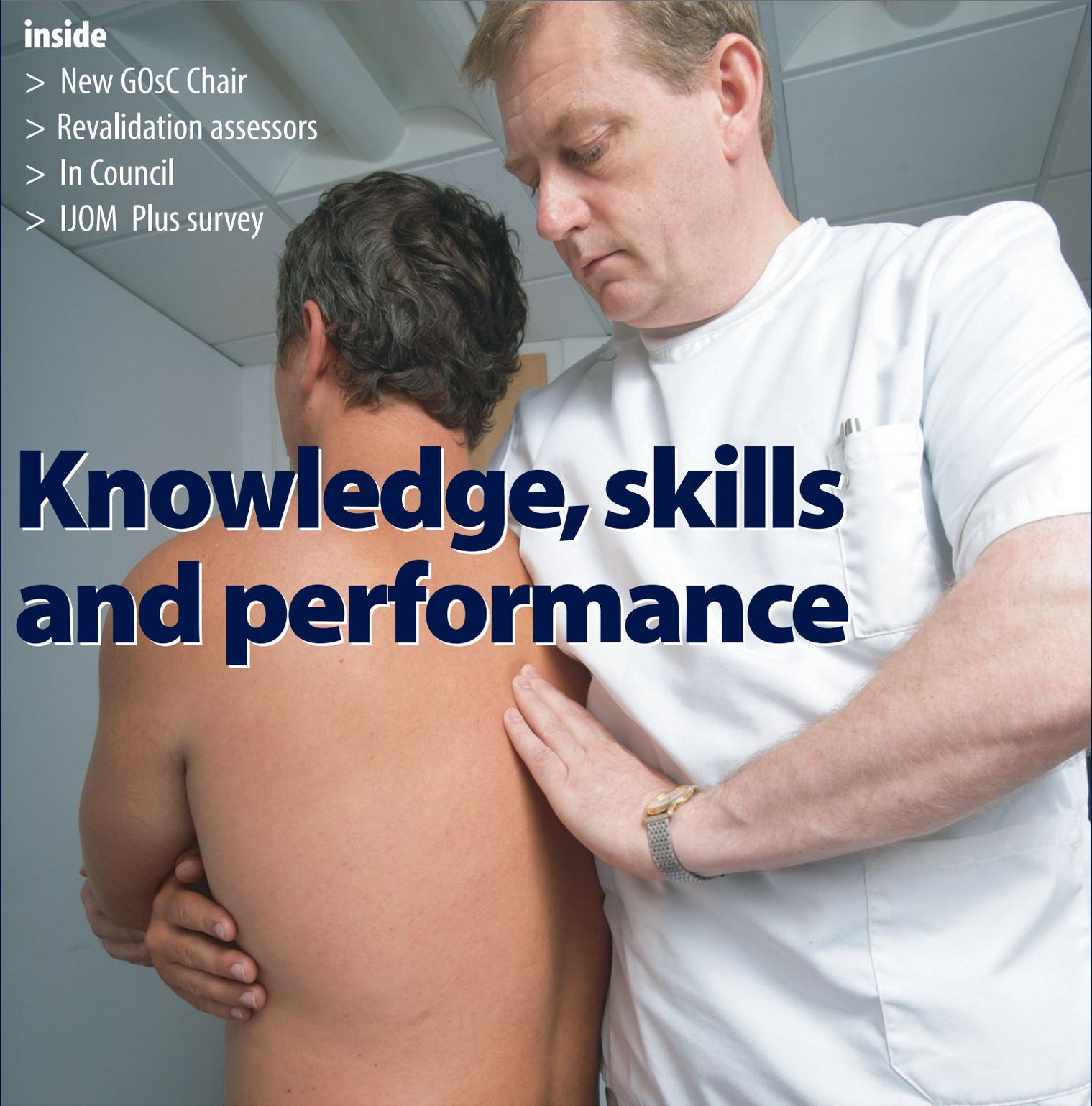


# the osteopath

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- > In Council
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# Knowledge, skills and performance



General  
Osteopathic  
Council



General  
Osteopathic  
Council

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Chair of Council: Professor Adrian Eddleston  
Chief Executive and Registrar: Tim Walker

## Key GOsC services

**Freephone helpline  
for osteopaths** **0800 917 8031**

**Communications and Osteopathic  
Information Service** **ext 242 / 222 / 228**

**Enquiries about** conferences, workshops and events, *The Osteopath*, GOsC websites, Certification Mark, the media, NHS, publication orders (including GP consent forms and off-work certificates), presentation material, Regional Communications Network, consultations, NCOR.

**Professional Standards** **ext 238 / 235 / 240**

**Enquiries about** continuing professional development, osteopathic education, standards of practice, Assessments of Clinical Competence, Recognised Qualification process.

**Finance and Administration** **ext 231**

**Enquiries about** registration fees, VAT, payments.

**Public Affairs** **ext 245 / 247**

**Enquiries about** national healthcare policy, parliamentary and international affairs.

**Registration** **ext 229 / 256**

**Enquiries about** annual renewal of registration, updating your Register details, non-practising status, practising abroad, graduate registration, retiring/resigning from the Register, professional indemnity insurance.

**Regulation** **ext 224 / 249 / 236**

**Enquiries about** the *Code of Practice* for osteopaths, dealing with patient concerns, ethical guidance and consent forms, fitness to practise, Protection of Title.

**Clerk to Council** **01580 720 213**

**Enquiries about** Council members and meetings, GOsC Committee business, Governance.

**Chair / Chief Executive and Registrar** **ext 246**

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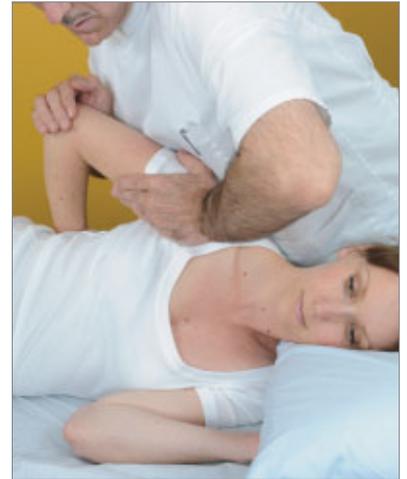
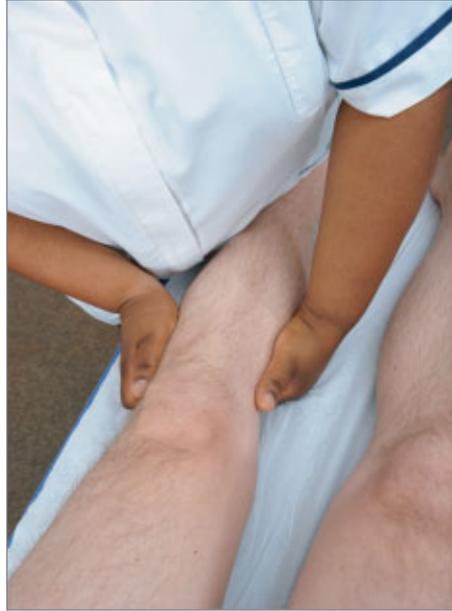
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## the osteopath

Volume 14 | Issue 6 | Dec 11/Jan 12

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# Osteopathic practice standards

## Knowledge, skills and performance

**As a health professional, you will recognise the need to ensure your knowledge, skills and performance are of good quality, up to date and relevant to your scope of practice. This is the focus of Section B of the new *Osteopathic Practice Standards (OPS)*, which specifies four standards that are fundamental to safe, high-quality osteopathic care:**

- B1 You must understand osteopathic concepts and principles, and apply them critically to patient care.
- B2 You must have sufficient knowledge and skills to support your work as an osteopath.
- B3 Recognise and work within the limits of your training and competence.
- B4 Keep your professional knowledge and skills up to date.

Alongside these standards, the OPS offers guidance for putting the principles into practice – and in this article we highlight sources of further support available to osteopaths to assure your performance and skills:

- > The *GOsC Revalidation Pilot Participation Manual*, which offers all osteopaths a range of tools for assessing your practice and performance.

- > The *CPD Guidelines*, which help you to identify learning needs and plan your professional development.
- > *An Introduction to Clinical Audit for Practising Osteopaths*, produced by the National Council for Osteopathic Research (NCOR).

All of these resources are available via the **o zone**, and here we explore how you can apply these to benefit your continuing professional development.

## So how can you evaluate your practice?

**As a health professional, you are conscious always of operating within the limits of competence in the interests of your patients' safety. This leads you to reflect on practice and consider development needs or potential learning that will enhance the quality of your patient care and extend the scope of your skills.**

It is better still for personal and professional development if you have



access to reliable and objective means of assessing how well you are performing.

Healthcare professionals operating in teams and employed in structured health services are subject to guidelines and protocols and routine processes of evaluation and monitoring, with constant review and reflection a familiar part of everyday work. And with this comes support structures, in place to assist practitioners in their development and their learning needs.

But what of osteopaths – the majority of which work alone, in independent practice, being self-reliant and personally responsible for the quality of their care. How can you be sure that your performance is on par with your peers and with the wider standards of healthcare that are constantly evolving?

Osteopaths recognise the value and necessity of continuing professional development (CPD), but CPD submissions to the GOsC highlight osteopaths' lack of access to mechanisms that help you systematically evaluate your practice and help you to know what aspects of practice work well or less well. Most people, when asked to evaluate their

practice, will significantly underestimate how they are performing; a few will overestimate their performance, and a few will get it right.

As part of the revalidation pilot – and in support of osteopaths generally – we now have available on the **o zone** a range of templates that offer mechanisms for assessing your practice in different ways.

The self-assessment templates form part of the *Revalidation Pilot Participation Manual*, but can be used (and adapted) by any osteopath interested in evaluating the strengths and weaknesses of their particular practice. These self-assessment tools and templates can be found in the 'Revalidation' section of the **o zone** ([www.osteopathy.org.uk/ozone/my-registration/revalidation](http://www.osteopathy.org.uk/ozone/my-registration/revalidation)):

- > **Self-assessment tool** (Revalidation Manual, pages 12-18) – review your own practice against the GOsC's *Osteopathic Practice Standards*. Using a simple traffic-light system, green indicates that you can confidently demonstrate how you meet the standards, amber where you feel some uncertainty, and red highlights those areas of practice that you feel would benefit from further development.



- > **Personal development needs analysis** (Revalidation Manual, pages 58-60) – building on the self-assessment tool, this offers a systematic method of personally evaluating your practice and identifying areas for development. An alternative version of the PDNA is available in the GOSC's *CPD Guidelines* (pages 23-24 and 36-37), entitled *Reviewing your CPD learning needs*. This version of the PDNA asks a series of questions to inform your CPD: where are you now? Where do you want to be? How will you get there?
- > **Case-based presentation** (Revalidation Manual, pages 27-32) – explore your management of a particularly interesting or challenging case/patient, drawing out elements to guide your personal development and enhance your practice.
- > **Case-based discussion** (Revalidation Manual, pages 33-38) – similar to the case-based presentation, discussion of an interesting or challenging case with other osteopaths or healthcare peers offers the opportunity to learn from sharing of experience and expertise.
- > **Significant events analysis** (Revalidation Manual, pages 44-49) – a structured analysis of an event/situation that you have either observed or participated in (positive or negative) affords insight into your practice and helps you to reflect systematically on how you manage events/situations.

