

the osteopath

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General
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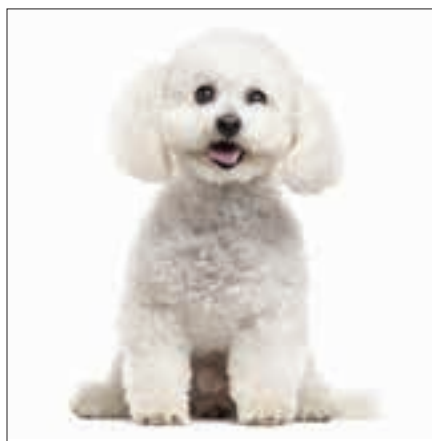
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i Want to know more? Look out for this symbol accompanying articles in each section of the magazine for links to further information



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Tim Walker



The new CPD scheme for osteopaths is coming; have you signed up to be an Early Adopter yet? The scheme is all about creating a supportive culture of engagement, discussion and communities of learning – and by joining the community of Early Adopters, you'll be able to exchange ideas and experiences of CPD activities that will develop different areas of your practice. Find out more overleaf.

The new CPD scheme will also give patients reassurance that osteopaths keep up to date and practise in accordance with standards. We know that the vast majority of patients are very happy with their osteopathic care, but concerns do sometimes arise: turn to page 8 to read about the issues that caused patients the greatest concern in 2015, and what you can do to prevent these occurring in practice. Finding out more about patients' experiences of osteopathy can help the profession to better meet patient needs and gather solid evidence of patient satisfaction – on page 16 we explain how the 'PREOS' website can contribute to this, with your input.

A key aspect of the new CPD scheme will be a requirement to seek feedback on your practice from others and act on it to enhance the quality of the care you provide. In recent issues of *the osteopath* we've looked at two methods of collecting objective feedback – peer observation and patient feedback – and on pages 10-11 we focus on clinical audit. You may well find this is not as complex as you thought! If you have undertaken any of these CPD activities and would like to share your experiences with osteopaths more widely, we'd love to hear from you – please email editor@osteopathy.org.uk

Also in this issue, we look at the benefits of joining a 'research hub' (page 17); what patients want from your practice website (pages 14-15); simple steps to improve data security (page 12); and what Brexit may mean for osteopathy in the UK (page 7).

We hope you enjoy reading this edition.

Jeremy Pinel
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the osteopath

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It's never too late to be an Early Adopter

Preparations for the new CPD scheme for osteopaths are well under way, with new resources being developed and a diverse group of organisations (including the Institute of Osteopathy,

researchers, educational institutions and CPD providers) coming together in partnership to ensure the scheme's successful rollout.

But the new CPD scheme is for

everyone in osteopathy – and everyone can help to ensure that it works well, by 'road testing' it before it is introduced across the profession.

We are looking to build a community of Early Adopters, who will share ideas and experiences as they choose and undertake CPD activities that meet the new scheme's requirements and benefit their practice.

As the message we recently sent to all registrants by email or letter (see left) spells out, there are a range of other benefits – for you and for the profession – to becoming an Early Adopter. There is no limit on the number of Early Adopters, and by the end of July we had already received expressions of interest from almost 200 osteopaths. Here a few of them explain why they want to take up the opportunity:

"As a recent graduate, I am enthusiastic and keen to be involved in the development of the profession. I live and work in a small town with no active regional society; I am very lucky to have a supportive principal in a group practice, and we have scheduled team meetings, but we have to travel for any CPD that we wish to do. I believe it is very important that people outside the main cities can maintain connection with others and easily access CPD."

Olwen Grindley

"Sometimes being a member of a profession can leave you feeling a little bit lost or anonymous – just one of so many! Having been involved in the

"Having a community of peers pushes us all to expand our skills and remain at the forefront of the profession"

Continuing Professional Development
for osteopaths

General Osteopathic Council

Get a head start with the new CPD scheme

Become an Early Adopter!

We are inviting osteopaths to become Early Adopters to try out the new CPD scheme, before it becomes mandatory in 2017.

As part of the community of Early Adopters, you will have access to support and advice that will help you meet the requirements of the new CPD scheme. These 'Early Adopter' activities can count towards your current CPD.

What does being an Early Adopter involve?

You will be able to:

- link in to networks of Early Adopters, sharing ideas, learning and experiences of the new CPD scheme. Help each other to choose, plan and undertake CPD activities that will enrich your practice.
- access personal support, advice lines and 'bite-size' webinars designed to help you meet the requirements of the new scheme.
- learn more about the Peer Discussion Review, with opportunities to practise undertaking a review. Build 'safe spaces' with colleagues to share the challenges of practice.
- invite the GOsC and other osteopathic organisations to your local osteopathic group or community, to explore new opportunities for CPD that promotes quality in osteopathic practice.
- get support in planning, developing and running CPD sessions in your own community.

We will be asking Early Adopters for their feedback on learning resources we and other osteopathic organisations are developing as part of the new scheme.

To become an Early Adopter of the new CPD scheme, and/or if you have any questions, please email EarlyAdopter@osteopathy.org.uk

We look forward very much to working with you.

Tim Walker
GOsC Chief Executive and Registrar

'revalidation' pilot [a project that has fed into the development of the new CPD scheme], I am really keen to see things come to fruition. I see this opportunity as a bit like Brexit: to get the best out of the situation, we need to be involved. As Lord Kitchener said during the First World War, 'Your country needs you' – well, substitute 'profession' for 'country' and you've got the idea. Come on, folks, be proactive and get involved.'

Yvonne McCarthy

"I entered the profession last year and am fully aware of a gap between the skills acquired during training and the expectations of a wide variety of patients: CPD activities are key to bridging such gaps. Having a community of peers enables exchange of information and promotes self-reflection and interchange of ideas, pushing us all to expand in skills and remain at the forefront of the profession. I would really appreciate the support provided by the GOsC in following the new CPD requirements as well as in expanding my network of peers."



Dr Karim El Arabi

The new CPD scheme builds on the CPD that osteopaths are doing already. Every osteopath will undertake a three-year 'cycle' of CPD, during which their CPD activities must include:

- activities relevant to all the themes of the *Osteopathic Practice Standards*
- at least one 'objective activity' to capture third-party feedback on their practice – find out more about one of these objective activities on pages 10-11
- at least one activity in communication and consent.

Additionally, you will need to maintain an annual CPD folder with documented evidence of your CPD activities; and arrange a 'Peer Discussion Review' towards the end of the three-year cycle, where you and a colleague can discuss your CPD and how it has developed your practice.

i For more information about the new CPD scheme, see our public website at: bit.ly/gosc-new-cpd
Want to become an Early Adopter? Email EarlyAdopter@osteopathy.org.uk

Assessor vacancies with the GOsC

Do you have a broad range of experience in osteopathy, including in undergraduate education? Are you a strong communicator and team player? If so, you could play a vital role maintaining standards in osteopathic education and the profession.

We are now seeking to recruit six osteopaths to take on the dual roles of **education visitor** and **registration assessor**. Working jointly for the GOsC and the Quality Assurance Agency for Higher Education (QAA), you will:

- conduct GOsC reviews of osteopathic education providers, to ensure that their courses meet *the Osteopathic Practice*

Standards and put patient safety, public protection and excellence at the heart of all activities

- assess applicants to the Register who currently practise outside the UK, and osteopaths who have been off the Register or non-practising for some time.

You can find out more (including details of remuneration and expenses), plus information on how to apply, on the QAA website at: bit.ly/qaa-recruit-vacancies

The deadline for applications is **Friday 23 September**. Interviews will take place in November, and the QAA will run a two-day training course in March 2017.

New osteopathy course in the South West

The University of St Mark and St John in Plymouth is planning a four-year full-time and six-year part-time course leading to a Masters degree in Osteopathic Medicine. Students will be admitted to these courses from September 2017.

The university has applied to the GOsC for the course to be given Recognised Qualification status. We have begun a review, and assessors from the QAA will be visiting the university on our behalf in October.

In the meantime, the university has been invited to attend meetings of the Council of Osteopathic Educational Institutions (which represents all the institutions offering Recognised Qualifications), starting in September.

Dr Gary Shum, Faculty Director of Research at the university's Faculty of Sport and Health Sciences, said: "We are delighted to be working with the GOsC as we develop our new osteopathy course."



The university already offers degree courses in Sports Therapy and related subjects

UNIVERSITY OF ST MARK AND ST JOHN

GOsC is performing well, says our regulator

For the sixth consecutive year, the GOsC has met all the 'standards of good regulation' set by the Professional Standards Authority (PSA) – the independent organisation that monitors the performance of all nine healthcare professional regulators in the UK.

In its *Annual Review of Performance 2015/16*, the PSA was pleased to note our progress in developing the new CPD scheme for osteopaths (see pages 4-5).

PSA Chief Executive Harry Cayton emphasised the organisation's support for the new CPD scheme in July, when he told the House of Commons Health Committee about the GOsC's "really quite innovative and interesting work in developing a different kind of way of



measuring continuing competence" compared to a more elaborate 'revalidation' process.

Achievements

Other GOsC achievements highlighted in the performance review included:

- promoting the 'professional duty of candour' through activities such as workshops with osteopaths, patients and the public
- developing new guidance to support the work of our fitness to practise committees
- publishing a leaflet and online video to support witnesses giving evidence in GOsC fitness to practise hearings.

On the specific issue of complaints about osteopaths' advertising (see

You've got mail: making online renewal even easier

Since we improved the process for online renewal 18 months ago, 70 per cent of osteopaths have been renewing their registration on the **o** zone. The system has proved so straightforward to use that we sometimes

get phone calls from osteopaths wanting to check that their renewal has definitely gone through, because the process has seemed 'too easy'.

In response, we have introduced an automated confirmatory email: you can expect to receive this when you submit your online renewal form, so you'll know the form has reached us.

Do we have your address?

Of course, you will only benefit from this enhancement if we have your up-to-date email address – which also enables you to receive the monthly GOsC news e-bulletin, our *Fitness to Practise e-Bulletin* and occasional important notifications from us.

To check and update your email address and any other correspondence

details we hold for you, click on the 'Update my details' page in the top right corner of any page on the **o** zone – or visit bit.ly/ozone-update-details

Alternatively, you can email registration@osteopathy.org.uk

Please note that the email address you provide will be used for GOsC correspondence only. If you'd like to add or amend an email address to your entry on the online Register of osteopaths, visit bit.ly/ozone-practice-details or email us at the above address.

Just a few clicks

If you haven't yet tried renewing your registration online, please try it when your next renewal is due. Besides saving time, you will have the convenience of being able to renew at any time, day or night.



page 15), the PSA said that the GOsC has taken 'a reasonable approach ... taking appropriate steps to ensure that complaints are risk assessed and properly considered'.

No concerns

In the past the PSA has published a single performance review every year covering all the healthcare professional regulators, but for 2015-16 it is publishing an individual performance review for each regulator. The GOsC volunteered to be one of the first regulators to be reviewed, and is the first to have had its review published; the review stated that no concerns had been raised by the information we supplied about our activities.

GOsC Chief Executive Tim Walker welcomed the review's publication, adding that it "highlights the important work we do to protect the public and promote confidence in the osteopathic profession".

i You can find the performance review on the PSA website at: bit.ly/psa-gosc-2015-16

And with the introduction this year of insurance self-declaration, the renewal process can now be completed entirely online. We have introduced a section on the renewal form where you declare that you have insurance and provide the name of your insurer, meaning that you no longer need to send us separate proof of your insurance (although we will of course conduct regular random checks).

If you pay your fee by direct debit, your renewal can be completed in just eight clicks on the online renewal form – and if you prefer to pay online by card, you will be taken to a secure payment area once you submit your renewal form.

Lost your o zone password?

To log in to the o zone, you will need your GOsC registration number and password. If you forget your password, you can ask us to email you a new one by visiting the o zone homepage (members@osteopathy.org.uk) – or, if we do not have your current email address, call 020 7357 6655 x242.

BREXIT: IMPLICATIONS FOR UK OSTEOPATHY



SHUTTERSTOCK / GRAPHICWORLD

A central part of the debate before and after the referendum on the UK's membership of the European Union has been about freedom of movement between different countries. So what will the impact of 'Brexit' be for UK osteopathy?

That's a question we have been asked by osteopaths, but the simple answer is that it is too early to say: it is likely to be a number of years before there is clarity about new rules for UK osteopaths living and working in Europe, or for European osteopaths coming to the UK.

However, the issues fall into two main areas: residency requirements and recognition of qualifications.

The issue of future residency rights will almost certainly be one of the most contentious in negotiations between the UK and the European Union (EU), and currently it is difficult even to guess what these arrangements might be.

