power that heals a body", "treat the cause and not the symptoms", "long-term chiropractic care can prevent illnesses", and anti-vaccine or protection/ treatment against Covid-19 claims have also been highlighted in complaints. At this time, no verifiable or substantiated research or body of evidence to the CAP Code standards has been produced regarding these treatments or claims.

Regardless of personal belief, theory or philosophy, promotion of these treatments and/or claims can be potentially damaging to patients, as well as affect the trust and confidence in the chiropractic profession with the public, NHS, other medical professions and government. The GCC and ASA have a duty of care to protect the public from unfounded and non-evidenced claims.

Covid-19

Some chiropractors have claimed or implied that spinal adjustment and/or manipulation may protect patients from contracting Covid-19, boosting their immune system and aiding their recovery. The GCC is clear that there is no credible scientific evidence that supports these claims, and chiropractors must not link treatments to Covid-19 in any way. Chiropractors making such claims will be in breach of the requirements set out in the GCC Code, and regulatory action will be taken. Where the GCC sees evidence of such claims, it will act.

Subluxation

The use of the term "subluxation", and claims that imply subluxations inhibit the body's healing mechanisms and/ or that the body will not function or heal if subluxations are present and chiropractic treatment not provided, cannot be used in the UK as they do not meet ASA CAP Code and GCC standards.

Any claims will be viewed as misleading, as there is no verifiable scientific research or body of evidence to support these claims or theoretical model. See GCC guidance on **Chiropractic Vertebral Subluxation Complex**.

Definition of 'body of evidence'

Any objective claim must be substantiated by available, credible and recognised scientific knowledge. To justify any claims (and it will be incumbent on the registrant to justify these claims), a body of evidence must be presented that meets CAP standards.

A "body of evidence" can include single and double-blind studies and observational human studies. The evidence should normally include one adequately controlled experiential human study, although a controlled observational study may be acceptable in some circumstances. Requirements on methodology, size, duration and nature of the study group must comply with CAP requirements, as well as an objective review of all the data, if the report has not been published in a reputable peer-reviewed journal.

Presenting your credentials

As a chiropractor, you are in the favourable position of being able to state that you are registered with the General Chiropractic Council.

The GCC encourages all registrants to promote their credentials openly, accurately and honestly.

When can I state I'm a chiropractor?

At the time when content is visible to the public, you can state you are a chiropractor if:

- 1) You are listed on the GCC register of chiropractors and your fees are fully paid
- 2) You have not been suspended or removed from the GCC register of chiropractors

If you have changed to non-practising status, your website must clearly highlight your non-practising status.

Can I use my 'Doctor' title?

If you use the courtesy title of Doctor, or its abbreviation Dr or DC, you must state clearly within any public-facing content that you are not a registered medical practitioner, but a Doctor of Chiropractic (DC).

The GCC may undertake a Fitness to Practise investigation where a chiropractor does not clarify they are a Doctor of Chiropractic.

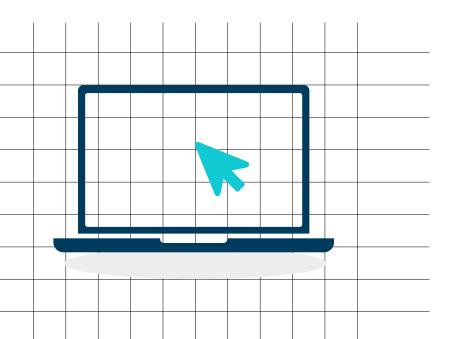
Using the GCC "Registered" logo and your registration number

GCC research has found that the public and patients are reassured when they know that a healthcare professional is regulated. This is seen with general medical practitioners, dentists and pharmacists.



However, public awareness of some regulated professions, such as chiropractors and osteopaths, is lower. The GCC therefore recommends that registrants use the GCC "Registered" logo on printed and online marketing content, where appropriate.

Further assurance of your credentials can be offered by providing your GCC registration number. This allows all potential and existing patients to verify your professional credentials through the GCC **Find a Chiropractor** search function on the GCC website.



Tips for creating website content



Advertising Standards Authority and CAP Code

The **Advertising Standards Authority** (ASA) is the selfregulatory organisation for the advertising industry. Its role is to regulate the content for businesses or services provided, to ensure it is compliant with the **Advertising Standards Codes**. Since 2011, the ASA has assumed responsibility for overseeing website and social media advertising in the UK.

The ASA will respond to concerns and complaints from both consumers and businesses regarding what is said in an advertisement, on a business website or social media account, and will act if it is found to be misleading, harmful, offensive or irresponsible. the ASA is there to protect existing and potential customers, or in the case of chiropractors, patients.

The GCC may also undertake a Fitness to Practise investigation, if a complaint is made regarding misleading communications from registrants. This may also include a referral to the ASA.

What is the CAP Code?

Commonly known as the CAP Code, its full title is the UK Code of Non-broadcast Advertising and Direct & Promotional Advertising. ASA's remit is to ensure everyone who undertakes non-broadcast advertising or promotion, complies with this code.

The latest CAP Code was published in 2010, although there have been several updates, which can be found in the Register of CAP Code Changes.

The Code is divided into 22 sections, some general such as **Compliance** (section 1) and **Use of Data** (section 10), and others that are more specific, such as **Children** (section 5) and **Medicines, Medical Devices and Health-Related Products** (section 12).

Of note for chiropractors is **Rule 12.1** which states that all "objective claims" must be substantiated by evidence, if relevant, consisting of trials conducted on people.

The CAP Code itself is written and maintained by the **Committee of Advertising Practice** (CAP), the partner organisation to the ASA. In addition, the Committee issues guidance on what some professions, such as chiropractic, can advertise or claim. See section What treatments can I advertise.

ASA and your website

Since 2011, the ASA has applied the CAP Code to advertising on business websites and social media accounts. However, not all content on your website is under its remit or scrutiny. Only content that can be considered advertising will be reviewed, ie. content that is "directly connected with the supply of goods, services, opportunities or gifts". However, non-advertising content may be subject to the GCC Code, especially if it contravenes the GCC's principles and standards.

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