- > **Clinical reflection** (Revalidation Manual, pages 50-57) – Driscoll's model for structured reflection offers another approach to clinical reflection with a view to identifying good practice and areas for development. There are many variants on this model and we offer a selection on our website.
- > **Peer review** (Revalidation Manual, pages 66-67) – invite professional peers (osteopaths or other health professionals) to observe and constructively critique your practice, offering suggestions on how practice could be enhanced, or making you aware of aspects of your practice that are particularly effective. We provide an example of a peer review template, but many others exist.
- > **Multi-source feedback** (Revalidation Manual, pages 68-71) – a mechanism for sampling attitudes and opinions on your clinical performance or behaviour, from a range of other people. A good source of data to reflect upon.
- > **Patient questionnaires** (Revalidation Manual, pages 72-75) – one method of gathering patient feedback on your

practice and understanding patient expectations and priorities. There are many forms of patient questionnaire, and in the Manual we offer just two examples. You can use these as they are, modify them, or use other examples readily available on the internet. Gathering feedback from your patients does not require external ethical approval, because you are using the information given to you for quality improvement purposes, not for research. However, as in other aspects of practice, ensure your patients understand clearly the purpose of the questionnaire – you can do this verbally or in writing, assure them of the confidentiality of the information they provide, and in due course give them some feedback on the outcome of the survey and how it has helped your practice. Your patients may want to respond anonymously, so remember to have mechanisms to allow for this, such as arranging for the receptionist to hand out and collect questionnaires, or leave the questionnaires prominently displayed in the waiting room, with a box in which to put the completed forms.



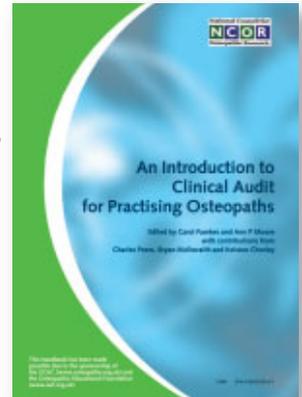
## WHAT COULD YOU DO FOR PEER REVIEW?

Feedback from the revalidation pilot training workshops demonstrated above all how much osteopaths enjoy and value the opportunity to meet with colleagues and discuss ways of working and practice challenges. Arising from the workshops, osteopaths across the UK are establishing small groups to together work their way through the *Revalidation Pilot Participation Manual* and share their experiences. Some, for example, have arranged to observe others' practice and exchange peer feedback. Whether or not you are participating in the revalidation pilot, perhaps consider a new year resolution to contact a handful of local osteopaths (not least those unfamiliar to you) and bravely suggest you observe each other's practice or meet occasionally to discuss particularly interesting cases or incidents in practice. The Manual offers lots of ideas for small peer-group activity. But don't feel constrained to build bridges only with osteopath colleagues – feedback from other healthcare professionals may be equally invaluable.

# How do you measure performance?

## An introduction to clinical audit

You may feel confident that you have a clear sense of the scope of your practice and the bounds of your professional competences – but what checks can you apply to ensure that you are maintaining and developing your personal standards and practice? Or perhaps, in time, your practice expands, new osteopaths join your clinic, and you take on support staff to help you manage an increasingly busy practice. Can you be sure everyone is adhering to your high standards? Do you need to introduce new procedures? Are you sure your support staff are properly trained?



Clinical audit may offer you one solution. Many osteopaths are perplexed by the concept of clinical audit and even daunted. To address this, and to show osteopaths a little of the enormous value of clinical audit, the National Council for Osteopathic Research (NCOR) has this autumn produced *An Introduction to Clinical Audit for Practising Osteopaths*. This is a guide specifically tailored for osteopaths with no previous knowledge or experience of clinical audit.

Here, Carol Fawkes, NCOR Research Development Officer, introduces clinical audit and offers a glimpse of what the handbook offers the busy, practising osteopath:

█ Clinical audit in osteopathic practice is neither widely practised nor well understood. This deficiency suggests osteopaths may be ill-equipped to monitor local quality standards and identify areas for practice improvement. Lack of clinical audit skills may also make it more difficult for osteopaths to qualify as NHS service providers.

Clinical audit can be used by individuals or groups of practitioners to measure and improve the quality of patient care. It has been described as 'a cyclical process consisting of the following key stages:

- > Selection of a topic.
- > Observation of practice.
- > Comparison of current practice with agreed standards.
- > Implementation of change(s).
- > Re-audit.

### What are the benefits of audit?

To make the time to undertake audit, clinicians want to feel there will be tangible benefits. Some of the many likely benefits include:

- > Improved patient care.
- > More effective use of clinical time.
- > More satisfied patients.
- > Efficient use of treatment facilities.
- > Increased clinical acumen/improved clinical judgement.
- > Identification of training/CPD needs.
- > Requests for more appropriate patient investigations.
- > Identification of staff training needs. █

### What does the handbook comprise?

Along with helping you to a better understanding of what is clinical audit, the handbook will lead you step by step through the process in the form of a worked example looking at case notes.

To get you started, the handbook offers a range of templates for auditing various aspects of osteopathic practice, including:

- > Pain and disability in clinical practice.
- > Outcome of patients presenting with musculoskeletal symptoms.
- > Management of acute low back pain.
- > Effectiveness of treatment.
- > Patient satisfaction.
- > Patients who fail to complete their treatment.

Putting theory into practice, the handbook explores the experiences of three osteopaths who have applied clinical audit in their practices, each for very different reasons. **Bryan McIlwraith**, a sole practitioner in Inverness, offers some advice arising from his own experience of clinical audit:

█ Clinical audit at its simplest consists of looking at your practice objectively and spotting areas that could be improved, taking action to make those improvements, and thereafter checking that matters have indeed improved. It is tempting to think immediately of things like patient outcomes, but such matters involve the unbiased collection of data which, in itself, may be beyond the scope of a sole practitioner.

However, there are many areas that you can explore. The environment in which you see your patients, and the way you run your practice are fertile ground for such projects. If you improve your practice setting you will also improve your patient satisfaction. █

Bryan goes on to outline how you can relatively easily audit your patient referrals, the cleanliness of the practice, and your patient records.

This *Introduction to Clinical Audit* is a work in progress – over the next 12 months, NCOR is inviting osteopaths' feedback and suggestions to shape a revised edition for publication in summer 2012. Please send your feedback to: [feedback@osteopathy.org.uk](mailto:feedback@osteopathy.org.uk).

*An Introduction to Clinical Audit for Practising Osteopaths* is available on the **o** zone ([www.osteopathy.org.uk/ozone/practice-guidance/quality-assurance](http://www.osteopathy.org.uk/ozone/practice-guidance/quality-assurance)).

## DOES YOUR CPD ADDRESS YOUR REAL LEARNING NEEDS?

Highly-developed communication skills and the ability to maintain accurate and adequate case records are elements integral to quality patient care. So, as a profession, we must be concerned that failings in these areas continue to be one of the most common features of complaints raised about osteopaths. How can you be sure your own performance is up to the mark? Having looked at osteopaths' CPD, there are very few examples of practitioners reviewing and developing their skills in these areas.

Our evidence suggests that osteopathic CPD, in general, lacks scope and diversity. Much CPD appears opportunistic – osteopaths opting for whatever is available, rather than CPD that meets development needs – and there is a tendency to focus only on areas of particular interest or specialised practice. Clearly, all CPD is beneficial, but the primary purpose is to target areas where knowledge and skills need refreshing or to seek to acquire new skills in order to expand your scope of practice.

So reflecting on practice, identifying your needs and planning your CPD is no less vital to the quality and success of your practice than sound business management. To see the benefit of this, allow yourself a little time to test out a few of the practice self-assessment tools offered in the *Revalidation Pilot Participation Manual*, such

as the personal development needs analysis or clinical reflection template. Then consider what this tells you about your development needs.

The GOsC is conscious of some of the challenges arising from the current CPD scheme – particularly the availability/distribution of CPD courses, which may in part influence your choice of activity. However, there are many ways in which you can satisfy your professional development needs that do not depend on the availability of taught courses – we explored some of these options in the October/November issue of *The Osteopath* (pages 20 and 21). Encouragingly, new regional and local osteopathic groups continue to spring up across the country, giving otherwise isolated osteopaths invaluable access to peer support, shared learning, and the potential for shared business development. Talk to colleagues in your area and find out what can be done to help your local osteopathic community flourish.

Your views and opinion on continuing professional development are extremely important to us and to evolving osteopathic practice – we are currently asking for your thoughts about the purpose and structure of the current CPD scheme, together with possible options for change. Please take the time to consider the CPD Discussion Document available on the **o zone** and the GOsC public website ([www.osteopathy.org.uk/about/our-work/consultations-events/Consulting-you](http://www.osteopathy.org.uk/about/our-work/consultations-events/Consulting-you)) and join this important discussion.

## So what can you do to take your practice to a new level?

**Once you have evaluated your practice or looked at the outcome of a clinical audit, you may have identified some action you would like to take to improve or develop further.**

Depending on the outcome this might include:

- > Changes to your practice environment, e.g. improving the layout following feedback from patients.
- > Changing a process in your practice, such as the way that data is stored, or how you communicate your complaints process to patients.
- > Undertaking CPD to address an identified learning need or to expand your scope of practice.

Some of these actions may be straight forward to implement, whereas others may be complex and might require some further planning.

Included in the *Revalidation Pilot Participation Manual* are some ways in which you can plan actions and learning. For example, a personal development needs analysis (pages 58-60) can be used to evaluate your learning needs, and also includes an action plan on how this might be addressed and a brief evaluation of whether you achieved your aim at the end. You may also want to refer to the action plan template in the Manual (pages 61-65).

Additionally, there is advice on planning your CPD on page 25 of the *CPD Guidelines*.



# Revalidation update

## Revalidation assessors wanted

**At the end of the year-long pilot of revalidation in October 2012, participants will be asked to submit a portfolio of evidence to show how they have met the revalidation criteria and continue to meet the required standards. The portfolios will then be analysed by a team of assessors who will be trained to evaluate the evidence provided.**

We are currently recruiting this team of 35 to 40 assessors with experience of assessing against criteria. These assessors will play an important role in the pilot and will have a broad experience of osteopathic treatment, including musculoskeletal, cranial and visceral approaches, and a diverse patient base.

Each assessor will evaluate up to 10 portfolios and will be asked to provide feedback on their experience to KPMG, which is undertaking an independent evaluation and impact assessment of the pilot.

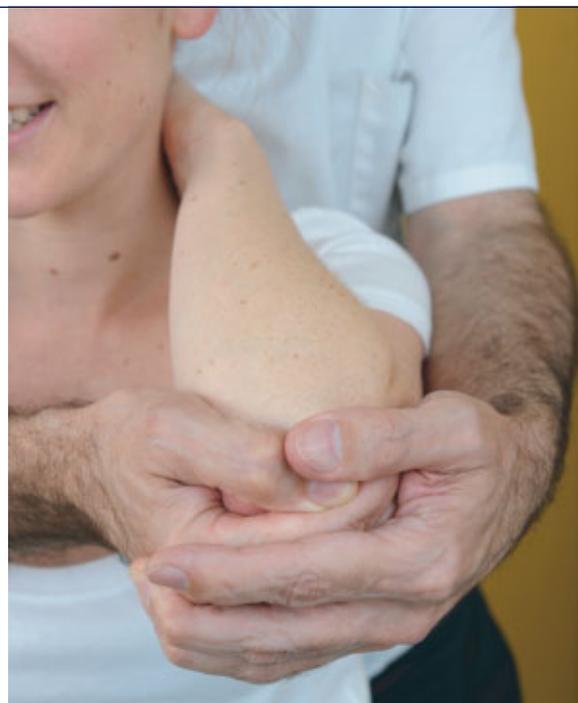
The assessors will be fully trained to assess the revalidation portfolios against the published revalidation assessment criteria. They will be required to attend a day-long moderating session, for which they will be paid £306. They will also be paid £50 for the assessment of each portfolio.

The closing date for applications is **15 December 2011**. Interviews will take place between January and March 2012, with training likely to take place in May.