Mutual recognition of qualifications is an area in which we have been engaged over a number of years, and which is covered by a European Union

Directive. However, automatic recognition of osteopathic qualifications between European countries is in any case limited, because osteopathy is not regulated in every EU state – the only European countries to regulate it are Finland, France, Iceland, Liechtenstein, Malta, Portugal, Switzerland and the UK. Again, we must wait to see what arrangements might be put in place for future mutual recognition of qualifications between regulated countries, but this is something on which we will keep a watchful eye.

The GOsC has always maintained active links with European osteopaths through the Forum for Osteopathic Regulation in Europe (www.forewards.eu). Although it appears that the UK will be leaving the EU, we will of course still be part of Europe, and the GOsC will continue to maintain strong links with European osteopathic organisations as well as further developing relations with regulatory authorities around the world.

Ongoing concerns

What issues prompted patient concerns and complaints about osteopaths in 2015? What action can osteopaths take to avoid these concerns arising? And what should you do if you have concerns of your own about another practitioner?

Effective communication can allay many patient concerns



JAN CHLEBIK

Each year since 2013, the National Council for Osteopathic Research (NCOR) has analysed data on complaints received by the GOsC, concerns raised with the Institute of Osteopathy and claims made to indemnity insurers, to identify the issues prompting patient concerns about osteopaths.

An analysis for 2013-15 has now been published on our public website at: bit.ly/gosc-concerns

It reveals that, excluding complaints about false or misleading advertising (see page 15), there were 102 concerns recorded about osteopaths' conduct last year: roughly the same as in 2013 and 2014.

Communication issues

Ineffective or inappropriate communication by osteopaths rates persistently among the problems most often cited. This suggests that many osteopaths may benefit from refreshing their communication skills, which is why the new CPD scheme for osteopaths will require you to undertake at least one CPD activity in communication and consent during every three-year 'CPD cycle'.

We are currently revising and improving our case studies and resources on communication and consent, and these will

be available later this year to 'Early Adopters' of the new CPD scheme; you can find out how to become an Early Adopter on page 4.

We are pleased to see a steady reduction since 2013 in concerns about osteopaths' failure to obtain valid consent from patients; nevertheless, many osteopaths tell us this is an area where they feel uncertain about their responsibilities. Our latest *Fitness to Practise e-Bulletin*, available on the **o** zone at: bit.ly/ozone-ftp-ebulletin, contains a guide to obtaining consent. The e-bulletin also stresses the vital importance of maintaining your professional indemnity insurance; osteopaths' failure to do this has prompted an increasing number of complaints since 2013.

Establishing boundaries

Concerns raised about sexual impropriety have steadily increased every year since 2013; combined with failures to protect patient modesty and cases of osteopaths entering into personal relationships with patients, these account for more

than a quarter of all concerns about osteopaths' conduct.

In some cases these concerns may be the result of miscommunication – but it is clear from complaints heard by our Professional Conduct Committee that some osteopaths are failing to maintain proper professional boundaries.

Guidance to standard D16 of the *Osteopathic Practice Standards* ('Do not abuse your professional standing') expressly states that osteopaths should not initiate a relationship with a patient or act on feelings of sexual attraction to or from patients; it warns that transgressing sexual boundaries 'may have a profoundly damaging effect on patients ... and is likely to bring the profession into disrepute'.

Raising concerns

If you have concerns about the conduct or the health of another osteopath or other health practitioner, and you believe this is posing a risk to patients, you have a responsibility to take action.

Concerns about clinical care

In 2015, weaknesses in osteopaths' clinical care were cited 108 times in concerns, claims and complaints – a reduction from 2014's figure of 139, but higher than the 89 reported in 2013.

New or increased pain or injury caused by treatment was, by far, the most common complaint. Managing patients' expectations is vital: when communicating the risks of treatment to a patient, remember to point out the high probability of a short-term increase in tenderness or pain. A recent systematic review¹ reinforced previous findings that 'approximately half' of patients receiving manual therapy experience 'mild to moderate adverse events' which resolve within 24-72 hours.

Treatment perceived as inappropriate, unjustified or administered incompetently continues to be a common cause for concern; worryingly, 2015 also saw an increase in concerns raised about osteopaths providing advice, treatment or care that was perceived to be beyond their competence.

Undertaking training to refresh your clinical skills or learn new techniques is of course a vital part of being an osteopath, but you must be sure not to practise those techniques until you are fully competent to carry them out safely.

¹ Clar *et al.* Clinical Effectiveness of Manual Therapy for the Management of Musculoskeletal and Non-Musculoskeletal Conditions: Systematic Review and Update of UK Evidence Report. *Chiropractic & Manual Therapies* 2014, 22:12. Available at: www.chiromt.com/content/22/1/12

This can be difficult, and you may be unsure whether their behaviour justifies action – if so, try asking yourself:

- Would you be concerned if this practitioner were treating your family or friends?
- If it is their behaviour that worries you, is this a one-off action or persistent?
- Does it pose a risk to children or vulnerable adults?
- What might happen in the short or long term if you do not take action?
- If you did not act on your concern and you were later asked to justify this decision, could you do so?

Guidance to standard C9 ('Act quickly to help patients and keep them from harm') of the *Osteopathic Practice Standards* advises that – 'keeping in mind that your objective is to protect the patient' – you should consider discussing your concerns directly with the practitioner, or you may find it more appropriate to talk to their employer or practice principal if they have one.

Depending on the nature of your concerns, it may be appropriate to report the practitioner to:

- the GOsC, if the practitioner is an osteopath – call our Regulation team on 020 7357 6655 x224 or email regulation@osteopathy.org.uk
- the practitioner's own regulator or voluntary registering body, if they are not an osteopath – you can find contact details for other health and social care regulators on our public website at: bit.ly/gosc-health-regulators
- the police or social services, if you have urgent and serious concerns for a patient's safety.

We may be able to offer protection under the *Public Interest Disclosure Act 1998* if you contact us with a concern about a practitioner in your own workplace.

If you are the principal of a practice, you must ensure that systems are in place for your staff to raise concerns about patient safety – and that staff know how and when to use those systems.

i For advice and support on raising concerns, contact our Regulation team (see above), your indemnity insurer's legal helpline or the whistleblowing charity Public Concern at Work: call 020 7404 6609 or visit www.pcaw.co.uk/individual-advice

Mentoring schemes will support new graduates

Do you provide mentoring in your practice or osteopathic community? Your experience could help to develop arrangements for the wider profession

At this time of year, hundreds of newly qualified osteopaths are embarking on their careers – but we know that recent graduates can struggle with the transition from the supported training environment into independent professional practice.

The Osteopathic Development Group (ODG) – a collaboration between leading organisations within the profession, including the GOsC – is establishing a framework for the mentoring of early-career osteopaths through a structured personal development relationship.

Principals and associates

Following a survey of osteopaths last year, the ODG is prioritising the development of a mentoring scheme based in the workplace. Building on the support that many practice principals already give their associates, the ODG wants to develop:

- mentoring materials that draw upon existing good practice in relationships between principals and associates.
- training – face to face or online – for mentors
- a support mechanism for mentors, and possibly for those being mentored, so they know who to contact if difficulties arise in the mentoring relationship.

The scheme will be piloted by a small number of principals and associates before being rolled out more widely.

Independent mentoring

Another priority is for osteopaths to be able to obtain one-to-one support from mentors outside a principal-associate relationship.

Members of the profession could offer to be mentors as 'generalists' or in areas of expertise such as business development, communication, and working with other healthcare professionals. A directory of mentors

could be available online, enabling interested osteopaths to contact a mentor directly for support.

Before such a scheme is launched, the ODG will develop 'ground rules' to manage the expectations of mentors and those being mentored, and assess the need for mentor selection and training processes.

Get involved

The ODG hopes that establishing a culture of mentoring within the profession will reduce the risk of isolation and encourage professional unity, as experienced osteopaths pass on their learning to the next generation.

If you are already involved in osteopathic mentoring, whatever its formality or nature, please email ODG Programme Manager Matthew Rogers at: matthew@osteopathy.org – your perspective can help develop best-practice materials for the workplace mentoring pilot scheme.

i For more information about the ODG mentoring project, see bit.ly/odg-mentoring



GENERAL OSTEOPATHIC COUNCIL

Audits earn plaudits

Clinical audit is a valuable method of monitoring and evaluating an aspect of your practice, to find out whether you are following best practice. But what exactly does it involve and how do you do it?



Clinical audit pioneer Florence Nightingale

TONY BAGGETT / SHUTTERSTOCK

What can you audit?

Area of practice	Examples of topics to be audited
Your practice's structure The building and its state of repair, the facilities, and practitioners and staff	How often equipment is assessed for safety, or how patient notes are stored
Process and content of patient care Practitioners' technical skills and decisions on patient management	Whether and how negative findings are recorded in case notes, or comparing care delivered against guidelines
Outcomes of care Changes in health and wellbeing following treatment	The patient response to a particular treatment in terms of pain relief, reduced disability or adverse reactions
Patient satisfaction	Whether patients feel listened to and understand treatment explanations, or why they fail to complete their treatment

Since Florence Nightingale started collecting mortality rates at a barracks hospital during the Crimean War, and used them to show the beneficial effects of applying strict standards of hygiene, health professionals have been conducting clinical audits.

A clinical audit is a process for measuring and improving the quality of patient care in a systematic way, by focusing on a chosen area of your practice. While collecting data about an aspect of your practice is an essential part of the process, data collection alone is not audit: you also need to *review* the data against clear standards and criteria.

The *Osteopathic Practice Standards* list clinical audit as one of the ways you can monitor and improve the quality of the osteopathic care you deliver (standard B4).

An Introduction to Clinical Audit for Practising Osteopaths, produced by the National Council for Osteopathic Research (NCOR), is a handbook designed to help you carry out an audit. It lists some of the benefits, such as:

- improving patient care and increasing the number of satisfied patients
- helping to demonstrate the benefits of your practice to others
- identifying areas for making your practice more efficient and making more effective use of clinical time.

It also features the perspectives of osteopaths who have carried out audits themselves. One of them, Charles Peers, has used audit to market osteopathy to agencies such as the NHS; he notes that an audit's goals "are more modest than those of clinical research and, therefore, potentially achievable by large numbers of practising osteopaths".

Getting started

"Undertaking an audit can be as involved or as simple as you wish," says NCOR Senior Researcher Carol Fawkes. "A huge number of areas can be audited in practice, and *you* can decide what is most relevant to *your* practice setting."

The table on the left lists some potential areas for audits. To maximise the benefit from conducting the audit, the NCOR handbook suggests choosing an area where you believe your current performance can be improved, and where the improvements will benefit a large number of people – but if you are carrying

out an audit for the first time, start with something straightforward. The handbook also emphasises the need to be clear about what you hope to achieve.

Once you have selected an area to audit, identify and agree the standards or benchmarks that you will measure against; these must be realistic, and based on evidence where possible.

You can search the research literature for evidence of what constitutes good practice – NCOR tutorials are available (at: bit.ly/ncor-evidence-based-tutorials) to help you with not just searching but also evaluating the literature that you find.

Even if you cannot find evidence of good practice in your chosen area, you may still be able to draw up your own standards for discussion with colleagues. Describing his experiences of clinical audit, sole practitioner Bryan McIlwraith suggests in the NCOR handbook that you carry out a simple audit of your practice building: invite a friend or long-term patient to visit the practice out of hours and note anything (from cleanliness to carpets) that could be improved, then use their observations as the basis for standards.

Acting on findings

The rest of the audit process involves observing practice, comparing it with the standards to identify and make improvements, and then re-auditing to show the effect of the changes you have made. The box on the right offers a step-by-step guide, and you can find details of each stage in the NCOR handbook.

Re-auditing is described in the handbook as ‘the forgotten vital stage’ of an audit: as well as identifying whether the improvements made as a result of the initial audit have enabled you to meet the standards, it can also identify whether you should review the standards themselves (because, for example, you can now aim for a higher standard) in any future audit.

Under the new CPD scheme for osteopaths (see page 4), in every three-year ‘CPD cycle’ you will need to do at least one ‘objective activity’ to obtain feedback on your practice. Clinical audit could be one such objective activity, but you will need to show how it has influenced your CPD and improved your practice – so it is important to write an audit report.

The NCOR audit handbook includes an account by Carol Fawkes of an audit that she carried out in her own osteopathic practice, on the topic of patient case

Auditing, step by step

The NCOR audit handbook breaks down the audit process into stages:

1. Identify a topic that is relevant to your practice setting. The topic you chose should be ‘SMART’: specific, measurable, achievable, relevant and timely.