If you are interested in applying for this role, please download the job description, person specification and application pack from our website at:

[www.osteopathy.org.uk/about/the-organisation/recruitment/](http://www.osteopathy.org.uk/about/the-organisation/recruitment/)

**For further information, contact Joy Bolt, Professional Standards Officer, on 020 7357 6655 ext 238 or email: [jbolt@osteopathy.org.uk](mailto:jbolt@osteopathy.org.uk).**



## Feeding back about your experiences

To help us properly understand the benefits, costs and proportionality of the proposed revalidation scheme, pilot participants are asked to feed back to KPMG at regular intervals about their experiences – what they did, how long it took, whether it was useful and whether they learned anything.

In the new year, pilot participants will be asked to provide their initial thoughts about the revalidation process via an online survey. KPMG will shortly be emailing those involved in the pilot with a link to the survey, which will be hosted separately from the GOsC websites. The survey is open from 9 to 20 January 2012 and all views expressed will be anonymised before the findings are passed on to the GOsC.

For further information on the proposed revalidation scheme or the pilot, contact the Professional Standards Department on 020 7357 6655 ext 235 or email: [revalidation@osteopathy.org.uk](mailto:revalidation@osteopathy.org.uk). Alternatively, please visit the 'Revalidation' section of the **o** zone: [www.osteopathy.org.uk/ozone/my-registration/revalidation](http://www.osteopathy.org.uk/ozone/my-registration/revalidation).



## GCC to look again at revalidation

Earlier this year, the General Chiropractic Council (GCC) reported that it was not going to continue with revalidation. In August 2011, the GCC published an e-bulletin which indicated that the Department of Health had asked them to undertake further thinking about establishing mechanisms to assure the continuing fitness to practise of registrants. They also noted that this is a requirement of the Council for Healthcare Regulatory Excellence in its Performance Review 2010/11. This notion of 'continuing fitness to practise' also appears in the Health Select Committee's definition of revalidation, which they define as 'a broad

term used to refer to the policy of proactively ensuring that practitioners who are registered to practise are still safe and competent to do so. This contrasts with the policy of investigating competence only when complaints are made or concerns are raised.'

The GOsC is exploring continuing fitness to practise through the revalidation pilot, as well as the CPD Discussion Document. Please do get involved by feeding back to KPMG about your experiences during the pilot or completing the CPD Discussion Document response form (see page 11 for further information).

# In Council

## 11 October 2011 – 73rd meeting of the General Osteopathic Council

The agenda and all related papers can be found on the GOsC public website.

### CHAIR'S RECRUITMENT CAMPAIGN

A total of 28 applicants applied for the post of Chair of Council. Final interviews of shortlisted candidates took place on 31 October and the appointment was announced in November (see page 13 for further information).

### PROFESSIONAL CONDUCT COMMITTEE (PCC) ANNUAL REPORT

David Plank, Chair of the PCC, presented the PCC's annual report to Council. He highlighted a number of aspects of the Committee's work and made the observation that some osteopaths, while developing strengths in particular areas of practice such as cranial osteopathy or applied kinesiology, were falling short of the standard expected in basic areas of practice such as examination and record keeping.

The report covers 15 months from April 2010 to June 2011. In that time, the Committee held 19 substantive hearings, four review and two other hearings. All of the reviews were of Suspension Orders and the other hearings were an application for witness summonses and for an Interim Suspension Order.

### INTERIM SUSPENSION ORDERS GUIDANCE

Council considered proposed Interim Suspension Orders guidance, which will help osteopaths, legal representatives, professional bodies and members of the public to understand the procedures that are followed when determining whether to impose an Interim Suspension Order. The finalised guidelines are available on the GOsC public website now (see page 11 for further details).

### NATIONAL COUNCIL FOR OSTEOPATHIC RESEARCH (NCOR) FUTURE GOVERNANCE AND FUNDING

Council received details of the proposed new funding and governance arrangements for NCOR for the next three years. The Osteopathic Educational Foundation and the British Osteopathic Association have committed £25,000 and £20,000 per year respectively for the next three years. Council agreed funding from the GOsC of £25,000 for 2012-13 and, in principle, £25,000 for the following two years. It is hoped that the Osteopathic Educational Institutions will finalise their contributions shortly.

A new governance structure with a Council, a Director and a small Management Board will result in clearer lines of accountability for NCOR's work. A recruitment campaign for the new Director was launched in November (see page 13 for further information).

### LAW COMMISSION REVIEW OF THE REGULATION OF HEALTHCARE PROFESSIONALS

Council received a presentation from the Law Commission on the current review of the regulation of healthcare professionals. This project, commissioned by the Department of Health, will lead to a new consolidated Act of Parliament covering the current nine regulators. The main areas under initial consideration by the Commission are: governance; maintenance of registers; standard setting for education, training and practice; fitness to practise; and the role of the Privy Council (which currently approves all GOsC rules and appointments).

### REGULATORY REFORM

Council received an update on the work undertaken in response to the Government's policy statement *Enabling Excellence*, including an outline of work to date on cost savings within the GOsC.

### MEASURING THE GOSC'S PERFORMANCE

Council considered ways in which the overall performance of the GOsC could be measured and reported to Council, and agreed to pilot a 'balanced scorecard' with a view to developing a more detailed approach in conjunction with the next Corporate Plan for the period 2013-16.



### Future Council meetings

- > Thursday 12 January 2012
- > Thursday 29 March 2012

Meetings begin at 10am at Osteopathy House. Agendas and papers for the public session are available at [www.osteopathy.org.uk](http://www.osteopathy.org.uk) 7 to 10 days before the meeting.

**For further information, contact Jane Quinnell, Governance Manager, on 01580 720 213 or email: [jquinnell@osteopathy.org.uk](mailto:jquinnell@osteopathy.org.uk).**

# IJOM Plus – tell us what you think

Osteopaths have had access to the online package of Elsevier journals, including the *International Journal of Osteopathic Medicine* (IJOM), since February 2011. To ensure that this online research resource continues to add value to you and your practice, we are asking for your opinion on the service and inviting suggestions on how this can be improved. A readership survey is included in this issue of *The Osteopath*, and is also available to complete online via the **o** zone at: [www.osteopathy.org.uk/ozone/resources/research/research-journals/](http://www.osteopathy.org.uk/ozone/resources/research/research-journals/).

The survey asks for your views about the usefulness to you of IJOM and the six other free journals in the package, including *Medicine*, *The Spine Journal*, *Clinical Biomechanics* and the *Journal of Bodywork and Movement Therapies*. We are also interested to know about other online sources of clinical research you might read and use as part of the IJOM Plus package, such as e-alerts to new issues of journals, and your wider use of online media.

Your views are very important as we have the opportunity to make adjustments to the package in terms of which journals are included, so now is your chance to ensure that IJOM Plus meets your needs.

The survey is open until **31 January 2012**, so please do visit the IJOM Plus section of the Elsevier website, which you can access via the **o** zone, and let us know your thoughts. The survey can be returned to Elsevier by post or online, and all feedback will be anonymised before being passed on

to the GOsC. If you choose to include your contact details, which will not be shared with the GOsC, you will have the chance to win a £50 Elsevier book voucher which you can use on hundreds of titles within the health professions field.

## Research at your fingertips

The latest issues of IJOM and *Clinical Biomechanics* are now available on the **o** zone (see pages 16 and 17 for highlights). Simply log on to the site and visit the 'Research journals' page under the 'Research' section in 'Resources'.

The online IJOM includes reviews, original research, conference reports, clinical tips and examples of best practice. You also have access to case reports, continuing education and professional development articles and quizzes, self-assessment exercises, book reviews and technical reports.

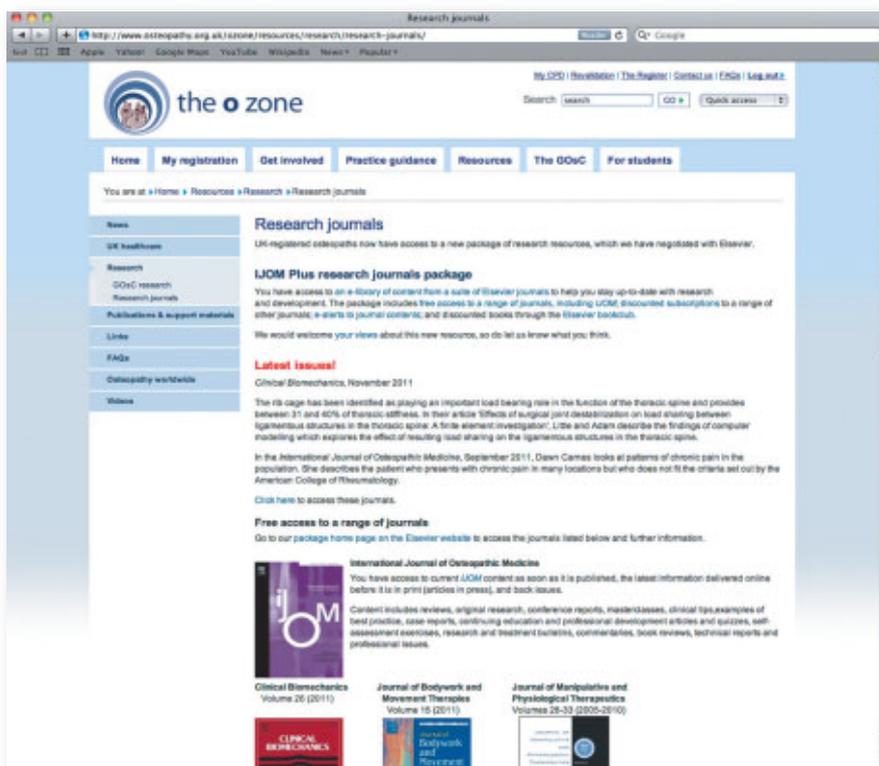
As well as free access to six other Elsevier journals, benefits of the package include:

- > Special discounts on journals of interest to you through individual subscriptions; for example, *Physical Therapy in Sport*, *Complementary Therapies in Clinical Practice*, and the *European Journal of Pain*.
- > Discounts via the 'Elsevier Bookclub' on hundreds of titles within the health professions field.
- > Free personalised searches enabling you to keep up to date with topics of interest as soon as they are published, saving you time finding key resources when you log in.

You can also set up free e-alerts in your areas of interest, which will automatically notify you when the latest articles are published online.

To register for the e-alerts, log on to the **o** zone and visit the 'Research journals' page under the 'Research' section in 'Resources'. From here you can access the Elsevier website. Scroll down the page to the section called 'Personalised e-alerts' and click on the link 'Research journals home page'. In the 'Welcome' box near the top of the page, click on 'Register an account on this site' and enter your email address. You can then create your profile and set a password – please make sure that the 'Table of contents alerts' box is ticked and click the 'Register' button.

**For further information on IJOM Plus, contact Brigid Tucker, Head of Policy and Communications, on 020 7357 6655 ext 247 or email: [btucker@osteopathy.org.uk](mailto:btucker@osteopathy.org.uk).**



# Outcome of PCC consultation

**The Professional Conduct Committee (PCC) considered carefully the responses to its recent consultation on changing the way witnesses give evidence at hearings when it met on 17 October 2011. It decided that there should be no change to the current procedure under which witnesses of fact read out their statements, copies of which have been provided to the panels and parties.**

The consultation was undertaken by the PCC as a Committee of the GOsC. The Committee was created by statute and is independent of the GOsC in making decisions on the cases that come before it and in deciding its own procedures (unless specified in the relevant statutory rules). This includes the way in which witnesses give evidence.

The members of the PCC concluded that, taking into account the public interest and fairness to the parties, the arguments against the change outweighed those in favour of it. The Committee also took full account of the fact that there had been an overwhelming response against the proposed change, including from

osteopaths, those who often represent the parties and the GOsC's own Fitness to Practise Policy Committee. It considered that it would be inappropriate to take forward a change which does not have support from these groups or from the GOsC.

## How should the GOsC change the current CPD scheme?

**We're keen to find out your thoughts on the purpose and structure of the current continuing professional development (CPD) scheme and possible options for change. The CPD Discussion Document asks a number of questions to generate debate on ways to improve the scheme to support the continued standards of care for patients of osteopathy.**

For example, would the introduction of mandatory or core CPD contribute to the enhancement of standards of practice? Core CPD in terms of content or area (identified through fitness to practise findings or research) could encourage osteopaths to broaden the focus of their CPD. But if resources to deliver the core CPD content were not widely available, this could be regarded as disproportionate.

Should the CPD cycle be extended to a three-year or six-year cycle to recognise the hours of learning that many osteopaths undertake in addition to the required 30 hours?

This could reduce the number of applications to the Registrar from osteopaths wishing to carry over hours on an annual basis. However, it could lead to an increase in cases of non-compliance if osteopaths leave the completion of their CPD activities to the last minute.

If you have a view, please do let us know. The discussion document is available on our public website ([www.osteopathy.org.uk/about/our-work/consultations-events/Consulting-you/](http://www.osteopathy.org.uk/about/our-work/consultations-events/Consulting-you/)), along with a response form.

This is a year-long consultation run alongside the revalidation pilot to ensure that both schemes are complementary so that together they help you to demonstrate that your practice is meeting current standards and expectations and to develop your practice in a way that best suits you.

**For further information, contact the Professional Standards Department on 020 7357 6655 ext 238 or email: [cpd@osteopathy.org.uk](mailto:cpd@osteopathy.org.uk).**

## Guidance on interim suspensions

**New guidance on imposing an Interim Suspension Order (ISO) has been introduced by the GOsC to assist fitness to practise committees. The aim is to achieve a consistent and proportionate approach and provide osteopaths and their legal representatives with further information on the process.**

An ISO suspends an osteopath's registration for a set period if it is considered necessary in order to protect patients and members of the public during an investigation.

The guidance can be found on the GOsC public website at: [www.osteopathy.org.uk/information/complaints/our-complaint-process/](http://www.osteopathy.org.uk/information/complaints/our-complaint-process/).

**For further information, contact our Regulation Department on 020 7357 6655 ext 249 or email: [regulation@osteopathy.org.uk](mailto:regulation@osteopathy.org.uk).**



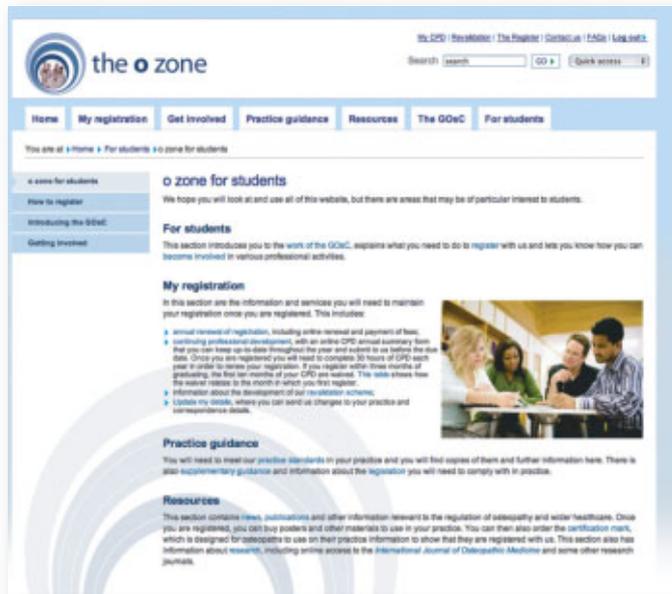
# Attention final-year students

**Do you know that you have access to the o zone, the GOsC's dedicated website for osteopaths?**

The 'o zone for students' page provides information about the role of the GOsC and what you need to do to register with us, and highlights other sections of the site that might be of particular interest to you, such as free online access to the *International Journal of Osteopathic Medicine* (IJOM).

The o zone also offers clear links to practice guidance and standards, including the new *Osteopathic Practice Standards* (see pages 4 to 7 for further details), and provides details of local osteopathic societies to support your CPD and integration into the profession once you have graduated. You can find details of your local group by clicking on the 'Regional Network' link on the 'Get involved' page.

Final year students were given access to the o zone for the first time in early 2011.



It is designed to be an information resource for osteopaths and enables you to manage some of your practice activity online, including renewal of registration/payment of fees, updating practice details, and purchasing GOsC publications.

You can access the o zone by visiting the home page of the GOsC public site – [www.osteopathy.org.uk](http://www.osteopathy.org.uk) – and clicking on the 'Registrants' log in' link at the top right of the page. All final-year students should have received an email from us with their log-in details – if you have not received these details, contact Margot Pinder, Web Manager, on 020 7357 6655 ext 228 or email: [mpinder@osteopathy.org.uk](mailto:mpinder@osteopathy.org.uk).

Reaction from the first cohort of students to use the o zone has been positive, with many commenting on the usefulness of the site, particularly the free access to IJOM and other research journals as part of an online resource package (see page 10 for further details).

We hope you will visit the o zone soon and let us know what you think.



# Fitness to Practise e-bulletin

The latest GOsC Fitness to Practise e-bulletin is available to download via the o zone ([www.osteopathy.org.uk/ozone/practice-guidance/fitness-to-practise](http://www.osteopathy.org.uk/ozone/practice-guidance/fitness-to-practise)). This issue includes further guidance on charging for patient records and features a question and answer section on professionalism. The e-bulletin also looks at discount websites such as Groupon and Wahanda and asks whether the deals on offer are right for patients and for the profession (see pages 24 and 25 for further information).

We are keen to hear your views about the content, format and language used in the e-bulletin and all other GOsC publications. You can share your views with us by emailing: [info@osteopathy.org.uk](mailto:info@osteopathy.org.uk).

The Fitness to Practise e-bulletin is emailed directly to osteopaths who have provided us with an email address. If you haven't received the e-bulletin, please contact our Registration Department to update your details: [registration@osteopathy.org.uk](mailto:registration@osteopathy.org.uk).



# New Chair of GOsC Council

**Alison White has been appointed the new Chair of Council and will formally take up the post on 1 April 2012.**

Alison is a Chartered Director and Chartered Management Accountant, and has held a number of senior posts including Chief Executive of the National Pharmacy Association and Interim Chief Executive of the General Dental Council. She is currently a Non-Executive Director of Hertfordshire Community NHS Trust. Her career included 25 years with the Royal Mail Group starting as a counter clerk and leaving as a director of one of its national businesses.

She succeeds the current Chair, Professor Adrian Eddleston, whose term of office will come to an end next year.

Commenting on her appointment, Alison White said:

"I am delighted to have been appointed as Chair of the General Osteopathic Council. I am very much looking forward to working with the profession, the Council, the staff and other stakeholders, to continue to raise the standards of osteopathic practice for the benefit of patients. Through addressing the challenges facing all healthcare regulators, I also want to see GOsC adding value, not only to the regulation of osteopaths, but in contributing to the development of the wider regulatory landscape."

Adrian Eddleston, said:

"Alison brings a wealth of appropriate experience, knowledge and understanding to the GOsC. Having had the privilege to serve as Chair for the past four years, I am confident she will successfully lead the Council through the next phase of its development."

Alison White has been appointed for a term of four years from 1 April 2012 to 31 March 2016 for which the remuneration is £22,440 per annum.

She also holds other current ministerial appointments with Hertfordshire Community NHS Trust, HM Courts and Tribunals Service and the Rural Payments Agency.

## NCOR seeks Director

**The National Council for Osteopathic Research (NCOR) has successfully established a firm foundation for osteopathic research development that is shaping osteopathic practice and training. It is currently seeking a Director to build on past achievements and provide strategic leadership that will shape osteopathic practice and training.**

Professor Ann Moore, who has led NCOR since its inception in 2003, retires from office next April and will be succeeded by a Director.

NCOR stakeholder organisations have agreed a new funding and governance structure to take NCOR into a new, critically important era of osteopathic research development.

The full job description is available on the GOsC public website and on the **o** zone. The deadline for applications is 6 January 2012. NCOR hopes to have the Director in post by April 2012.

### The role

The Director of NCOR will provide the impetus for strategic leadership, being responsible for the development and management of NCOR. The core elements of the role are:

- > Working with a wide range of stakeholders to achieve the strategic

and operational leadership required to foster osteopathic research and research development.

- > Chairing and leading meetings of the NCOR Research Council, directing the executive, and working with and reporting to the NCOR Management Board, to develop and deliver the organisation's objectives.
- > Acting as the advocate for the work and purpose of NCOR and osteopathic research activity, supporting effective communication with stakeholders both within and outside of the osteopathic profession.
- > Devising strategies for promoting a high level of research awareness and research activity amongst osteopaths.

### The candidate

You will be an able and experienced chairperson with a proven track record and experience of leadership in

healthcare, healthcare education, research or research funding. You must also have links with national/international research communities and be able to demonstrate effective performance in strategic planning, budget, business planning and staff management.

It is likely that you will be a senior university-based academic (preferably professorial level) or a health policy specialist of national standing in your subject or profession.

**For further information, please email: [ncor@osteopathy.org.uk](mailto:ncor@osteopathy.org.uk), or for an informal discussion about the role, please contact GOsC Chief Executive, Tim Walker on 020 7357 6655 ext 246.**

**National Council for  
NCOR  
Osteopathic Research**

# International Regulators Forum

**A first-ever international forum for osteopathy regulators took place in Potsdam in September. The forum was part of a programme of international meetings on osteopathy and osteopathic education and regulation, organised by the Osteopathic International Alliance (OIA) and hosted by the German associations of osteopaths and osteopathic physicians.**

The GOSc was represented at the forum by Tim Walker, GOSc Chief Executive, one of 36 participants from 16 countries either already regulating osteopathy or seeking to establish a statutory regulator. Representatives of the BOA also attended the forum.

The GOSc gave two presentations at the forum. The first was on the work taking place between the Forum for Osteopathic Regulation in Europe (FORE) and the European Federation of Osteopaths (EFO) to develop and promote a common standard for osteopathy in Europe using the European Committee for Standardisation (see article on page 15).

The second presentation was on the progress of revalidation and the GOSc's year-long pilot that is currently taking place. There was considerable interest in revalidation as many regulators are looking at the processes that are needed to ensure that osteopaths remain up to date and fit to practise after initial registration.

Participants also received presentations from the regulators in Australia and New Zealand on the transition to a national registration and accreditation scheme for osteopaths, and the new assessment process for overseas osteopaths in their respective countries. The US National Board of Osteopathic Medical Examiners also gave a presentation on assessment of competency for American osteopathic physicians.

Participants at the forum – particularly from those countries which are trying to introduce regulation – were keen to learn from others' experiences; for example, how to ensure common minimum standards when regulation is introduced, and how to understand and manage the risks that arise when an osteopath spends time away from the profession before seeking to return to practise.

It is hoped that the forum will become an annual event which will take place at the same time as the OIA's Annual General Meeting, which brings together representatives from osteopathic organisations who work together to advance the philosophy and practice of osteopathic medicine and osteopathy worldwide.



## GOSc welcomes Lords report on EU mobility

**The GOSc has welcomed the publication of a House of Lords Select Committee report calling for a change to the Mutual Recognition of Professional Qualifications Directive, which governs the mobility of healthcare professionals within the EU.**

GOSc Chief Executive Tim Walker said:

"Increased mobility of health professionals is welcome, as long as appropriate measures exist in tandem to ensure public protection."

"Since the Directive came into force in 2007, we have raised our concerns about the need for greater patient protection through proper regulation and high standards of treatment. This is particularly important for a profession like osteopathy, which is not widely regulated across Europe and made up predominantly of self-employed practitioners."

Supporting the GOSc's own concerns, the Select Committee recommends that:

- > Regulatory bodies should be allowed to test the language skills of **all** non-UK applicants.

- > An alert mechanism should be implemented so that authorities can share fitness to practise information and warn each other about practitioners who have been subject to disciplinary proceedings.