2. Review the literature – possibly involving papers from healthcare disciplines other than osteopathy – to identify best practice on that topic.

3. Agree the standards for your audit, taking your current level of performance into account. The standards you set should not be unrealistically high, but should be high enough for you to be able to achieve genuine improvement if you meet them. If you find that no established standards exist for the topic you have chosen to audit, talk to colleagues or professional peers to arrive at appropriate standards.

4. Plan the audit, by deciding:

- who will be involved, and what their roles and responsibilities will be
- the timescale you will need, and how the audit will fit in with other demands on your time
- the sample size for your audit
- who will analyse the data, and how
- what to do with the audit findings.

5. Collect the data – but don’t collect more than you need, and ensure that you observe data protection principles. The NCOR handbook contains model questionnaires for a range of audits, and you can download these as Word documents from the o zone at: bit.ly/ozone-audit

6. Analyse the data. It is important to decide in advance how you will do this, and how much data analysis will be required.

7. Identify and make suitable changes. Look carefully at the findings from your analysis and the changes you need to make. Be realistic in these changes, and ensure that everyone who will be affected is considered.

8. Re-audit. This is vital to show whether an audit has actually had an effect on your practice. Before you re-audit, ensure that you allow enough time for the changes made to be embedded.

9. Reflect on the findings of your audit, and disseminate them where appropriate – maybe to your local osteopathic group and/or your patients. It can be useful to record your findings in a short report, especially if you are claiming CPD hours for the audit.

notes. It begins by setting out the audit’s aims – to ensure that the practice recorded information about every patient, and that patient notes were accessible and contained certain key information – and explaining how a simple literature search led her to set the standards for the audit. It then describes how she collected, analysed and evaluated audit data to see where and how the standards were not being met. Finally, it lists the steps she took to achieve improvements, and gives the results from a re-audit a few months later.

“Undertaking the audit was not difficult,” recalls Carol. “It required some basic planning (to decide the best time of year for the audit, how many case notes to sample, how long to wait before re-auditing, and so on), but it was manageable. The audit tool was readily

available and did not have to be created, so I completed the data collection as a half-day CPD activity, and the analysis was very quick using a basic Excel spreadsheet. I have continued to audit my case notes every year to check that my note-keeping standards have not slipped.”

If you are thinking of carrying out an audit in your practice, Carol and her NCOR colleagues are happy to give you support. Please email c.fawkes@qmul.ac.uk

i The NCOR website (www.ncor.org.uk/practitioners/audit/) has links to audit resources produced by various healthcare bodies and professions. NCOR’s handbook, *An Introduction to Clinical Audit for Practising Osteopaths*, is available on the o zone at: bit.ly/ozone-audit

Is your practice security-savvy?

There's more to data security than locked filing cabinets and password-protected computers – and everyone in your practice needs to know their responsibilities

Whether your practice stores its patient records electronically or on paper, the *Data Protection Act 1998* says that any organisation holding individuals' personal data must have 'appropriate technical and organisational measures' in place to prevent the data's 'unauthorised or unlawful processing, accidental loss, destruction or damage'.

Having appropriate physical and technological security in place is essential: you need secure storage facilities for any personal information that you hold. But the Information Commissioner's Office (ICO) – the independent body responsible for ensuring compliance with

the Act – considers that 'management and organisational security measures are likely to be equally important in protecting personal data'.

Identifying risks

One valuable organisational measure could be a risk assessment, taking account of the nature of your practice and how you handle patient data; thinking about how you practise from an information security viewpoint may help you to identify any potential security risks. For example:

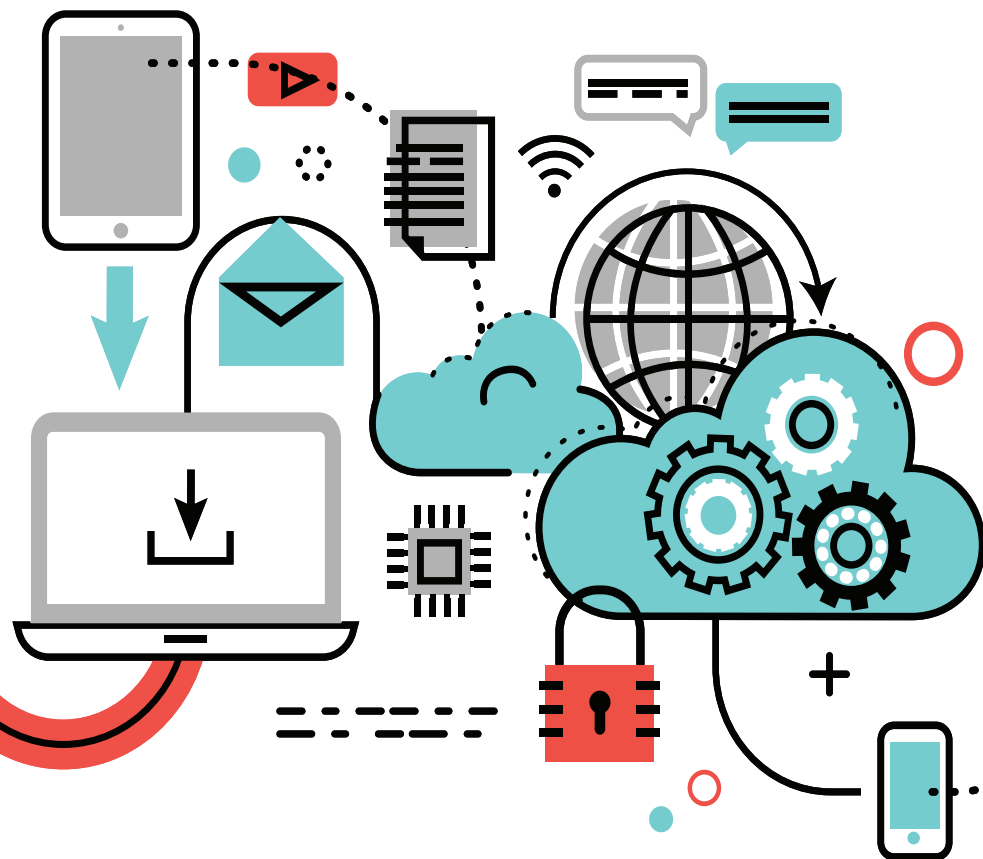
- Do you bring a whole morning's patient records into your treatment room to save you time retrieving them from storage between each appointment?

And if so, could they be seen by a patient when you leave the room while they undress? If your patient records are computerised, do you leave your computer unlocked and accessible when a patient is left alone in the room to undress?

- Are patient records ever taken out of the practice? Do you store and carry patient records on a laptop computer?
- How do you dispose of old computers that may contain personal data?

Having identified any security risks, you can introduce procedures to mitigate them, such as:

- locking away other patients' records during consultations
- ensuring that patient records are removed only for home visits to those patients (and not for you to work on at home); are carried in secure cases; and are formally booked out from the practice and booked in again on the osteopath's return to the practice
- changing computer passwords frequently
- properly deleting any personal information before computer hardware is sold or disposed of – advice on your options is available from the ICO at: bit.ly/ico-secure-deletion, or you can employ a contractor to dispose of your equipment securely. However, you need to get obtain evidence that they have done so – in 2013 a health trust was fined £200,000 by the ICO for insecure disposal of data, after contractors commissioned to destroy its computer hardware sold it on eBay instead. The trust was held responsible because the contractors had been working on its behalf, and it had not monitored them or asked them for certificates of destruction.



If you employ staff and/or work in a group practice, identify an individual who will have day-to-day responsibility for security issues (everything from access to the premises to the encryption of computer data) and carrying out periodic security checks – and ensure that everyone in the practice knows who that individual is.

Another vital security measure is to ensure that only authorised people can access, alter, disclose or destroy personal data. Under the *Data Protection Act*, employers must take reasonable steps to ensure the reliability of all staff who have access to personal data.

Culture of awareness

It is also essential to build a culture of security awareness across the practice, so that everyone understands the importance of protecting personal data, and knows how to apply your security procedures.

Practitioners and staff should be alert to the risk that people may try to obtain patients' personal data by deception – and they should know what to do if they receive patient data requests (whether genuine or otherwise) from individuals claiming to be other health professionals, family members, the police or anyone else. We will cover this issue in the next edition of *the osteopath*.

While it is right to focus on preventing breaches of data security, your practice also needs to plan for the possibility that a breach may occur. Accidents do happen, and everyone in the practice should appreciate the need to report and act on the loss or inappropriate sharing of patient data, so that the situation can be remedied and steps taken to prevent a recurrence.

i The ICO publishes guidance on information security, including what you should do in the event of a security breach, on its website at: bit.ly/ico-principle-7

Are you the 'data controller' for your patient records? Find advice about this and other topics on the **ozone** at: bit.ly/ozone-data-protection

'While it is right to focus on preventing security breaches, you also need a plan in case one occurs'

FREQUENTLY ASKED QUESTIONS

Q A patient has been coming to our practice for three years, and has started bringing a dog to her weekly appointment. She says it is an assistance dog which, since undergoing surgery recently, she needs to have with her at all times.

Our practice's policy is to allow assistance dogs only if they are registered with an appropriate charity, such as Assistance Dogs UK (ADUK). The patient says she has trained the dog herself, but has been told it cannot be registered with ADUK because it is too old. She adds that it is a breed that can be close to people who have allergies to dogs, without causing any problems.

I am unsettled by dogs, but last week I allowed the patient's dog to accompany her during her appointment; I found it to be disruptive, and I am worried that its presence in future will affect my concentration and impair my ability to practise safely. I am also worried about the effect on the clinic's cleanliness.

I have offered to treat the patient if the dog remains outside the door; am I justified in refusing to allow it into the treatment room? She says she will leave the practice if we do so.

A The *Equality Act 2010* defines disability as a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities. If your patient is disabled in accordance with that definition, you must make reasonable adjustments so that she is not at a disadvantage.

The Equality and Human Rights Commission (EHRC) used to produce guidance for businesses which – by stating that assistance dogs wear a harness or identifying coat,

for example – suggested that only dogs registered with ADUK were considered to be assistance dogs.

However, the guidance is currently being revised, and the EHRC has told us that the above information will be removed; in future, the EHRC will 'not be using any concept' of what type of dog may be considered an assistance dog.

Rather than focusing on the dog's status, you should consider your duty to make reasonable adjustments: is it reasonable to adjust your policy on dogs, to allow this dog (whether it is registered with ADUK or not) into your treatment room so the patient can use your service?

You may decide that this is a reasonable adjustment – but if the dog proves to be disruptive or unhygienic, you might consider it is no longer reasonable to continue making the adjustment. In that case, it is good practice to discuss with the patient whether there are other reasonable adjustments that can be made.

With regard to allergies, the EHRC guidance for businesses states that refusing to allow people with assistance dogs access to your premises as a reasonable adjustment, solely because other people *might* be allergic, 'is likely to be unlawful disability discrimination'. If a patient or staff member has an allergy to dogs, you should (both as an employer and as a service provider) take reasonable steps to ensure that they have minimal or no contact

with dogs – but, the guidance notes, 'reasonable steps are unlikely to include banning all assistance dogs'.

Assistance dogs trained by ADUK's member organisations are recognised by the Chartered Institute of Environmental Health, which says they are unlikely to pose a risk to hygiene.

You can find detailed information about assistance dogs on the ADUK

website at: www.assistancedogs.org.uk/faqs/#info



Make your website work for you and your patients

There are almost 3,000 practice websites listed on the online Register of osteopaths. Here are some tips for using your site to promote your GOsC registration and give assurance to patients and the public

Status symbols

When we conducted research into public perceptions of osteopathy in 2014 (described at: bit.ly/gosc-public-patient-perceptions), more than 90 per cent of people surveyed said that they had greater confidence in health professionals who are monitored by a regulatory body. But well under half (43 per cent) of them said they thought that osteopathy is regulated in the UK, so it's important for you to raise public awareness of your status as a regulated health professional.

The most effective way of doing this is to display one of our Registration Marks on your practice website, as well as in other communications and on your premises. Two types of Registration Mark are available (in both English and Welsh versions):

- The **'I'm registered'** Mark is for individual osteopaths. It includes your unique GOsC registration number, so your patients and prospective patients know that they can easily check your registration status on the Register.
- You can use the **'We're registered'** Mark if you share a practice with other osteopaths, and have a common website and practice stationery. It does not include your individual registration numbers, and we will provide it only to the principal osteopath in a group practice (who can also apply for their own 'I'm registered' Mark).

To date we have sent out more than 1,300 'I'm registered' Marks on request to osteopaths, and almost 350 'We're registered' Marks.