The House of Lords Social Policies and Consumer Protection EU Sub-Committee report follows an inquiry held earlier this year into the mobility of healthcare professionals in the EU. During its inquiry, the Lords received evidence from a number of parties, including the GOSc.

The full report is available on the GOSc public website at: [www.osteopathy.org.uk/uploads/hol\\_mobility\\_of\\_healthcare\\_professionals\\_report.pdf](http://www.osteopathy.org.uk/uploads/hol_mobility_of_healthcare_professionals_report.pdf). To read our submission of evidence, please visit: [www.osteopathy.org.uk/uploads/houseoflords\\_eu\\_committee\\_review\\_of\\_rpq\\_directive.pdf](http://www.osteopathy.org.uk/uploads/houseoflords_eu_committee_review_of_rpq_directive.pdf).

# Sharing patients' views on osteopathy

**GOSc Head of Policy and Communications, Brigid Tucker, joined the conference programme for this year's Annual Scottish Government Regulation Event to present the findings of the GOSc's Osteopathic Patient Expectations (OPEN) study.**

Held in Edinburgh, this two-day event was attended by over 200 delegates from across Scotland, representing NHS health boards, regulators and Government. Deputy First Minister and Cabinet Secretary, Nicola Sturgeon MSP, presented the keynote speech, followed by a panel of UK health regulators debating the changing face of regulation. Key themes running through the conference included the importance of patient involvement and feedback, and how to promote and facilitate professionalism. All presentations for this event are available to download from: <http://bookings.shscevents.co.uk/all/2780>.

This conference was a valuable opportunity to promote awareness of osteopathic standards of care to our Scottish stakeholders and to hear from them about issues or concerns particular to Scotland. In addition to promoting the positive findings of the OPEN study, we informed delegates of other GOSc research activity, the publication of the profession's new *Osteopathic Practice Standards*, and the piloting of revalidation and review of the current CPD scheme.

If you are practising in Scotland or have an interest in Scottish policy, this event is open to osteopaths free of charge. Look out for further updates in *The Osteopath* on next year's event, or visit: [www.shscevents.co.uk](http://www.shscevents.co.uk) for more information.



## YES vote for European Standard project

**National member organisations of the European Committee for Standardisation (CEN) have voted in favour of creating a Project Committee to develop a European Standard for services of osteopaths.**

**CEN is the recognised authority within Europe for standardisation. You may well be familiar with the 'CE' logo, which denotes that a particular service or product meets agreed European standards.**

Across Europe, standards of osteopathic care vary, and this has created a need for greater patient protection through effective regulation and high standards of treatment. Despite regulatory mechanisms existing in Finland, France, Iceland, Malta, the Netherlands, Switzerland and the UK, along with interest shown by governments in Belgium, Ireland and Portugal, it is unlikely that osteopathy will be regulated

Europe-wide in the foreseeable future. For this reason, the GOSc, along with our European colleagues, voted to jointly fund the development of a European Standard for services of osteopaths to protect patients and members of the profession.

Although the European Standard cannot override national legislation, such as the Osteopaths Act 1993, it will provide a benchmark of care that patients should expect from osteopaths in those countries currently without any regulatory mechanisms. It will also provide valuable protection for osteopaths facing opposition in their country from other professional lobbies which oppose the creation of osteopathy

as an autonomous primary care profession.

This project, to be led and paid for by members of the Forum for Osteopathic Regulation in Europe ([www.forewards.eu](http://www.forewards.eu)) and the European Federation of Osteopaths ([www.efo.eu](http://www.efo.eu)), kicks off in early 2012 and will last up to three years at an estimated cost of 12,000 euros per year.

**For further information, contact Sarah Eldred, Communications Manager, on 020 7357 6655 ext 245 or email: [seldred@osteopathy.org.uk](mailto:seldred@osteopathy.org.uk).**



# Have you considered working abroad?

Robert Moran MHS (Osteo), Co-editor of IJOM

**Have you ever considered travelling to Australia or New Zealand to work but then done some investigating and found that to work as an osteopath will require passing an expensive, 'high-stakes' exam? It's not a very appealing proposition is it? I write this from New Zealand where, after completion of tertiary studies, living and working abroad for a few years is almost regarded as a cultural 'rite of passage' – a time to experience the world and 'expand one's horizons' before the obligations and responsibilities of a serious career become the focus.**

**And it's not just new graduates who are interested in working abroad; increasingly professionals are exploiting migration options in pursuit of improved economic conditions, career development and lifestyle opportunities.**



In the latest issue of IJOM, Stone et al describe an approach to the development of capabilities for osteopathic practice, together with associated assessment techniques and processes. Stone et al report some of the outcomes from a major project that aimed to develop a set of capabilities that might be representative of osteopathic practice. The project was undertaken in the context of osteopathy in Australia and New Zealand, two countries that share close economic and cultural ties, with both having their own regulatory framework for health practice but also needing to satisfy legislation that enables free trade and migration. The issues around workforce planning and migration of osteopaths are complex to unravel and will continue to develop slowly; however, we're very pleased to be able to publish an important piece of work in this area.

Also – a reminder that in 2012 we're planning a special issue of IJOM on osteopathic principles, to be edited by Dr Gary Fryer of Victoria University, Melbourne. The topic of osteopathic principles and professional identity

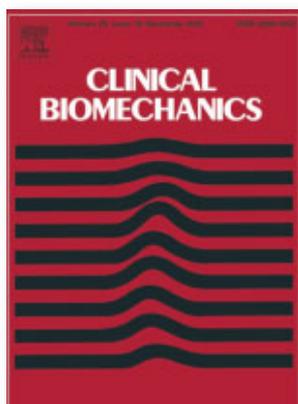
produces many questions, which we have barely touched upon in the Journal over the last decade. Are there principles that accurately reflect and are useful for the osteopathic profession today? Do we have principles that uniquely distinguish us from other professions? Is it important for the profession to clearly define the principles underpinning our practice or do these principles vary so widely between countries and individuals that any attempt to enshrine a set of principles is doomed to failure? Is there a schism between the fundamentalist, traditionalist and progressive movements of the profession, so that no set of tenets will ever gain widespread endorsement? Should any set of tenets be purposefully vague for this reason?

To promote discussion on this subject, we're calling for papers from practitioners, educators and academics for the special issue on the principles of osteopathy and osteopathic medicine. Please submit your manuscript for consideration by 14 February 2012 via the Elsevier website at: <http://ees.elsevier.com/ijom/> or email: [s.davies@elsevier.com](mailto:s.davies@elsevier.com).



# IJOM Plus – what's new?

As part of the IJOM Plus package, you also have free online access to six other journals, including *Clinical Biomechanics*. Here, we highlight two articles that we think may be of interest to you in the December issue of the journal\*.



## Back extensor muscle fatigue at submaximal workloads assessed using frequency banding of the electromyographic signal.

Cardozo AC, Gonçalves M, Dolan P. *Clinical Biomechanics*. 2011;26(10):971-976.

There is growing interest in the evaluation of muscle fatigue to assist with both diagnosis and assessment of patients with back pain. Fatigability of the back muscles has been cited by researchers as a potential risk factor for the development of first onset of low back pain and in chronic back pain patients. In this study, Cardozo et al analyse changes in the power spectrum using frequency banding and identify if this provided a more sensitive measure of muscle fatigue than changes in the mean or median frequency.

## Effects of surgical joint destabilization on load sharing between ligamentous structures in the thoracic spine: A finite element investigation.

Little JP, Adam CJ. *Clinical Biomechanics*. 2011;26(9):895-903.

The ribcage has been identified as playing an important load-bearing role in the function of the thoracic spine and provides between 31% and 40% of thoracic stiffness. Little and Adam describe the findings of computer modelling, which explores the effect of resulting load sharing on the ligamentous structures in the thoracic spine.

\* Summaries of these articles supplied by Carole Fawkes, Research Development Officer, National Council for Osteopathic Research.

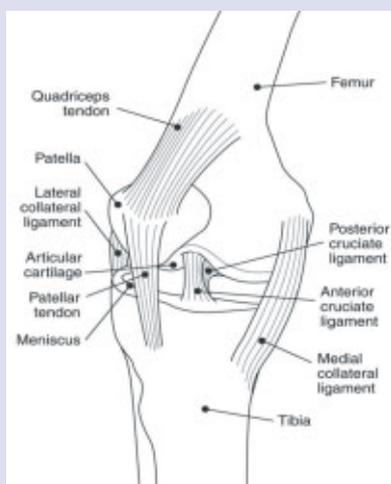
## Help capture a picture of the osteopathic treatment of lower extremity symptoms

NCOR, in collaboration with practising osteopaths, is building on its previous standardised data collection (SDC) work. The data collection tool used in the last data collection exercise has been revised to make it suitable to focus solely on the lower extremity. The project will begin in January 2012.

### What information will the standardised data collection tool capture?

Analysis of data from the previous data collection exercise has indicated that approximately 11% of patients that osteopaths see have symptoms in part of their lower extremity. We don't know enough about this area of practice and need your help to collect data to:

- > Demonstrate the effectiveness of osteopathic care of neck symptoms.
- > Help osteopaths to market their skills and practice.
- > Contribute to evidence on treatment responses.



### What will it involve?

We are looking for osteopaths to collect data on 10 new patients with lower extremity symptoms for a period of three months. Completed paper data collection sheets will then be returned to NCOR.

### Taking part

If you are interested in participating in this project, or have any questions, please contact Shirly Mathias, NCOR Research Administrator, on 01273 643 457 (Monday to Thursday) or email: [s.mathias@brighton.ac.uk](mailto:s.mathias@brighton.ac.uk).

# NCOR research hub news

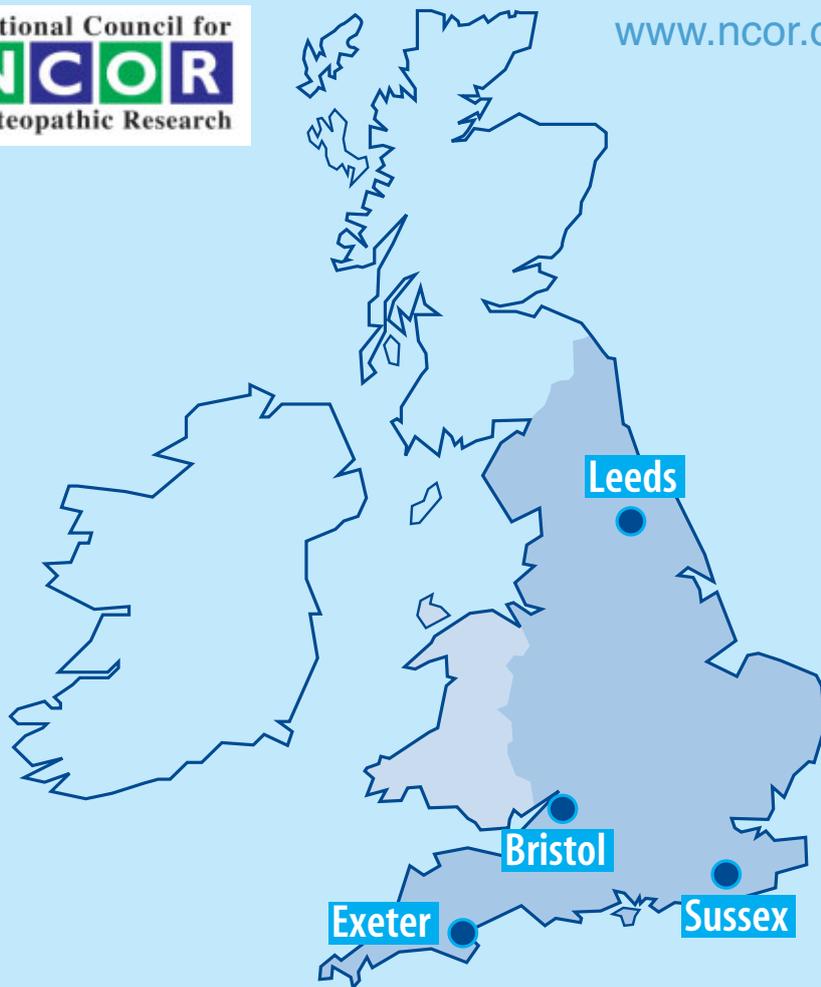
To encourage and facilitate widespread engagement in osteopathic research, NCOR developed a national network of research hubs.