You can request either or both Registration Marks by completing a simple online application form, available on the **o zone** at: bit.ly/ozone-reg-mark

However, as part of your application you will have to comply with our terms of use for the Marks. These are not onerous – we simply ask that you use the Marks as supplied, reproduced at a legible size with a little clear space around them – but unfortunately in a survey of practice websites this summer we have seen the Marks squeezed, stretched, coloured and embellished in various ways.

If the Registration Marks are to be a recognisable symbol for patients and the public of osteopaths' regulated status, they need to be displayed consistently: please treat them with respect!

If you display your Registration Mark on your website, you can make it easy for your patients and the public to look you up on our online Register – just create a hyperlink from the Mark to www.osteopathy.org.uk/register-search

Finally, if a prospective patient wants to check that you are on the Register, they will want to be sure that they have found the right record for you. So we recommend that your website and other communications (including your practice stationery, business card and email signature) should display your name exactly as it appears on the Register, along with your registration number.

Patients yearn to see learning

Having a recognised level of education and training is another attribute of a health professional that increases confidence, according to more than 90 per cent of

Promoting your registration: do's and don'ts

If you want to promote your GOsC registration online and elsewhere, please:

- **do** display the Registration Marks, but ensure that you comply with the terms of use (see bit.ly/ozone-im-reg-terms and bit.ly/ozone-were-reg-terms)
- **don't** display the old 'Safe in our hands' Certification Mark – following the launch of the Registration Marks, this was withdrawn in December 2014
- **don't** display the GOsC logo – this is now for use solely by the GOsC
- **do** say that you are *registered* with the GOsC, not a *member* of the GOsC.



JAN CHLEBIK people in our 2014 public perceptions survey. And every month we receive telephone queries from prospective patients seeking reassurance about osteopaths' qualifications.

So don't just hang your framed degree or diploma certificate(s) on the wall of your practice – put information about your qualifications on your website, to spread the word about the quality of osteopathic education.

Tell patients what to expect ...

Participants in our 2014 public perceptions survey overwhelmingly told us that, in deciding whether to seek treatment from an osteopath, they would want to know in advance about the potential benefits and risks of treatment, and the osteopath's professional standards – as well as simply what osteopaths do.

While of course it is not appropriate to talk in detail about benefits and risks until you have seen a patient, the GOsC has produced two leaflets containing impartial information for prospective patients:

- *What to Expect from Your Osteopath* covers the nature of osteopathic treatment, the potential for short-term pain or soreness following treatment, and how to raise concerns.
- *Standards of Osteopathic Care* describes the role of the GOsC and the standards of practice, education and CPD that we set, plus our support for work that strengthens osteopathy's evidence base.

Both leaflets are available in PDF format on our website at: bit.ly/gosc-leaflets, so you can download them and publish them on your website. Printed copies are available for a nominal charge, so you can give them



to your new patients.

You are also welcome to reuse any GOsC-copyrighted text (but not any text that is the copyright of a third party) from our public website, www.osteopathy.org.uk, free of charge. All we ask is that you reproduce it accurately and not in a misleading context, and indicate that the GOsC owns the copyright to the material.

... but stick to the evidence

Although prospective patients want to know about the benefits of osteopathy, you must ensure that you do not make any claims for the efficacy of treatment that are not supported by evidence.

Despite reminding the profession repeatedly of the need to ensure that practice advertising complies with the requirements of the Advertising Standards Authority (ASA), we continue to receive 25 complaints per month about websites that are in breach of the 'CAP Code'. This steady stream of complaints can be very damaging to the public perception and professional reputation of osteopathy.

The CAP Code lists the conditions that the ASA's Committee for Advertising

Practice accepts osteopaths can claim to treat. An easy-to-read summary of this list is available on the CAP website at: bit.ly/cap-advice-osteopathy

Claiming to treat other conditions – such as asthma, sinus and adenoidal problems, infectious diseases, haemorrhoids, dyslexia, ADHD, speech and behavioural problems, learning difficulties, Down's

A few of the images available free of charge in our photo library

syndrome, cerebral palsy, infertility, whiplash, and common infant problems including colic, wind, sleep disturbances and glue ear – will place you at risk of

being challenged by the ASA.

Please check regularly that your own advertising complies with CAP's requirements, and make use of the CAP's free advice service. Find out more on the **o** zone at: bit.ly/ozone-advertising

A picture of health

Images can bring a website to life, and we are currently expanding our online photo library at: bit.ly/gosc-photos

The photographs, depicting various aspects of osteopathic consultations, can be used free of charge on your practice website and other communications channels, provided you acknowledge the appropriate copyright (stated beneath each image in the library).

If you prefer to look further afield, a number of commercial photo libraries have images available for relatively low charges, but you should take care about downloading and using photos from the internet without permission: if you infringe a photographer's copyright, they could take legal action against you.

Update your Register entry

However good your website is, it isn't useful unless people know it exists. You can increase its visibility by listing it as part of your practice details on the online Register of osteopaths.

Even if you think your Register entry is fully correct and up to date, just one mistyped letter is all it takes for potential patients to be unable to find you online. Please check your entry on the **o** zone at: bit.ly/ozone-practice-details, and maximise the online Register's potential to inform people about your practice.

i For more information about making the most of your professional status, download our leaflet *Promoting Your Status as a Registered Health Professional* from the **o** zone at: bit.ly/ozone-promote-reg



Capturing patients' experiences online

How do our patients feel about the care they receive? Thanks to an online reporting system developed by the National Council for Osteopathic Research (NCOR), we can now find out at a national level – but we must all encourage our patients to use it, says NCOR Researcher **Austin Plunkett**

Collecting feedback from your patients is a great way of getting a fresh perspective on your practice and the care you provide. If that feedback can be gathered across the profession, independently and anonymously (to overcome any reticence that some patients may have about voicing their feelings and opinions to their own osteopath), it may yield valuable insights: providing evidence of patients' appreciation of their treatment while also highlighting areas for potential improvement.

At NCOR, we're often asked whether the profession can bring such data together. Fortunately, the answer is yes – simply direct your patients to our online reporting system, **Patient Reported Experiences of Osteopathic Services (PREOS)**.

Patient positivity

Accessible via computer or mobile device at: www.ncorpreos.org.uk, PREOS is simple for patients (or their relatives or carers) to use. The website invites them to write about any experience related to their visit to an osteopath, although it stresses that it is not a platform for raising formal complaints.

Every year NCOR will analyse the data captured, and summarise it for the GOsC and osteopathic educational institutions so that learning points can be developed into

'It is important to note that PREOS is completely anonymous'

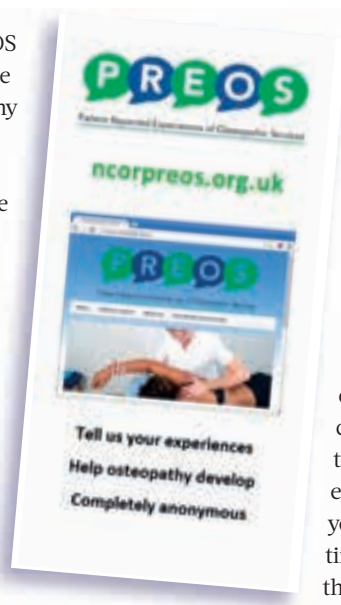
educational resources. PREOS is entirely independent of the GOsC, which does not see any individual patient reports.

The vast majority of comments made to date have been positive, but patients have raised a few issues, including failure to obtain consent, lack of shared decision-making, and concerns about costs of ongoing treatment. The profession can learn from these reports, and individual osteopaths can use them to reflect on whether their patients may share these concerns.

How does it work?

A PREOS user is presented with a short online form, which asks some optional multiple-choice questions about their age, sex, UK region, ethnic origin and disabilities or health impairments. These help us to improve our understanding of who uses osteopathic services, but it is important to note that PREOS is completely anonymous. Users do not need to register or log in, and are asked *not* to give any information that might identify them or their osteopath; NCOR will remove any such information from users' submissions.

The form also asks the user to identify the aspect(s) of their care that they want to write about – from an extensive list ranging from staff/practitioner availability and clinic hygiene to treatment outcome and co-ordination of care between osteopaths – and to describe their experience.



Spread the word

After a slow start, use of PREOS is increasing. If you've been promoting it to your patients, thank you – and if you haven't, you can start now!

Even if you carry out your own patient surveys, PREOS is designed to complement rather than compete with these. Of course, it's best for patients to tell you about their experiences of the care that you have given them, but at times a patient may feel that the profession as a whole would also benefit from

hearing about their experiences – PREOS is the perfect mechanism for this. It also caters for patients who wish to give feedback in their own time and anonymously.

Please help spread the word about PREOS by:

- talking to your patients about it
- adding a link from your website to www.ncorpreos.org.uk
- including the PREOS patient leaflet (above) – which you can download from www.ncor.org.uk/patients/preos – in your patient welcome pack.

The positive nature of submissions so far reinforces the view that our patients generally think very highly of osteopaths and osteopathic treatment. Gathering more evidence of this will be hugely valuable for the profession, especially given the increasing pressure on us all to demonstrate the value of what we do.

Research hubs

Whether you're newly qualified and want to develop your research interests while practising, or you've never been actively involved in research, NCOR Senior Researcher **Carol Fawkes** explains how research hubs offer invaluable CPD in a relaxed atmosphere

There's no such thing as a 'typical' research hub member. The four hubs around the UK attract osteopaths from different backgrounds who reflect a diversity of osteopathic practice but share a mutually supportive approach and an enthusiasm for our practice to be informed by evidence.

Each hub holds an informal meeting every 10-12 weeks, on a topic relevant to clinical practice. Research papers on that topic are made available a few weeks in advance – we all look at one of them, and each of us is allocated another of the papers to read. At the meeting, we all discuss the group paper, and we each give a very brief summary of the paper we have looked at individually. Then we discuss how to apply the papers' findings to our practice.

Belonging to a hub will help to keep you up to date with topics that patients may discuss with you, and will enable you to develop skills such as appraising research papers and contributing to research projects.

Why not come to a meeting and find out for yourself? Please email c.fawkes@qmul.ac.uk for details of your nearest hub.

Research papers on the topics for discussion at forthcoming meetings are published on the NCOR website at: bit.ly/ncor-hubs



Two hubs are looking at research into sitting and low back pain

JAN CHLEBIK

Honour for NCOR's first head

All at NCOR are delighted with the news that our former Chair, Emeritus Professor Ann Moore (right), has been honoured with a CBE in the Queen's Birthday Honours List in June.

Having qualified as a chartered physiotherapist in 1973, and with a PhD in the field of low back pain, Ann became Director of the University of Brighton's Clinical Research Centre for Health Professions in 1998; she has edited the research journal *Manual Therapy* for more than 20 years.

Ann headed NCOR from its foundation in 2003 until 2012,



when Dr Dawn Carnes was appointed as Director.

"This award is well deserved," said Dr Carnes. "Ann and colleagues showed much foresight in the 2000s to conduct research into adverse events, which has enabled osteopaths to convey evidence-informed information to their patients."

Professor Andrew Lloyd, Dean of the College of Life, Health and Physical Sciences at the University of Brighton, noted: "Through developing the evidence base in the field, Ann's research has had global influence ... and direct impact on patients."

Conference will focus on long-term pain

NCOR's 2017 conference, devoted to improving the management of long-term pain, will take place in London on **Saturday 28 January**.

It will feature workshops and talks on topics including the neurology of persistent pain, the psychological management of patients and clinical facilitation skills.

For more information, email info@ncor.org.uk

An impressive track record

Osteopaths are increasingly visible in sports' multi-disciplinary medical squads.

Poora Singh, currently in Rio de Janeiro as Senior Consultant Osteopath for British Athletics Team GB at the Olympics and Paralympics, describes his role



Poora Singh (centre) with Olympic sprinters Ojie Edoburun (left) and James Ellington

POORA SINGH

There are currently three osteopaths (Andy Burke, James Davies and I) in the British Athletics medical team. We're all based at Loughborough, and we each have a set of athletes we work with. Operating in an elite medical setting, we're successful because every team member has a role to play. It's all about having a skill set that complements what the others offer.

I got involved with British Athletics soon after qualifying in 2000. I treated a

sports massage therapist who referred some sprinters from the prestigious Birchfield Harriers Athletics Club to me. The club didn't really use osteopaths then, but it got to hear about me and the success I was having with their sprinters, and they sent me more athletes to treat as an external practitioner.

This led to a similar arrangement with British Athletics, which had a medical set-up at the club's Alexander Stadium, until about five years ago I was invited to become a full part of the medical team.

Trackside therapy

'Trackside Performance Therapy' is the treatment approach developed and implemented in British Athletics, with an osteopath physically there by the track with a treatment table. When an athlete arrives for training in the morning, they are consulted on all aspects of sports performance, from sleep to mood to nutrition, and we go through a set routine of examinations and tests to check that they feel in good shape. We observe them for any changes in their usual movement patterns while they warm up, then we ask them again how they feel; if necessary, we give them osteopathic interventions so they're ready to go.

We stay during their training session in case they need more attention, and after training they'll have either a full osteopathic treatment or soft tissue work with a sports therapist. We then sit down with the physiotherapist and the sports therapist, describing any symptoms the athlete had and what we

'The benefit of a team set-up is that you all learn from each other'

think caused them; the team will use that information to carry out further tests and observations which may reveal weaknesses explaining those symptoms.

That's how osteopathy has been fitted into a performance sports medicine model. When we come out of osteopathic school, we don't have the skills for the full medical management of an athlete, but we do have the ability to treat pain, treat dysfunction and treat movement deficiencies. Bringing together an osteopath, a physiotherapist, a soft tissue therapist, a sports medicine doctor – and ensuring that we all know how we fit together – creates a solid team to deal with all aspects of injuries.

Different approaches

The benefit of a team set-up in a sports medicine environment is that you all learn from each other: different professions with different approaches coming together to provide the best possible care for the athlete. The knowledge gained helps you with your own development within your own practice, and helps build the name of the profession for your peers who want to get into sport.

I've learnt that the osteopathic skill set in terms of manual therapy – how we understand the movement of joints, the

quality of tissue, how force is delivered from the foot to the knee, to the hip, to the spine and the shoulder – puts us way ahead of other therapists. It's about understanding how we use the joints, apply force, train and adapt our nervous system: all well-known aspects of human performance that are studied in osteopathy.

If you want to work in the sports world, you can. Currently I think we're the best hands out there – and more and more sports have osteopaths involved.

But park your ego at the door: you can't walk into a physio-led team and say: "I want to set rehab programmes and do things my way," or "I want to do all the massage." The approach you should have is: "These are my skills, this is where I am highly trained, this is what makes me different from you and this is what I can provide to you as a team member." If you're going to be the one who articulates hips, just use all the osteopathic techniques you've learned and demonstrate how good you are.

Personally, I've also studied subjects like strength and conditioning, Pilates, sports nutrition, sports psychology and sports motivation, tailoring the way that I practise my profession to the sports world. That's one reason why it's easy for them to accept an osteopath – and there's nothing to stop other osteopaths from doing the same. Just be proud of your skills, and keep honing them.

The Osteopathic Sports Care Association (OSCA) provides educational opportunities for osteopaths interested in the healthcare and wellbeing of sportspeople, and promotes osteopathy in sport. OSCA Chairman Simeon Milton says:

"OSCA's experience is that the interdisciplinary approach in medical teams, as described by Poora, is increasingly being adopted in sports care. Osteopathy is more and more often seen as a vital part of this team. We at OSCA are trying to support osteopaths in sport – for example, with our internship programme, our CPD courses and the PGCert in Osteopathic Sports Care. Please see www.osca.org.uk for further details."



Extending osteopaths' reach

Nik Watson from the Institute of Osteopathy previews this year's Convention

Taking place on 25–27 November at the Beaumont Estate Hotel in Windsor, the Institute of Osteopathy Convention 2016 promises to be the best yet!

As always, we have attracted some of the best speakers in the osteopathic community and beyond, with the aim of creating a three-day event that provides far more than great quality CPD.

The theme of this year's Convention is 'Reaching Out' – a reflection of our ambition to build relationships with other health professionals and help them understand the benefits of osteopathic care for their patients.

A key speaker is orthopaedic surgeon Professor Charles Greenough, NHS England's former National Clinical Director for Spinal Disorders. Charles will be talking about the National Low Back Pain Pathway – a resource developed by the National Institute for Health and Care Excellence (NICE) to improve the management of back pain – and the opportunities that it presents for osteopaths.

We also welcome back Simeon Niel-Asher, Professor Laurie Hartman, Renzo Molinari and Dawn Carnes, who all gained great delegate feedback during previous events. Places on practical workshops are limited to ensure that everyone gets plenty of time to practise.

In addition to workshops, lectures and keynote presentations, Convention will be hosting several mini-conferences where delegates can explore the fields of headache management, care of mothers and babies, sports care and the integration of psychological care into chronic pain management.

The format allows every delegate to create their own unique experience, tailored to their personal learning goals, but what makes Convention so special is the incredible atmosphere created by bringing together more than 300 osteopaths. Generous lunch and networking breaks will allow plenty of time to meet and talk, and to browse around an exhibition of suppliers and service providers, in a relaxed and comfortable setting.

And don't forget the evening events: on Friday the Institute of Osteopathy will host an informal dinner and entertainment, which is a great chance for friends and colleagues to catch up, and on Saturday guests can celebrate the best of the profession at our annual gala dinner and awards.

i Tickets to Convention cost just £210 per day, with members of the Institute of Osteopathy saving £40 per day. For full details and to book, visit www.osteopathy.org/convention-2016

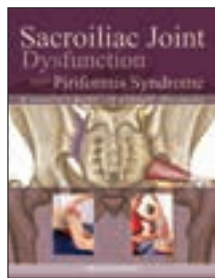
Bookshelf

A selection of illustrated reference books for osteopaths

Sacroiliac Joint Dysfunction and Piriformis Syndrome: The Complete Guide for Physical Therapists

Paula Clayton

Lotus Publishing (2015), 192 pages



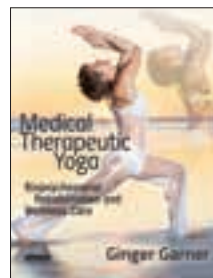
ISBN: 978-1-905367-64-1

Written by a senior performance therapist for British Athletics, this is a step-by-step practical guide to correcting dysfunction in both athletes and the general public, using a wide range of soft-tissue techniques: therapeutic handling of fascial tissue, dry needling, instrument-assisted soft-tissue manipulation and dynamic taping.

Medical Therapeutic Yoga: Biopsychosocial Rehabilitation and Wellness Care

Ginger Garner

Handspring Publishing (2016), 352 pages



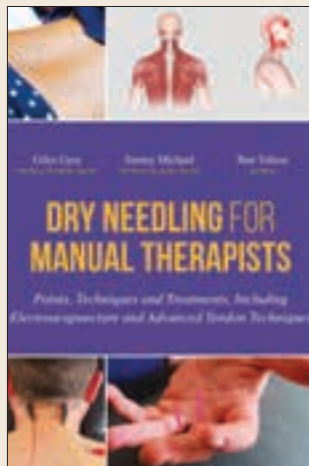
ISBN: 978-1-909141-13-1

An evidence-based guide to yoga posture and breath prescription, based on current biomechanical and neurophysiological theory and common mechanisms of injury. It applies yoga as medicine, covering its use for injury prevention and wellness, clinical evaluation and diagnosis, treatment and rehabilitation, and health and wellbeing.



If you would like to review any of these titles (in exchange for a free copy), contact the Editor at: editor@osteopathy.org.uk

Book reviews



Dry Needling for Manual Therapists: Points, Techniques and Treatments, Including Electroacupuncture and Advanced Tendon Techniques

Giles Gyer, Jimmy Michael and Ben Tolson

Singing Dragon

ISBN: 978-1-84819-255-3

Reviewed by Sue McCall M^{OST}

Designed as a go-to reference for both students and manual therapists who use trigger-point needling techniques,

this good-looking hardback is written by two osteopaths and a sports massage therapist who are all experienced acupuncturists and lecturers.

In an opening overview of the history of acupuncture, the authors explain that traditional Chinese medicine's aim is to improve a person's *qi* or life force; acupuncture does this by freeing the distribution of *qi* along 12 channels or meridians in the body. It would have been helpful to include diagrams showing these channels and the acupuncture points referred to throughout the text.

The next section brings the use of needling into the Western medical context, starting with a chapter on the concept of trigger points and myofascial pain syndromes. From the authors' perspective, modern acupuncture is the needling of trigger points: they don't go into the broader uses of

needling for arthritic joints or in any other areas such as periosteal pecking (except in the book's final chapter, on needling for tendinopathy). Next is a discussion of the physiological mechanisms behind acupuncture and how it is believed to modulate pain by affecting the descending pathways. The authors also relate the TCM model to Western medicine using fascial research: in many cases the TCM channels coincide with fascial planes, acupuncture points coincide with trigger points, and *qi* could be a representation of piezoelectricity that has been detected in living tissue. This is a persuasive hypothesis, although there is currently little evidence to back it up. Another chapter discusses the evidence for acupuncture and needling; this seems inconclusive, with many poorly done studies.

Moving on to the practical aspects, a review of safety considerations is followed by

the longest chapter, dealing with the needling of specific muscles. For each muscle, there is a review of the anatomy and pain referral patterns of trigger points, plus a description of where and how to apply the needles and any issues to be aware of (when needling near the lungs, for example). There are photographs of the needling and diagrams of the trigger points, but in some important cases (such as the scalenes and pectoralis minor) there are no photographs, making it harder to reproduce the techniques. It would also be helpful to have arrows on the photographs to clarify the needling direction. Also, the order in which the muscles are shown could be improved, as the book jumps around the body seemingly at random.

Overall, this is a useful manual for those wanting to brush up on their knowledge of trigger-point needling, and a reminder of how to approach specific muscles.

The Therapeutic Pause in Osteopathy and Manual Therapy *The Somatosensory Integration Time*

Louise Tremblay

Handspring Publishing
ISBN: 978-1-909141-36-0

Reviewed by
Leza Dickson BOst

It was drawn to the title of this book because, as a practising osteopath and a practitioner of yoga, I resonated with 'the pause': this mysterious moment of seemingly nothingness yet the turning point, catalyst if you will, for inherent healing (not just biological or physiological, but a deep sense of past experiential legacies dissolving so that new ways of being can be born). The book is very academic in its delivery, and thorough in its references and research; the style is that of a dissertation, very evidenced and factual with few qualitative nuances. It is a commendable piece of work.

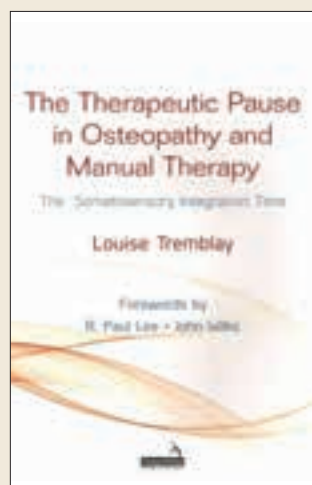
The author invites us to 'consider going slowly', 'letting the process unfold' and 'allowing the therapeutic process to ripen and mature'. The resulting quiet period is called the somatosensory integration

phase, where the central nervous system and the system as a whole interpret the changes that have come about through treatment.

The first two chapters cover the nervous system in depth, both anatomically and physiologically. In later chapters the author discusses 'pauses' in therapies (Bowen techniques, craniosacral techniques, Pierre Tricot's energy saturation and refusal, and Nicette Sergueef's Traube-Hering wave, among others) that have observed this momentary integration time, only observable when we create the time for it or intentionally 'listen' for it. She says that osteopaths have a good understanding of anatomy, physiology and pathology as well as manual techniques, but they also need to pay attention to the field of life's rhythms that form part of this picture.

As osteopaths we can recognise this moment, but attempting to explain it and evidence its existence is a bold narrative. This book is not a practical manual on how to make it happen, written in anecdotal prose: it is an intellectual piece of work with solid, scientifically based explanations.

Since reading the book I have become very aware of attempting to 'create' these moments in clinic. I have come to realise that they occur frequently and may be induced, even as we work with soft tissue release, breathing patterns and so on. I've felt as though I am moving back to what osteopathy truly is, rather than competing with a solely structural interaction. Less has become more.



Backchat

Acupuncture essentials

As Chair of the British Acupuncture Council (BAC), I was pleased to see coverage of the new 'Acupuncture Safety Resource' website in the Jun/July edition of *the osteopath* (page 14). I am aware that healthcare professionals are increasingly using acupuncture as an adjunct to what they do, but my experience – both directly and through the BAC – is that some are not fully aware of the safety standards involved in skin piercing. This is not wilful, but you can't know what you don't know.

I am an osteopath, naturopath and acupuncturist, with a Bachelor of Acupuncture qualification gained after five years of training at the College of Traditional Acupuncture. My main style of practice is called Five Element acupuncture, one of many popular variations in the 2,500-year history of Chinese medicine.