Groups have so far been established in Exeter, Bristol, Leeds and Sussex (Haywards Heath).

For further information about the work being undertaken by these groups, contact Carol Fawkes, NCOR Research Development Officer, on 01273 643 457 (Monday to Thursday) or email: [c.a.fawkes@brighton.ac.uk](mailto:c.a.fawkes@brighton.ac.uk).



[www.ncor.org.uk](http://www.ncor.org.uk)



> BRISTOL

**Thursday 26 January 2012**  
7-9pm

Ankle replacement surgery – rationale and evidence outcomes.

> EXETER

**Saturday 4 February 2012**

Examining findings from a project to look at the profession's views on the development of a career structure for osteopathy.

> LEEDS

**Thursday 12 January 2012**

Discussion concerning the literature on sacroiliac joint assessment and management.

> HAYWARDS HEATH

See [www.ncor.org.uk](http://www.ncor.org.uk) for the next meeting date.

# Conference calendar

> 28-30 March 2012

**3rd International Fascia Research Congress, Vancouver, Canada**

Further information can be found at [www.fasciacongress.org/2012/](http://www.fasciacongress.org/2012/).

> 29 March 2012

**CAMSTRAND conference, Cardiff**

The keynote presentation will be given by Dr Peter Mackereth on 'opportunities and challenges of Integrating CAM'.

Further information can be found at [www3.uwic.ac.uk/english/health/ct/pages/camstranconference2012.aspx](http://www3.uwic.ac.uk/english/health/ct/pages/camstranconference2012.aspx).

> 13-15 May 2012

**2nd International Conference on Integrative Medicine, Israel**

Further information can be found at [www.mediconvention.com](http://www.mediconvention.com).

> 15-18 May 2012

**Integrative Medicine and Health, Oregon, USA**

Further information can be found at [www.IMConsortium-Congress2012.org](http://www.IMConsortium-Congress2012.org).

# Osteopathy and the NHS

Carol Fawkes, Research Development Officer, the National Council for Osteopathic Research

**Published studies have documented that access to osteopathic treatment occurs in a variety of locations in addition to private practices, including NHS hospital outpatient departments, GP practices and clinics attached to Osteopathic Educational Institutions (OEIs)<sup>1,2,3</sup>.**

Osteopathy has now featured in a range of clinical recommendations, most notably for back pain<sup>4,5</sup>. This began with the Clinical Standards Advisory Group (CSAG) guidelines<sup>4</sup>, followed by the European back pain guidelines ([www.backpaineurope.org](http://www.backpaineurope.org))<sup>6,7</sup> and has most recently been evident in guidelines published by the National Institute for Health and Clinical Excellence (NICE) in May 2009. The latter reviewed evidence on the acute management of chronic non-specific low back pain; this looked specifically at back pain lasting longer than six weeks but not more than 13 months<sup>8</sup>. The guidelines produced information on a variety of different treatments and approaches for patients with non-specific low back pain, including up to nine sessions of manual therapy treatment, and more specifically, osteopathy.

The inclusion of osteopathy in national and international guidelines has facilitated the work of osteopaths in the NHS. A new website has been developed which looks specifically at osteopathy in the NHS and can be found at <http://nhsosteopathy.co.uk>. This article will look at a small selection of more recently published studies related to osteopathic practice in the NHS.

In 2003, medically-qualified osteopath Nefyn Williams undertook a pragmatic trial for spinal pain in primary care for patients experiencing back pain for between two and 12 weeks<sup>9</sup>. The study concluded that a primary care osteopathy clinic improved short-term physical and longer-term psychological outcomes, at little extra cost to normal GP care. Rigorous multicentre studies are now indicated to assess the generalisability of this approach. A cost-utility analysis was undertaken for this study, concluding that a primary care osteopathy clinic may be a cost-effective addition to usual GP care<sup>10</sup>. A relative improvement in the mean quality-adjusted life-years (QALYs) for the osteopathy treatment group versus usual GP practice care was noted. This was associated with a small increase in mean health service costs. However, a larger-scale study will be



required to further investigate the economic benefits.

In 2004, funding was awarded by the Medical Research Council for the United Kingdom Back Pain, Exercise and Manipulation (UK BEAM) randomised trial<sup>11</sup>. This looked at how a package of care involving one treatment approach or a combination of treatment approaches could improve low back pain in patients. The study concluded that the combination of spinal manipulation (delivered by osteopaths, physiotherapists or chiropractors) and exercise was more beneficial than when the treatments were used in isolation, and when compared to 'best care' offered through general practice. An economic evaluation was made for this study and concluded that adding spinal manipulation to 'best care' was

a cost-effective way to manage back pain in general practice<sup>12</sup>.

Osteopaths Mike Hopkins and Charles Peers were involved in this study, published by Gurry in 2004, which looked at a multidisciplinary setting within Plymouth Primary Care Trust (PCT)<sup>13</sup>. It found that the return to work time was quicker using this service, which included osteopaths, than GP and physiotherapy services alone. An audit of the service revealed that 84% of patients with low back pain can be managed without the need for hospital referral; this represents a considerable saving for the PCT. Charles Peers has described an NHS audit in detail in NCOR's *An Introduction to Clinical Audit for Practising Osteopaths*, which is available to view via the **o** zone.

Chown et al (2008) more recently attempted to investigate the difference in outcome between patients being treated with group exercise, physiotherapy or osteopathy in a hospital setting<sup>14</sup>. The interventions offered in this prospective study were group exercises led by a physiotherapist, a one-to-one session with a (predominantly manipulative) physiotherapist, and a one-to-one session with an osteopath. Outcome data was collected at baseline, six weeks and 12 months post-discharge using the Oswestry Disability Index (ODI), the EuroQol EQ-5D (including a simple health status visual analogue scale), a shuttle walk test (SWT), and questions relating to life satisfaction and satisfaction with the intervention. Attendance levels were greatest for osteopathy (80%). The mean change in ODI score for osteopathy participants exceeded that of physiotherapy participants by 0.84 (95% CI -0.35 to 5.2). The drop-out rate at this stage of the study was found to be less among the osteopathy group; a number of reasons have been suggested for this, including a more flexible appointment schedule, patients' preference for hands-on treatment, personal characteristics, or past experience within private practice.

The creation of the recent fellowship by the British Osteopathic Association has seen another osteopath become involved in the NHS through work at the Queen's Medical Centre, Nottingham. Many of the OEs have been involved also in NHS care for a number of years. The small but growing band of osteopaths in the NHS will make osteopathic care increasingly more accessible to patients unable to attend private practice.

## Interested in becoming the Director of NCOR?

See page 13 for further details or visit:

[www.osteopathy.org.uk/resources/research/NCOR-Director-vacancy/](http://www.osteopathy.org.uk/resources/research/NCOR-Director-vacancy/) for a recruitment information pack.

## References

1. Thomas K et al. Access to complementary medicine via general practice. *British Journal of General Practice*. 2001;51(462):25-30. [www.scie-socialcareonline.org.uk/profile.asp?guid=CA011AF2-E914-408D-885B-A5784C8D3A40](http://www.scie-socialcareonline.org.uk/profile.asp?guid=CA011AF2-E914-408D-885B-A5784C8D3A40).
2. Ong C-K. Use of osteopathic or chiropractic services among people with back pain: a UK population survey. *Health and Social Care in the Community*. 2004;12(3):265-273. [www.scie-socialcareonline.org.uk/profile.asp?guid=3B4A4570-A610-4C47-983F-D41BE346DA8D](http://www.scie-socialcareonline.org.uk/profile.asp?guid=3B4A4570-A610-4C47-983F-D41BE346DA8D).
3. Wye L, Sharp D, Shaw A. The impact of NHS based primary care complementary therapy services on health outcomes and NHS costs: a review of service audits and evaluations. *BMC Complementary and Alternative Medicine*. 2009;9:5. [www.biomedcentral.com/1472-6882/9/5](http://www.biomedcentral.com/1472-6882/9/5).
4. Clinical Standards Advisory Group. *Back pain*. HMSO, 1994.
5. Royal College of General Practitioners (1999). *Management of Acute Low Back Pain*. Royal College of General Practitioners, London.
6. [www.backpaineurope.org/web/html/wg1\\_results.html](http://www.backpaineurope.org/web/html/wg1_results.html).
7. [www.backpaineurope.org/web/html/wg2\\_results.html](http://www.backpaineurope.org/web/html/wg2_results.html).
8. Savigny P, Kuntze S, Watson P, Underwood M, Ritchie G, Cotterell M, Hill D, Browne N, Buchanan E, Coffey P, Dixon P, Drummond C, Flanagan M, Greenough C, Griffiths M, Halliday-Bell J, Hettinga D, Vogel S, Walsh D. *Low back pain: early management of persistent non-specific low back pain*. London: National Collaborating Centre for Primary Care and Royal College of General Practitioners. <http://guidance.nice.org.uk/CG88/Guidance/pdf/English>.
9. Williams NH, Wilkinson C, Russell I et al. Randomised osteopathic manipulation study (ROMANS): pragmatic trial for spinal pain in primary care. *Family Practice*. 2003;20, 662-9. [www.ncbi.nlm.nih.gov/pubmed/14701889?itool=EntrezSystem2.PEntrez.Pubmed.Pubmed\\_ResultsPanel.Pubmed\\_RVDocSum&ordinalpos=4](http://www.ncbi.nlm.nih.gov/pubmed/14701889?itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_RVDocSum&ordinalpos=4).
10. Williams NH, Edwards RT, Link P et al. Cost utility analysis of osteopathy in primary care: results from a pragmatic randomised controlled trial. *Family Practice*. 2004;21, 643-50. [www.ncbi.nlm.nih.gov/pubmed/15531626?dopt=Abstract](http://www.ncbi.nlm.nih.gov/pubmed/15531626?dopt=Abstract).
11. UK BEAM trial team. United Kingdom Back Pain, Exercise and Manipulation (UK BEAM) randomised trial: effectiveness of physical treatments for back pain in primary care. *British Medical Journal*. 2004;329:1377. [www.ncbi.nlm.nih.gov/pmc/articles/PMC535454/?tool=pubmed](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC535454/?tool=pubmed).
12. UK BEAM trial team. United Kingdom Back Pain, Exercise and Manipulation (UK BEAM) randomised trial: cost effectiveness of physical treatments for back pain in primary care. *British Medical Journal*. 2004;329:1381. [www.ncbi.nlm.nih.gov/pmc/articles/PMC535455/?tool=pubmed](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC535455/?tool=pubmed).
13. Gurry B, Hopkins M, Peers C, Anderson S, Watts M. A rapid access treatment facility for acute low back pain based in the primary care setting. *Journal of Orthopaedic Medicine*. 2004;26(1):13-19.
14. Chown M, Whittamore L, Rush B et al. A prospective study of patients with chronic back pain randomised to group exercise, physiotherapy or osteopathy. *Physiotherapy*. 2008;94:21-28.

## NCOR Chair awarded honorary doctorate of science

Professor Ann Moore, appointed Chair of NCOR in 2003, was awarded an honorary doctorate of science degree by the University of Bedfordshire (the validating university for BSO degree courses) in recognition of her contribution to the osteopathic profession. Ann has had a long association with the British School of Osteopathy (BSO) and has acted as an examiner for the BSO on many occasions.