When a patient asks me specifically for acupuncture, I first discuss whether it is appropriate for them; if we agree it is, I fully explain what treatment involves. After obtaining consent to proceed, I then undertake a full 90-minute consultation, covering their medical history (including whether they have a history of HIV or hepatitis) and a comprehensive range of 'lifestyle' questions: sleep, diet, eliminatory patterns and so on. I also use a number of Chinese diagnostic techniques, like taking the pulse at the wrist and looking at the tongue. The only occasion when I may not do this is when a patient is in acute pain: then I might fast-track to some form of emergency treatment, but this is always done safely, and once I have stabilised matters I cover all of the points I would normally have done.

My workplace preparation is meticulous. The basics – proper hot and cold water supply in the room, cleanable surfaces, disposable gloves and all the other clinic paraphernalia – are covered by the registration and licensing procedures to which all skin piercing practitioners are subject unless they are exempted. This is not a surgical ward, but it isn't just any old treatment space either.

Whether or not they agree with the Chinese medical theory that underpins what I do, anyone who practises acupuncture or dry needling must meet the same safety standards. That is precisely why my own organisation has worked with the two leading western medical acupuncture bodies – the British Medical Acupuncture Society and the Acupuncture Association of Chartered Physiotherapists – to create our new online resource at: www.acupuncturesafety.org.uk

Providing up-to-date information on how to practise acupuncture safely in a clinical setting, the website is designed to ensure public safety and protect the practitioner. Do have a look at it – you know it makes sense!

Ron Bishop

We welcome your views on any aspect of *the osteopath's* content. If you have a comment that you'd like to share, please email editor@osteopathy.org.

Courses 2016

Courses are listed for general information; inclusion does not imply GOsC approval or accreditation. For a comprehensive list of courses, see the **o** zone events diary at: bit.ly/ozone-events

September

1-4

Acupuncture techniques for sports injuries – level 1

Speaker: Bernard Nolan
Venue: University of Oxford Sports Complex, Oxford OX4
Tel: 07850 176600

john@johngibbonsbodymaster.co.uk
bit.ly/jgbodymaster

4

Upper extremity, cervical spine, upper thoracic taping

Speakers: Danny Church and Ben Calvert-Painter
Venue: London School of Osteopathy, London SE1
info@cpd-today.co.uk
www.cpd-today.co.uk

6

Muscle energy techniques made simple

7
Neurological testing made simple

10
Kinesiology taping for athletes
Speaker: John Gibbons
Venue: University of Oxford Sports Complex, Oxford OX4
Tel: 07850 176600

john@johngibbonsbodymaster.co.uk
bit.ly/jgbodymaster

10

The pelvic floor (external techniques) male and female

Speaker: Caroline Stone
Venue: Birmingham
visceralosteopathy.co.uk

10-11

Functional stretching

Speaker: Dr Eyal Lederman
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551
cpd@cpdo.net
www.cpdo.net

11

Bump to baby, part 1: pelvic, pubis, coccyx and lumbar spine

Speaker: Miranda Clayton
Venue: London School of Osteopathy, London SE1
Tel: 07792 384592
osteokids@aol.com
www.mumandbaby-at-home.com

12-16

SCCO Pathway module 2: Osteopathy in the cranial field

Speaker: Pamela Vaill-Carter
Venue: Columbia Hotel, London W2
Tel: 01453 767607
admin@scco.ac
www.scco.ac

12

Hip and groin masterclass

13
Knee joint masterclass
14
Cervical spine masterclass

15
Shoulder joint masterclass
Speaker: John Gibbons
Venue: University of Oxford Sports Complex, Oxford OX4
Tel: 07850 176600
john@johngibbonsbodymaster.co.uk
bit.ly/jgbodymaster

16-18

The heart and its osteopathy

Speaker: Jean Marie Beuckels
Venue: European School of Osteopathy, Maidstone, Kent
Tel: 01622 671558
cpd@eso.ac.uk
www.eso.ac.uk

17

Managing post-operative pain and introduction to urogenital problems

Speaker: Caroline Stone
Venue: Birmingham
visceralosteopathy.co.uk

17-18

Biodynamic craniosacral therapy introductory weekend

Speaker: Michael Kern
Venue: Skylight Centre, London N5
Tel: 07000 785778
info@cranio.co.uk
www.cranio.co.uk

18

Spinal manipulation and mobilisation technique

20-21
Advanced soft tissue techniques
Speaker: John Gibbons
Venue: University of Oxford Sports Complex, Oxford OX4
Tel: 07850 176600
john@johngibbonsbodymaster.co.uk
bit.ly/jgbodymaster

21

Talking about reflexes

Speaker: Gill Brooksmith
Venue: North Beds Osteopaths, Bromham, Bedfordshire
osteopathsinbedfordshire@gmail.com

21-22

Musculoskeletal diagnostic ultrasound

Speaker: Dr Budgie Hussain
Venue: Cavendish House, Bournemouth, Dorset
Tel: 01202 436505
sbattison@aecc.ac.uk
www.cusultrasound.co.uk

22

The vital glutes and psoas masterclass

Speaker: John Gibbons
Venue: University of Oxford Sports Complex, Oxford OX4
Tel: 07850 176600
john@johngibbonsbodymaster.co.uk
bit.ly/jgbodymaster

22-25

Visceral manipulation 4

Speaker: Christoph Sommer
Venue: Stillorgan Park Hotel, Dublin, Ireland
Tel: +353 1210 3967
barralireland@gmail.com
www.barralinstitute.ie

24

Contemporary acupuncture in women's health

Speaker: Justine Munur
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551
cpd@cpdo.net
www.cpdo.net

24

National Osteopathic Archive History Society symposium: Pushing clinical awareness in practice

Speakers: Prof Stephen Tyreman, Dr Jorge Esteves, Marianne Bennisson
Venue: British School of Osteopathy, London SE1
jcorneliusobrien@gmail.com
www.noa.ac.uk

27

Latest disc treatments by a spinal surgeon and osteopaths

Speakers: Bob Chatterjee, Sally Lansdale and Tyler Hands
Venue: British School of Osteopathy, London SE1
clinic@spinexdiscclinic.com

30 September-2 October Discovering health in trauma

Speakers: Michael Harris and Annie Greenacre
Venue: House for an Art Lover, Glasgow G41
Tel: 07714 239636
cranialgroupscotland@gmail.com

October

1-2

Spinal and peripheral manipulation (HVT)

Speakers: Danny Church and Ben Calvert-Painter
Venue: Queen Margaret University, Edinburgh
info@cpd-today.co.uk
www.cpd-today.co.uk

7-9

An osteopathic approach to exercise and stretching prescription

Speaker: Dr Eyal Lederman
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net

8

Chronic pain – the lynchpin between management and recovery

Speaker: Georgie Oldfield
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net

8-9

Minimal leverage masterclasses

Speaker: Prof Laurie Hartman
Venue: Marriott Hotel, Birmingham B16

hollie@academyofphysicalmedicine.co.uk
www.academyofphysicalmedicine.co.uk

8-9

SCCO Pathway module 1: Foundation course

Speaker: Tim Marris
Venue: Crista Galli Osteopathy, London W2
Tel: 01453 767607

admin@scco.ac
www.scco.ac

9

The miserable baby, part 3: Clinical applications

Speaker: Miranda Clayton
Venue: London School of Osteopathy, London SE1
Tel: 07792 384592

osteokids@aol.com
www.mumandbaby-at-home.com

15

Integrated myofascial release

Speakers: Rachel Fairweather and Meghan Mari
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net

15

Hip, groin, pelvic and sacrococcygeal complex

Speaker: Caroline Stone
Venue: London

visceralosteopathy.co.uk

15-16

Paediatric emergency first aid and osteopathic care in trauma

Speakers: Hilary Percival and Mark Wilson
Venue: Wokefield Park, nr Reading, Berkshire
Tel: 01453 767607

admin@scco.ac
www.scco.ac

17

Beyond the consulting room: osteopathic thinking in the workplace

Speakers: Mia Lederman and Julie Batty
Venue: European School of Osteopathy, Maidstone, Kent
Tel: 01622 671558

cpd@eso.ac.uk
www.eso.ac.uk

20

Osteopathic care of respiratory conditions

Speaker: Kelston Chorley
Venue: College of Osteopaths, Stoke on Trent, Staffordshire
Tel: 020 8905 1937

cpd@collegeofosteopaths.ac.uk

20-23

Pelvis, sacroiliac joint and lumbar spine masterclass

Speaker: John Gibbons
Venue: University of Oxford Sports Complex, Oxford OX4
Tel: 07850 176600

john@johngibbonsbodymaster.co.uk
bit.ly/jgbodymaster

22

Communication skills in the consulting room

Speakers: Julie Batty and Mia Lederman
Venue: European School of Osteopathy, Maidstone, Kent
Tel: 01622 671558

cpd@eso.ac.uk
www.eso.ac.uk

28

Conference: Montgomery and me – implementing the new standard for consent

Speakers: Baroness Hale, Prof Sir John Bell, Prof Jonathan Herring
Venue: St Catherine's College, Oxford

valuesbasedpractice@nds.ox.ac.uk
valuesbasedpractice.org/

November

5-6

Hormones and gut health

Speakers: Pamela Vaill Carter, Jane Easty, Michael Harris, Taj Deoora
Venue: Hammersmith Hospital, London W12
Tel: 01453 767607

admin@scco.ac
www.scco.ac

5-6

Advanced muscle energy methods – articular and soft tissue approaches

Speaker: Leon Chaitow
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net

6

Bump to baby, part 2: abdomen, thorax, peripheries

Speaker: Miranda Clayton
Venue: London School of Osteopathy, London SE1
Tel: 07792 384592

osteokids@aol.com
www.mumandbaby-at-home.com

12-13

Developing osteopathy in paediatrics

Speakers: Nancy Nunn and Daniel Stuttard
Venue: Osteopathic Centre for Children, London SW18
Tel: 020-8875-5293

cpd@fpo.org.uk
www.fpo.org.uk

16

Kinesiology taping for athletes

Speaker: Mike Grice
Venue: Birmingham Movement Therapy, Harborne B17
Tel: 07850 176600

john@johngibbonsbodymaster.co.uk
bit.ly/jgbodymaster

19

SCCO Pathway module 10: Integrating cranial into practice

Speaker: Michael Harris
Venue: British School of Osteopathy, London SE1
Tel: 01453 767607

admin@scco.ac
www.scco.ac

19

Patellofemoral pain: review of evidence and practical insights into management

Speaker: David Wales
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net

19

Safe use of acupuncture during pregnancy

Speaker: Justine Munur
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net

19-20

SCCO Pathway module 1: Foundation course

Venue: Shrewsbury Osteopaths, Shropshire
Tel: 01453 767607

admin@scco.ac
www.scco.ac

24-27

Acupuncture in sports foundation course

Speaker: Brnard Nolan
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net

26-27

Harmonic techniques

Speaker: Dr Eyal Lederman
Venue: Whittington Education Centre, London N19
Tel: 020 7263 8551

cpd@cpdo.net
www.cpdo.net



Paediatric Osteopathic Practice

Date: Sat 10 & Sun 11 September 2016

Times: 09.00 – 17.00

Cost: £250

CPD: 7 hours per day

Tutor: Arabella Gaunt

Location: The BSO Teaching Centre, London



This course focuses on Orthopaedic and Musculoskeletal issues that are commonly diagnosed in children from birth to adolescence. The course aims to give an overview of appropriate case history taking, examination techniques including special orthopaedic testing and evidence based musculoskeletal screening, differential diagnosis and appropriate management whether that be treatment and/or referral.

The weekend is comprised of interactive theory based learning, practical sessions on examination, manual treatment and exercise therapy of the paediatric patient and group discussions regarding the evidence base for manual therapy as an intervention for varying pathologies related to neonates, infants and the sporty adolescent.

Osteopathy in the Cranial Field

Date: Fri 9, Sat 10, Sun 11, Sat 24 & Sun 25 September 2016

Times: 09.00 – 17.00

Cost: £975

CPD: 40 hours

Tutor: Various notable tutors

Location: The BSO Teaching Centre, London



Osteopathy in the Cranial Field courses have been held annually at the BSO since 1974. This basic level 5-day course is approved by the SCTF and includes the detailed anatomy and physiology specific to the involuntary approach, together with instruction in the basic principles of diagnosis and treatment procedures. Approximately half of the contact time is devoted to practical instruction in groups of 4 participants to 1 tutor giving intensive, participant-centred tuition in practical skills. Many practitioners in this field agree that understanding and skills are greatly enhanced by attending the basic course for a second time.

Cancer - Understanding Pathogenies and Clinical Aspects

Date: Fri 14 October 2016

Times: 09.00 – 17.00

Cost: £125

CPD: 7 hours

Tutor: Dr David Parry

Location: The BSO Teaching Centre, London



A day spent in multiple learning landscapes to enforce and enhance knowledge of cancers; their pathogenesis and clinical implications. The learner will first attend a lecture that will lay the foundation for the rest of the day's learning. The afternoon is spent in part (2 hours) in the dissecting room, looking and discussing normal anatomy on cadavers that will support the lecture and be a basis for the rest of the session (2 hours) that will be spent looking at potted real pathology and discussing the presentation and case histories of each example.

Get in touch...

For a full list of all our CPD courses or to book your place **today**, phone on 020 7089 5333 or email cpd@bso.ac.uk.

What's coming up...

Fri 7 Oct

3D Biomechanics

Fri 21 Oct

Functional Active Release

Sat 22 Oct

Advanced Ergonomics

Oct/Nov (Unconfirmed)

Pain & Pharmacology

Oct/Nov (Unconfirmed)

MSK Ultrasound Introduction

Oct/Nov (Unconfirmed)

Understanding Pain from a

Clinician's Perspective

9 & 10 Dec

3D Biomechanics & Functional

Active Release

17 Feb

Neuro and Intracranial

Anatomy and Pathology

2016-17

We're planning our CPD programme for the year ahead—please share your ideas and requests via cpd@bso.ac.uk.

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Postgraduate Certificates

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Designed to equip osteopathic, chiropractic and physiotherapy educators with the knowledge and skills required to effectively support students in both classroom and clinic-based settings.

Start date: September 2016

Integrated Care of Older Adults

Did you know that by 2030, one in five people in England will be aged over 65? That's why we've specifically designed the only award bearing course in the UK for those wishing to develop specialist skills in osteopathic care of older adults (over 65 years). This course will equip practising osteopaths with contemporary, evidence-informed knowledge, practical and clinical skills in the specialist area of advanced osteopathic management of older adults.

Start date: Early 2017

Specialist Paediatric Osteopathic Practice

Designed for practising osteopaths who wish to develop specialist skills in paediatric osteopathic practice, this one year course develops knowledge, practical and clinical skills in the specialist area of paediatric practice. This course welcomes osteopaths, internationally and nationally.

Start date: 2017

For more information or to apply:

admissions@bso.ac.uk 020 7089 5316

www.bso.ac.uk/postgraduate-cpd



CPDO 2016

Professional Development for Manual and Physical Therapists

☎ 0207 263 8551
cpd@cpdo.net

Date	Topic	Lecturer	Cost	Deposit	CPD points
10-11 Sept	Functional stretching	Dr. Eyal Lederman	£265	£150	14
8 Oct	Chronic pain - the lynchpin between management and recovery	Georgie Oldfield	£125	£125	7
15 Oct	Integrated myofascial Release	Rachel Fairweather & Meghan Mari	£125	£125	7
19-21 Oct	Barral's advanced urogenital manipulation	Jean-Pierre Barral	Fully booked		20
5-6 Nov	Advanced Muscle Energy Methods - articular and soft tissue approaches	Leon Chaitow	£295	£200	14
19 Nov	Tendinopathies & Patellofemoral Pain: review of evidence and practical insights into management	David Wales	£125	£125	7
19 Nov	Safe Use of Acupuncture during Pregnancy	Justine Munur	£135	£135	7
24-27 Nov	Acupuncture in sports foundation Course	Bernard Nolan	£545	£275	24
26-27 Nov	Harmonic techniques (start Saturday)	Dr. Eyal Lederman	£285	£200	14
3 Dec	Treatment of spinal region with acupuncture	Kam-Wah Mak	£145	£145	7
3-4 Dec	Hartman's Master class in manipulative techniques: lower body	Prof. Laurie Hartman	Fully booked		14

Booking now available for Prof. Hartman's and Barral's courses in 2017

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Up to 5 CPD points for Self-Directed Learning



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Get ready for the changes in CPD requirements: Join a supervision/tutorial/peer group with Dr. Eyal Lederman cpd@cpdo.net/02072638551



Courses venue: Whittington Education Centre, Whittington Hospital
Gordon Close, off Highgate Hill, London N19

CPDO Ltd. 15 Harberton Road, London N19 3JS, UK / 0044 (0) 207 263 8551

email: cpd@cpdo.net For more information and booking visit www.cpdo.net

50% discount available to students on most courses (see www.cpdo.net for further details)



To book, please visit: WWW.SCCO.AC or call 01453 767607

Some courses require a minimum level of qualification; please contact us for details.

Staged payments available & a small deposit secures your place.

SEPTEMBER 2016

Faculty Development Weekend

8 - 11 September 2016 £299/£398[†]
Ses Salines, Majorca CPD: 16 hrs
Leader: Sibyl Grundberg **FILLING FAST**

Don't miss your chance to get to know SCCO Faculty and Fellows better. The schedule is up to you so tell us what you would like to see at this first-of-its-kind event. [†]Excl. flights

Module 2: Osteopathy in the Cranial Field
12 - 16 September 2016 £950 non-res
Columbia Hotel, London CPD: 40 hrs
Leader: Pamela Vaill Carter **FILLING FAST**

An overview of the whole cranial concept, as explained by Sutherland, covering all the key areas and including treatment approaches you can use immediately.

OCTOBER 2016

NEW! Rule of the Artery Refresher
8 October 2016 £185 non-res
BCOM, London CPD: 8 hrs
Leader: Tim Marris

Do you remember Rule of the Artery? If you do, then you'll love this refresher day. If not, then you need to come along.

NOVEMBER 2016

Hormones & Gut Health
5 - 6 November 2016 £330* non-res
W12 Centre, London CPD: 16 hrs
Leaders: Pamela Vaill Carter, Taj Deoora

This course develops the ideas discussed at our first, highly popular Hormones & Immunity weekend in February.

Module 10: Integrating Cranial into Practice
19 November 2016 £165 non-res
BSO, London CPD: 8 hrs
Leader: Michael Harris

A one-day course which will help you to integrate cranial work into your existing practice, and give you the confidence to communicate effectively with your patients.

Start your Fellowship journey with our MODULE 1: FOUNDATION COURSE

CPD: 16 hrs

£275
non-res

Leader: Penny Price (Tim Marris, Oct 2016)
Have you ever wondered about the anatomy above the atlanto-occipital joint? Or what influence the structures within the head, neck and pelvis may have on the rest of the body? Allow us to introduce you to osteopathy within the cranial field.

20 - 21 August 2016	Axminster
8 - 9 October 2016	London
19 - 20 November 2016	Shrewsbury
10 - 11 December 2016	London
25 - 26 February 2017	London
20 - 21 May 2017	Edinburgh
1 - 2 July 2017	London

FEATURED COURSE

Paediatric First Aid & Osteopathic Care in Trauma

15 - 16 October 2016
Wokefield Park, Reading CPD: 16 hrs £390* non-res



Bookings now being taken for the 2018-2019 Paediatric Osteopathic Diploma

Leaders: Hilary Percival & Mark Wilson
A very special weekend focusing on paediatric emergency first aid and trauma care, with Mark Davies of ABC Medical; specialists in paediatric first aid. The course will also focus on physical and psychological trauma with SCCO's Michael Harris, including the osteopathic response to the effects of accident, sudden onset illness and child abuse.

FEBRUARY 2017

Module 5: In Reciprocal Tension
3 - 5 February 2017 £945 res
The Beeches, Bournville CPD: 24 hrs
Leader: Michael Harris
Develop palpatory awareness of whole-body interconnectedness, discover the secrets of the body's structural integrity and explore how this may influence treatment.

NEW! The Osteopathic Voice
10 - 12 February 2017 Call to register interest
Hawkwood, Stroud CPD: 24 hrs
Leader: Ashley Stafford
We are currently planning an exciting new course focusing on the voice and led by the highly experienced singing teacher and osteopath, Ashley Stafford. Call us to register.

MARCH 2017

Module 9: Introduction to Paediatrics
3 - 6 March 2017 £1100** non-res
Hawkwood, Stroud CPD: 32 hrs
Leader: Hilary Percival
This introductory course will prepare you to practice safely and examine your young patients with confidence and with a deeper appreciation of the extraordinary journey from embryo to childhood.

APRIL 2017

Module 2: Osteopathy in the Cranial Field
5 - 9 April 2017 £950 non-res
Columbia Hotel, London CPD: 40 hrs
Leader: Carl Surridge
Another opportunity to discover the cranial concept as explained by Sutherland. See our September 2016 course for further details.

MAY 2017

Module 4: Balanced Ligamentous Tension
11 - 15 May 2017 £980** non-res
Hawkwood, Stroud CPD: 34 hrs
Leader: Sue Turner
An excellent introduction to working with involuntary mechanisms in clinical practice and to the treatment of body-wide joints.

JUNE 2017

NEW! Head First Conference
10 - 11 June 2017 £390* non-res
W12 Centre, London CPD: 16 hrs
Guest Speaker: Prof. Frank Willard
This conference will focus on head trauma, concussion and relevant osteopathic treatment strategies.

JULY 2017

Module 7: Spark in the Motor
7 - 9 July 2017 £945 res
The Beaches, Bournville CPD: 24 hrs
Leader: Rowan Douglas-Mort
Explore the art and science of osteopathy addressing the nervous system, cerebrospinal fluid and the subtle fluctuations and bioenergetic communication throughout the fluid fields of the body.

*Member/Fellow discounts available. **Residential and non-residential rates available. Please contact us for further details.

The Heart and its Osteopathy - An osteosophical conceptualisation Course leader: Jean Marie A.T. Beuckels

Date: Friday 16 to Sunday 18 September 2016
Cost: £450 (includes lunch and refreshments)
CPD: 21 hours

This three-day postgraduate event is the first in a series* of osteosophical workshops. Learning alongside like-minded colleagues, group members will be encouraged to build a deeper understanding of osteosophical principles in relation to the visceral heart. Through an integrated mix of theory and hands-on practical experience, this first event will enable members to consider the treatment of heart patients from an osteopathic perspective. Course content includes:

- The heart: external and internal visceral dysfunctions, form/function and its neurological interactions
- The biomechanical/biokinetic/biodynamic heart; tests and treatment
- An introduction to the ANS heart interaction (the plexus, the connections, and an introduction in the brain autonomic interaction / tests and treatment) and how to mobilise the ANS from different perspectives

This event is open to osteopaths with a basic knowledge of visceral osteopathic care.

*Upcoming events include further osteosophical conceptualisations in relation to hormones and their osteopathy, the brain visceral interaction and its osteopathy, psychodynamic interactions and their osteopathy.

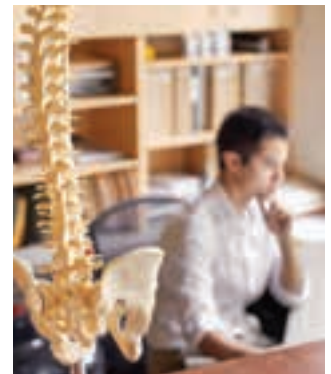
Definition of Osteosophy®: Conceptual theoretical thinking according observation of nature and humanity, in order to create and underpin synthesis and integration insights, and so determine osteopathic treatment strategies within non-symptomatic or integral OMT.
(Jean Marie A.T. Beuckels)



Beyond the Consulting Room: Osteopathic thinking in the workplace Course Leaders: Mia Lederman (Osteopath) and Julie Batty (Coach and Counsellor)

Date: Saturday 17 September 2016
Cost: £165 (includes lunch and refreshments)
CPD: 7 hours

An introduction to the way osteopathic thinking and principles can be used in the workplace setting. We take the principles of osteopathy and broaden them out to consider strategic organisational wellbeing, prevention and early intervention, for MSDs but also in the broader holistic health spectrum. We look at the challenges facing business in the contemporary context and in the light of this new thinking, we consider the role of osteopathy beyond the consulting room.



Communication Skills in the Consulting Room Course Leaders: Julie Batty (Coach and Counsellor) and Mia Lederman (Osteopath)

Date: Saturday 22 October 2016
Cost: £165 (includes lunch and refreshments)
CPD: 7 hours

Enhanced communication skills workshop, leading to better relationships with clients and more effective diagnostic and therapeutic outcomes. How to talk and listen to patients to bring deeper understanding and create a trusting and effective therapeutic relationship that helps your patients get well and helps your practice grow.



CONTACT US:

European School of Osteopathy, Boxley, Maidstone, Kent, ME14 3DZ
Tel: +44 (0)1622 671558 or Email: cpd@eso.ac.uk

www.eso.ac.uk

Reaching Out

The Institute of Osteopathy's Convention, 2016



Reaching Out is a multi-streamed, collaborative event showcasing the very best on offer for osteopaths, including CPD, networking, exhibition and our annual awards. This year we'll be exploring the possibilities that open up to us when we reach out; whether it is our patients, our colleagues, other healthcare professions or the wider community.