Professor Moore with the BSO's NCOR representative, Mr Steven Vogel

# Backchat

This section is intended to provide a forum for professional debate. The views and opinions expressed here do not necessarily reflect those of the GOsC.

**We're aware that the new *Osteopathic Practice Standards* is generating much discussion amongst the profession and are keen to share with you the feedback we receive from your peers.**

## Dear Editor,

I have just read the latest edition of *The Osteopath*, which includes advice on providing new patients with information before their first appointment. The article was very interesting and brought up several useful bits of information. However, I would like to express my concerns over the concept of the first appointment leaflet/letter/email.

While I fully understand the need to ensure that patients' expectations are realistic, I feel that sending such a letter would be quite impractical (at least for me). My practice, while busy, isn't full to the brim with patients. Therefore, if a patient contacts me, I can usually offer them an appointment on the same day or the day after. Sending a leaflet/letter to the patient wouldn't work in these instances as the letter wouldn't reach them in time. Sending an email may well cover some patients, but I regularly treat people, including the elderly, whom I know don't use the internet or have email addresses. Additionally, sending an email doesn't guarantee that the patient will read it.

I have always tried to give new patients a lot of information when they are booking, be it in person or over the phone. In fact, I use a checklist, which I have at hand to ensure that information on all important points is explained (fees, length of treatment, undressing for treatment, chaperones, medications, etc). Following on from reading the article in *The Osteopath*, there are a couple of things I will be adding to my checklist. I also make a point of asking "do you have any other questions?"

I also intend to start using a printed information sheet to go through with new patients at their initial consultation. Surely the combination of a detailed verbal explanation when booking, coupled with an information sheet to read at the first appointment, would serve to limit patient complaints in exactly the same way as a letter/email sent to the patient in advance.

**Jack Woodman  
BSc (Hons) Ost Med**

## Editor's response

Through a number of current GOsC research projects, we are now amassing a good deal of osteopathic patient feedback. This we are keen to share with osteopaths because the patient perspective is not only interesting but encapsulates some practical suggestions for enhancing practice – and, potentially, business.

The article to which you refer is no more than advisory – it is our hope that osteopaths will apply the recommendations in ways that work best in your own particular practice. You have done just that, offering here an excellent solution for managing the challenge of new patients who attend at short notice and demonstrating how patient feedback can be 'customised' to meet varying needs.

We hope other osteopaths will follow your lead and allow us to publish for the benefit of colleagues ideas on how best to meet or exceed the standards under differing circumstances. Thank you for sharing your experience.

## Dear Editor,

A recent *British Medical Journal* article suggested that 'Facebook use by medical professionals at all career levels represents a significant threat to professionalism'<sup>1</sup>. I have been increasingly concerned at the use of Facebook by osteopaths around the country. Two issues arise in this regard:

- (i) It is not appropriate to post comments such as 'busy day today – saw 15 patients' or 'couldn't be bothered to treat patients today' or worse still 'had a really smelly patient'. Commenting about working with patients is unprofessional (even if they are not named) and may be accessible to patients themselves<sup>2</sup>.
- (ii) Pictures of practitioners in various states of drunkenness or other forms of inappropriate behavior may well put practitioners at risk of being in breach of their *Code of Practice*.

The current *Code of Practice* states that:

84. Proper personal standards are essential. Significant lapses can lead to fitness to practise proceedings by the GOsC. For example, acts of dishonesty, indecency or violence, conviction in a court of law, drunkenness or drug abuse, may have serious consequences, even if not directly connected with your professional practice<sup>3</sup>.

Cont... >

Indeed the *Osteopathic Practice Standards*, which come into force on 1 September 2012, are even clearer, with the guidance relating to Standard D17 stating:

1. The public's trust and confidence in the profession, and the reputation of the profession generally, can be undermined by an osteopath's professional or personal conduct. You should have regard to your professional standing, even when you are not acting as an osteopath.
2. Upholding the reputation of the profession may include:
  - 2.8. Behaving honestly in your personal and professional dealings.
  - 2.9. Maintaining the same standard of professional conduct in an online environment as would be expected elsewhere.

Facebook is a social networking site that has grown into a marketing tool for many practices. It is essential that osteopaths maintain separate pages for social networking and business development. However, as a profession we may be at risk if we are not careful how we use Facebook and other similar sites.

**Barry Kleinberg BSc (Hons) Ost Med  
Deputy Head of Osteopathy, BCOM**

- 1 *BMJ* 2011;343:doi:10.1136/bmj.d5619 (Published 13 September 2011).
- 2 These are indicative comments only and not direct quotes taken from Facebook.
- 3 *GOsC Code of Practice* May 2005.

If you have a question to ask or views to share, contact *The Osteopath* editor on 020 7357 6655 ext 222 or email: [editor@osteopathy.org.uk](mailto:editor@osteopathy.org.uk).

# Book review

## Neck and Arm Pain Syndromes

**César Fernández de las Peñas, Joshua Cleland and Peter Huijbregts**

Published by Churchill Livingstone Elsevier  
ISBN: 978-0-7020-3528-9

### Reviewed by Susan Feetham BSc (Hons) Ost

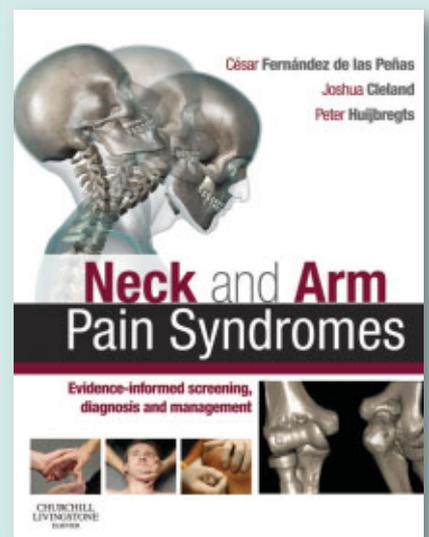
This book looks at common neck and arm pain syndromes such as whiplash, rotator cuff lesions, frozen shoulder and carpal tunnel.

The book brings epidemiology, anatomy, pathology, diagnosis, prognosis and treatment into one place. The contributions come from international experts; however, few are from the UK. Most of the information is not new, but the chapter on imaging studies is very informative.

A refreshing, perhaps unique aspect of the book is that it emphasises the integration of knowledge gained through experience, with the pathophysiologic rationale and current best research evidence. This addresses concerns amongst clinicians that research is overemphasised at the expense of empirical knowledge and the philosophical belly of pathophysiology. This is the first book to my knowledge that recognises experience-based diagnosis and treatment as being as important as evidence-based research. This is notable in the current climate, where research-based evidence is seen as the only evidence that is respected.

At over 500 pages it is a large hardbacked book with chapters divided into segments. Each chapter stands alone. The illustrations are clear and photographs useful. The text is clear and informative but the typeface is rather small. However, I think this has been done to reduce the size of the book. The book is full of references (using the Harvard system), making it very academic and laborious to read, which limits practical, everyday usage. At the end of each chapter there is a long reference list for further reading and evidence-based papers, which can be used to back up your own treatment protocols.

I think the book is aimed at practitioners and students, and would benefit experienced practitioners, as it offers up the latest research thinking. In short, it is a good all-round book backed up by both clinical experience and research, although it is perhaps a little too clumsy to have by one's side. This is something to sit down and read during a quiet moment.



## Clinic Expo

25-26 February 2012, London

Running alongside the Back Pain Show, this two-day exhibition gives delegates access to the latest products, therapies and services in the fight against back pain, and features a series of seminars given by leaders in their field.

**For further information on the exhibition and to view the seminar programme, visit: [www.clinicexpo.co.uk](http://www.clinicexpo.co.uk).**

## 3rd International Fascia Research Congress

28-30 March 2012, Vancouver, Canada

Now in its third year, the congress looks at the latest scientific research findings on the human fasciae in all their forms and functions. Topics on the programme include manual therapy for the myofascial system, fascial imaging techniques, mechanical loading and fascial changes, and fluid dynamics.

A pre-conference dissection workshop will also be taking place on 26 and 27 March, which explores the way we view anatomy and helps integrate treatment approaches. This hands-on workshop aims to promote a better understanding of the fascia of the trunk and limbs through interactive dissection. Participants will see and palpate the superficial and deep fasciae of the whole body, with particular attention to fascia's relationship to muscles, vessels and nerves.

**For further information on the programme or to book your place at the conference, visit: [www.fasciacongress.org/2012/](http://www.fasciacongress.org/2012/).**

## Health and Wellbeing at Work

6-7 March 2012, Birmingham

'health and Wellbeing at Work' is the UK's largest event for professionals responsible for the environment, health and wellbeing of work-aged people. With 40 million days lost annually due to ill health and injury, the conference provides ideas on how to reduce sickness absence and ensure employees return to work quicker after illness or injury.

The conference programme includes sessions on managing musculoskeletal disorders in the workplace, chronic disease and long-term conditions, and stress management and environmental health.

**For further information on the programme or to register your interest, visit: [www.healthatwork2012.co.uk](http://www.healthatwork2012.co.uk) or call 0151 709 8979.**

## 2nd International Conference on Integrative Medicine

13-15 May 2012, Israel

This conference aims to bring together practitioners and therapists from all over the world for a scientific meeting and discussion on the methods, techniques and progress of integrative medicine. Topics being explored include the motor system, movement and posture, musculoskeletal pain, nutrition and myofascial pain.

**For further information and to request a registration pack, visit: [www.mediconvention.com](http://www.mediconvention.com).**

## Integrative Medicine and Health 2012

15-18 May 2012, Oregon, USA

The congress aims to showcase original scientific research through eight keynote and plenary sessions, as well as oral and poster presentations. Areas of research being explored during the congress include clinical trials, lifestyle and prevention, methodology, cost-effectiveness and education.

A pre-congress workshop will also be taking place on 15 May, and applications to host one of these sessions are now being accepted.

**Further information about the congress can be found at: [www.IMConsortium-Congress2012.org](http://www.IMConsortium-Congress2012.org).**

## Foundation for Paediatric Osteopathy Conference 2012

13-14 October 2012, London

The theme of this two-day conference is 'the developing child – an osteopathic challenge' and it brings together experts in the field who will share their unique insight into the subject, offering a diverse range of perspectives on paediatric practice.

Speakers include Liz Hayden, who will be exploring the clinical approach to children with developmental delay; Kok Weng Lim, who will be discussing the development of sleep and sleep disorders in children; and Robyn Seamer, who will be presenting on orofacial development in children.

**For further information, please visit: [www.fpoconference.org.uk](http://www.fpoconference.org.uk) or email: [enquiries@fpoconference.org.uk](mailto:enquiries@fpoconference.org.uk).**

# Browsing for a bargain

**Members of the public in search of a bargain have been signing up for deals on websites such as Groupon and Wahanda. According to its own website, Groupon works by negotiating large discounts with popular businesses, then sending the deal to thousands of subscribers in a free, daily email, resulting in those businesses acquiring many new customers.**

Some osteopaths have contacted the GOsC to voice concerns about colleagues marketing their services on these websites and questioning whether these deals are right for patients and the profession. Although marketing via websites such as Groupon is relatively new, the concept of incentives – for example, discounts for a first treatment or reduced fees for senior citizens and children – is not. In each case, what's important is the nature and form of the incentive and whether in itself it meets the requirements of the *Code of Practice* for osteopaths, or – more generally – breaches the principle of maintaining confidence in the profession.