What's On

- **Professor Laurie Hartman** shares his tried and trusted techniques for upper and lower limb
- **Simeon Niel-Asher** - The Rotator Cuff
- **Phil Parker** - The Lightening Process
- **Charles Greenough** and **Peter Cockhill** discuss opportunities to work with other health care professions
- Mother and Child stream
- Headache and migraine management
- Business and career development sessions

The iO Convention is open to all osteopaths - not just iO members.

For information on this year's programme and speakers, together with details of how to book your place visit www.osteopathy.org/convention-2016.

iO Members - Book by the 18 August and receive a further £20 off the day.

iO Convention 25 - 27 November 2016

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03 September	Nuneaton	17 September	Falkirk	24 September	Nuneaton
03 September	Somerset	17 September	Liverpool	24 September	Swindon
03 September	Leeds	24 September	Manchester	26 September	London
10 September	Oxford	24 September	London	08 October	Cheadle
10 September	Dublin	24 September	Cheshire	15 October	Manchester
17 September	Athlone	01 October	Cawston	22 October	London
17 September	Manchester	15 October	Moira	05 November	Falkirk
24 September	Leeds	17 October	London	12 November	Moira
24 September	Retford	03 December	Falkirk	14 November	London
01 October	London	03 December	Nuneaton	03 December	Liverpool
01 October	Poole	10 December	Oxford	10 December	London
03 October	Falkirk				
05 November	London				
12 November	Manchester				
03 December	London				

"The teaching was brilliant, really explained well and made it enjoyable."

"I just wanted to say thank you so much for creating such a wonderful informative well taught course. I would highly recommend this course to my colleagues"

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Contact us for further dates, courses & locations

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Foundation for Paediatric Osteopathy



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Alternatively, contact us:
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You can now apply for the 2016 intake for the Foundation for Paediatric Osteopathy Diploma course. On this two year programme you'll work with leading paediatric osteopaths in a unique clinical environment.

With more than 20 successful years, the DPO offers:

- an exceptional clinical experience
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- the chance to develop a diverse set of osteopathic skills from a range of osteopathic traditions and technical approaches
- the choice of standard or tailored 'flexible route' (ideal for overseas and travelling students)
- the opportunity to gain expert paediatric knowledge
- a tailor-made Access Course run in collaboration with the Rollin E Becker Institute, designed for less experienced applicants and offered as a unique alternative to the SCFT approved 'cranial course' (previously an entry requirement to the DPO)

Foundation for Paediatric Osteopathy  **Conference 2017**
LONDON 8 / 9 APRIL



Speakers include:

Professor Frank Willard PhD
Susan Turner MA DO
Chris Campbell DO
Dr Jayne Donegan

Discounts for alumni members and early bookings.

8 & 9 April 2017

**Regent's University London,
Inner Circle, Regent's Park,
London, NW1 4NS**

For details and registration
please visit:

www.fpo.org.uk/conference

Developing Osteopathy in Paediatrics Course

The course is designed for osteopaths who wish to explore clinical examination of babies. It will also cover differential diagnosis of the unsettled baby as well as an osteopathic understanding of the effects of birth on the structure of the body and the resulting influence on function.

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Featuring guest speakers...

ANTONIA ADEJINI
NUTRIGENOMICS IN CLINICAL PRACTICE



Antonia Adejini has been in clinical practice as an Osteopath and Naturopath since graduating from the British College of Osteopathic Medicine in 1996. Antonia subsequently undertook an MSc in Public Health Nutrition from The University of London in 2004 and has taught Nutrition at BCOM since 2005. She is currently furthering her studies with training in Functional Medicine.

An introduction into the emerging field of nutrigenomics and an overview of its relevance to clinical practice. How can single-nucleotide polymorphisms render some individuals more vulnerable to side effects of common medications?

Antonia examines this topic and the drug-nutrient interactions and deficiencies associate with the most commonly prescribed medications; the signs and the symptoms to look out for and the best dietary interventions to prescribe.

MARK HINES
CREATING EXERCISE PROGRAMMES FOR THE ELDERLY PATIENT



Mark Hines is a doctoral researcher at London South Bank University and BCOM, with a background in exercise physiology and biomechanics. Mark has more than 20 years experience of working in the health and fitness industry, including writing and delivering courses on exercise referrals for the NHS. As an academic, his key areas of interest include training specificity and adaptations to exercise.

- Adaptations to Exercise

- Principles of Exercise

- Specificity Effects of Ageing on the Neuromuscular System

- Goals of Exercise

- Programming and Developing Specific Guidance Time

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FRAZER HOUSE, 6 NETHERHALL GARDENS, HAMPSTEAD,
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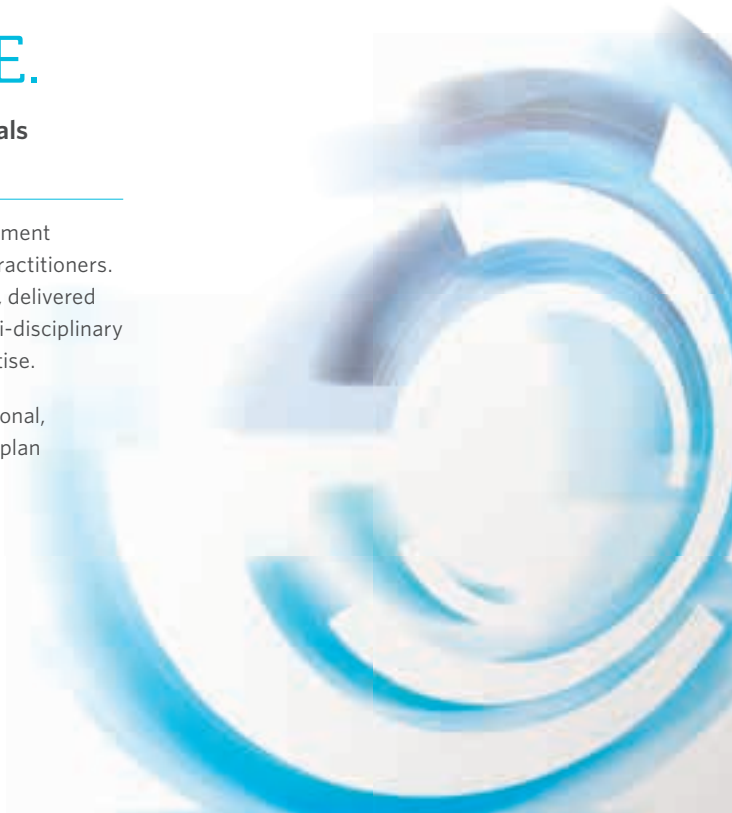
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WITH
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Classifieds

Osteopath required: Warwickshire

Enthusiastic osteopath wanted to join our team for two days per week in a busy, multidisciplinary practice in Bedworth. Full reception cover, three treatment rooms, pilates studio and gym. Taking over an existing one-day-a-week list. Good structural skills required; an interest in sport is helpful. Send CV and covering letter to kspencerosteopath@yahoo.co.uk

Osteopath required: County Down

Enthusiastic, friendly osteopath required for busy established practice in picturesque Comber. Initially three days, taking over existing list. Great opportunity to work with osteopaths who have postgraduate paediatric qualifications and experience, although paediatric interest not compulsory. Excellent remuneration and support offered. Please contact Julia: call 07812 059358 or email julmurdoch@gmail.com

Associate required: Bucks

North Bucks osteopath looking for an associate, initially two sessions a week, preferably including an evening and a Saturday. You will need to be proactive in list-building in order to increase sessions. The principal is looking to reduce own clinic hours gradually. Please send CV to info@olneyosteopath.co.uk

Associate required: Dorset

Part-time hours initially. I am a sole practitioner with a busy practice based in a beautiful, semi-rural south Dorset location. You should be confident and competent in structural skills and soft tissue and keen to develop knowledge and skills. Role may suit somebody with a couple of years' experience, but nothing set in stone. Mentoring and support guaranteed. I will be away on holiday so no phone calls. Please send CV to marcusdavis8@gmail.com I will reply on my return.

Associate required: Essex

The Point Clinic in Colchester is looking for an associate for three days per week, preferably including Saturday, to expand our existing busy team. Please send CV and covering letter to Katie@thepointclinic.com

Associate(s) required: central London

Exceptional structural osteopaths with refined clinical skills and a minimum of four years' clinical experience (post-college clinic) required for long-term associateships. Paediatric osteopathic training would be an advantage. Initially 2/3 days per week, starting towards the end of 2016, with a view to building practice hours in a highly regarded 18-year-established practice. For the same successful applicants, there is a possibility of a short locum position from Thursday 8 to Thursday 29 September 2016, for exposure to existing patients. Applicants please email a response, CV and two professional reference letters to guygold8@gmail.com

Associate required: Barbados

A unique, full-time opportunity to work in a busy and rapidly growing clinic. The position would suit an ambitious, motivated person with a broad range of osteopathic skills. Willingness to commit to a two-year contract is essential (extension likely). You should hold the following credentials: degree in osteopathy; current registration to practise in home country, or GOsC registered; interest in cranial, visceral, paediatrics and sports; and good organisational skills. A professional and supportive environment is on offer, with mentoring provided by principal. CV to admin@360osteopathybarbados.com

Associate required: Canada

Opportunity to join a well-established lateral-thinking clinic (www.bodylogic-clinic.ca) in beautiful Victoria, British Columbia. The vacancy is full-time with the possibility of purchasing the clinic within two years. The applicant can access Canada Immigration via a holiday working visa but has to be under 30 years old. Email: anthony255matthews@btinternet.com

Associate required: Ireland

To take over existing patient list in Limerick from mid-August. Initially two days per week, to include evenings, with scope to expand. Proficient structural skills and at least a base in paediatric osteopathy essential. CV to efosteopathic@gmail.com

Locum required: Cheshire

Locum required for busy Cheadle clinic to cover maternity leave. The position is available from early September for 5-6 months, covering 1.5-2 days a week. There is some flexibility over which days the locum wishes to work. The candidate must have good cranial skills and paediatric experience in addition to good structural skills. Please send your CV to Gemma Irvine info@cheadleosteopathy.co.uk

Locum required: Powys

Mid-Wales maternity cover from December 2016. Practice in Caersws. 1-2 days per week. Must be proficient in all aspects of osteopathy (structural and cranial essential; paediatric experience/dry needling skills helpful but not essential). Email fierychestnut@gmail.com

Locum required: Ireland

Temporary illness cover 3-5 days per week. Busy practice in Wexford town centre, offering a service to all ages using osteopathy and acupuncture, with a special interest in sports injuries and rehabilitation. Accommodation negotiable. For further details please call Ann on 00353 87 276 6062 or email ann.porter70@gmail.com

Practice for sale: Dumfries and Galloway

Rural practice and cottage together, in beautiful Lockerbie, south west Scotland. Interesting opportunities to work with Dumfries Osteopathic Clinic and Ambacare in Moffat as well. Come here for quality of life. Call Ingrid Mair on 01576 470391 or email ingridmair@icloud.com

Practice wanted: Midlands

Are you an osteopath considering retiring or relocating? I'm an osteopath looking to buy a practice in the Midlands ideally, or potentially further for the right opportunity. My preference is a practice with living accommodation but any combinations considered. Email me and I'm happy to

give you a call if you prefer. Confidentiality assured for anyone getting in touch. Please email: midlandsorborders@gmail.com

Course: Animal osteopathy

The next one-year course in osteopathy for horses and dogs with Stuart McGregor starts in September 2016. Learn how to treat horses and dogs using traditional osteopathic techniques without the use of sedation or anaesthetic. For course information, please contact the Osteopathic Centre for Animals: email wantageclinic@msn.com or call 01235 768055

Course: Latest disc treatments by a spinal surgeon and osteopaths

Learn about Mr Bob Chatterjee's approach and how osteopaths Sally Lansdale and Tyler Hands are using IDD Therapy on disc patients. British School of Osteopathy, 27 September, 6.30pm. Email clinic@spinexdiscclinic.com

Course: Minimal lever mid range manipulation

1-2 October, 2016. Venue: Holiday Inn Hotel, Clifton Village, Brighouse HD6 4HW. Cost: £250. 14 hrs CPD: learn how to manipulate the spine safely, efficiently and effectively with comfort for the patient and therapist. Course tutor: Daryl Herbert DO, senior lecturer at the BSO and international lecturer of manipulation. For further details or to book your place, email daryl@dh-o.com or call 020 8524 1505

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