## Patient care

We are beginning to hear from patients who have signed up to offers via Groupon. Unsurprisingly, they are not concerned about osteopaths offering their services in this way, but they do want to feel that they are getting the service they paid for. The *Code of Practice*

states that you must make the care of patients your first concern, so ask yourself whether the deal you're planning to offer allows you to do that. You will also need to bear in mind the following:

- > Patient care must not be compromised, even if you are giving a cut-price consultation.
- > You must fulfil your side of the bargain: if a patient has signed up for the deal, you must honour what you offered.
- > Any treatment must be justified by a health need: if, at an initial examination, you identify that there is no need, or limited need only for osteopathic treatment, you must make that clear to the patient and have in place a mechanism for refunding payment for any appointments signed up for but not required.
- > Patients are entitled to the same courtesy and consideration whether they have paid full price for an appointment or a discounted price via Groupon.

## Tone and terminology

The tone and terminology of the advert script is obviously formulated to be in keeping with the overall tone of the Groupon website, and to that extent may be a departure from more traditional advertising copy and not to everybody's taste. Some people will be taken aback by the jaunty tone of Groupon's script, while others may feel that osteopaths should be allowed to use up to date marketing methods where they don't harm the patient or the reputation of the profession.

## Groupon – yes or no?

Whether the profession wants to be associated with this method of marketing is not necessarily a question for the GOsC, but we do remind you that all advertising, even that written on your behalf by Groupon copywriters, must be legal, decent, honest and truthful and must conform to current guidance such as



# Help patients help you

**“If quality is to be at the heart of everything we do, it must be understood from the perspective of patients.”**

Lord Darzi, NHS Next Stage Review



The UK Code of Non-broadcast Advertising, Sales Promotion and Direct Marketing. Use of Groupon won't automatically put you in breach of the *Code of Practice* for osteopaths, but if the advertising is misleading or less than candid in relation to fees, or if practice relating to patients who sign up to the deals falls short of what is required under the Code, we or someone else may raise a concern, which may be considered under our fitness to practise procedures.

If you are considering marketing your practice via Groupon (or any other discount website), please refer to the following clauses in the *Code of Practice*:

- > **Clause 8**, which deals with undue influence on patients, including subjecting a patient to an investigation or treatment that is unnecessary or not in their best interest.
- > **Clauses 9 to 11**, which deal with financial and commercial activities, all in the context of making the care of the patient your first concern.
- > **Clause 127**, which deals with practice information and states that publicity should not be generated in such a way as to put those to whom it is directed under pressure to respond.
- > **Clause 128**, which deals with fees and states that these must be charged responsibly.

**For further information, please contact the Regulation Team on 020 7357 6655 ext 249 or email: [regulation@osteopathy.org.uk](mailto:regulation@osteopathy.org.uk).**

The first step is to find out what patients and service users think by asking about their experiences in order to bring about improvements in standards of care. We have already shared with you the positive results from the GOsC-funded research on osteopathic patients' expectations (OPEn study), which are being used to feed into new GOsC public information material and the development of guidance for the profession.

But where do you start as an individual osteopath? Sample patient questionnaires are included in the *Revalidation Pilot Participation Pack*, so please take the opportunity to test these out with your patients, even if you are not taking part in the pilot. You may discover examples of good practice where lessons can be learnt, and areas of concern where improvements can be made – we would be interested to hear how useful you found the experience.

The findings of the OPEn study and all documents relating to the revalidation pilot are available to download from the **o** zone.

Likewise, the GOsC needs to understand the requirements of patients and the public. While lay members of Council provide a public perspective to the GOsC's work, we are proposing to set up a GOsC Patient and Public Partnership Group to seek the wider views of patients about improving the services we provide, in order to better protect

the public and to inform patients and the public about osteopathic practice. We are now recruiting members of the Group and have produced a promotional flyer enclosed with this issue of *The Osteopath*, which you are welcome to display in your clinic to help promote this opportunity to patients.

The Group will operate primarily as an online group via the internet, but if individuals do not have access to the internet we can send information by post or discuss their views over the phone. From time to time it may be helpful to invite members of the Group to meet with us face to face in small discussion (focus) groups.

**For further information or to request additional copies of the promotional flyer, please contact Sarah Eldred, Communications Manager, on 020 7357 6655 ext 245 or email: [seldred@osteopathy.org.uk](mailto:seldred@osteopathy.org.uk).**

**General Osteopathic Council**

**Patient and Public Partnership Group**

- > Would you like to be involved in developing information for patients and the public?
- > Are you interested in standards of osteopathic practice?

The General Osteopathic Council is keen to set up a Patient and Public Partnership Group to engage with patients and the public on osteopathic care.

To express your interest and to find out more, please contact:

**Sarah Eldred, Communications Manager**  
 General Osteopathic Council  
 Osteopathy House  
 176 Tower Bridge Road  
 London SE1 3LU

Tel: 020 7357 6655 x245  
 Email: [seldred@osteopathy.org.uk](mailto:seldred@osteopathy.org.uk)

The General Osteopathic Council is the regulator for osteopathy in the UK. We work with the public and osteopathic profession to promote patient safety by registering qualified professionals, and setting, maintaining and developing standards of osteopathic practice and conduct.

For further information visit our website at: [www.osteopathy.org.uk](http://www.osteopathy.org.uk)

# Courses 2012

Courses are listed for general information. This does not imply approval or accreditation by the GOsC.

For a more comprehensive list of courses, visit the 'CPD resources' section of the o zone website – [www.osteopathy.org.uk/ozone](http://www.osteopathy.org.uk/ozone).

## February

> 2-5

### Core regulation in biodynamic practice

Speaker: Michael Shea  
Venue: Skylight Centre, 49 Corsica Street, London N5 1JT  
tel: 07000 785 778  
email: [info@cranio.co.uk](mailto:info@cranio.co.uk)  
website: [www.cranio.co.uk](http://www.cranio.co.uk)

> 4

### Dentistry and the craniosacral system

Speaker: Thomas Attlee  
Venue: London  
tel: 020 7483 0120  
email: [info@ccst.co.uk](mailto:info@ccst.co.uk)  
website: [www.ccst.co.uk](http://www.ccst.co.uk)

> 4

### Chronic hidden hyperventilation – the 21st-century epidemic

Speaker: Michael Lingard  
Venue: European School of Osteopathy, Maidstone, Kent  
tel: 01622 671 558  
email: [corinnejones@eso.ac.uk](mailto:corinnejones@eso.ac.uk)  
website: [www.eso.ac.uk/cpd-calendar.html](http://www.eso.ac.uk/cpd-calendar.html)

> 4

### How to support your patients in the process of change

Speakers: Tsafi Lederman and Jenny Stacey  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

> 9

### How to treat: Chronic lower back pain

Speaker: Professor Eyal Lederman  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

> 9-13

### WG Sutherland's approach to the body as a whole (module 4)

Course director: Susan Turner  
Venue: Italy  
email: [info@sutherlandcranialcollege.co.uk](mailto:info@sutherlandcranialcollege.co.uk)  
website: [www.sutherlandcranialcollege.co.uk](http://www.sutherlandcranialcollege.co.uk)

> 15-17

### Osteopathic approach to trauma

Speaker: Jean-Pierre Barral  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

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### Harmonic technique revisited

Speaker: Professor Eyal Lederman  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

> 23

### Understanding infant communication

Speaker: Cherry Bond  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

> 24-26

### Neuromuscular re-abilitation

Speaker: Professor Eyal Lederman  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

> 25-26

### DNS skills: Paediatric course

Speaker: Prague Rehabilitation School DNS Team  
Venue: European School of Osteopathy, Maidstone, Kent  
tel: 01622 671 558  
email: [corinnejones@eso.ac.uk](mailto:corinnejones@eso.ac.uk)  
website: [www.eso.ac.uk/cpd-calendar.html](http://www.eso.ac.uk/cpd-calendar.html)

> 3-4

### Integrative osteopathic technique: SI joints, pelvis and LEX

Speaker: Jean-Pierre Barral  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

> 5

### Face workshop

Speaker: Cherry Harris  
email: [info@sutherlandcranialcollege.co.uk](mailto:info@sutherlandcranialcollege.co.uk)  
website: [www.sutherlandcranialcollege.co.uk](http://www.sutherlandcranialcollege.co.uk)

> 9-11

### Care of mother and baby: A family approach

Speaker: Averille Morgan  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

> 10-11

### Clinical implications of thorax and shoulder anatomy

Speaker: Professor Frank Willard  
Venue: European School of Osteopathy, Maidstone, Kent  
tel: 01622 671 558  
email: [corinnejones@eso.ac.uk](mailto:corinnejones@eso.ac.uk)  
website: [www.eso.ac.uk/cpd-calendar.html](http://www.eso.ac.uk/cpd-calendar.html)

> 15

### How to treat: Trapezius myalgia

Speaker: Professor Eyal Lederman  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: [cpd@cpdo.net](mailto:cpd@cpdo.net)

## March

> 2-4

### Functional face (module 8)

Course director: Dianna Harvey Kummer  
Venue: Hawkwood College, Stroud  
email: [info@sutherlandcranialcollege.co.uk](mailto:info@sutherlandcranialcollege.co.uk)  
website: [www.sutherlandcranialcollege.co.uk](http://www.sutherlandcranialcollege.co.uk)



> 19-23

**Osteopathy in the cranial field (module 2/3)**

Course director:  
David Douglas  
Venue: Hinsley Hall, Leeds  
email: info@sutherlandcranialcollege.co.uk  
website: www.sutherlandcranialcollege.co.uk

> 31

**Craniosacral therapy – introductory day**

Speaker: Thomas Attlee  
Venue: London  
tel: 020 7483 0120  
email: info@ccst.co.uk

> 31 March - 1 April  
**Mobilisation of the nervous system**

Speaker: Tim Beames  
Venue: European School of Osteopathy, Maidstone, Kent  
tel: 01622 671 558  
email: corinnejones@eso.ac.uk  
website: www.eso.ac.uk/cpd-calendar.html

April

> 13-15

**Dynamic neuromuscular stabilisation**

Speaker: Prague Rehabilitation School DNS Team  
Venue: European School of Osteopathy, Maidstone, Kent  
tel: 01622 671 558  
email: corinnejones@eso.ac.uk  
website: www.eso.ac.uk/cpd-calendar.html

> 16-18

**Functional face**

Speaker: Dianna Harvey Kummer  
Venue: Proitzer Muhle, Germany  
email: info@sutherlandcranialcollege.co.uk  
website: www.sutherlandcranialcollege.co.uk

> 18-20

**Pediatric level one**

Speaker: Giles Cleghorn  
Venue: Carmelite Centre, Kinsale, Cork, Ireland  
tel: 0117 974 5084  
email: info@integratedosteopathicstudies.com

> 19

**Face workshop**

Speaker: Cherry Harris  
email: info@sutherlandcranialcollege.co.uk  
website: www.sutherlandcranialcollege.co.uk

> 20-22

**Pediatric level one**

Speaker: Giles Cleghorn  
Venue: Engineers House, Clifton, Bristol BS8 3NB  
tel: 0117 974 5084  
email: info@integratedosteopathicstudies.com

> 21

**Nature's voice**

Speaker: Ashley Stafford  
Venue: Circomedia, Bristol  
email: info@sutherlandcranialcollege.co.uk  
website: www.sutherlandcranialcollege.co.uk

> 21-22

**JEMS movement art part 1**

Speaker: Joanne Elphinston  
Venue: Stirling, Scotland  
email: morag.fraser@btconnect.com

> 25-27

**Neuro-vascular manipulation of head, neck and cranium**

Speaker: Jean-Pierre Barral  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: cpd@cpdo.net

May

> 10-14

**BLT: Balanced ligamentous tension techniques (module 4)**

Course director: Susan Turner  
Venue: Hawkwood College, Stroud  
email: info@sutherlandcranialcollege.co.uk  
website: www.sutherlandcranialcollege.co.uk

> 12-13

**Positional release for the spine and pelvis**

Speaker: Leon Chaitow  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: cpd@cpdo.net

> 17-20

**Cranial osteopathy in the biodynamic field VI: Stillness as a fulcrum**

Speaker: Christian Sullivan  
Venue: Brig O'Turk, Callander, Stirlingshire FK17 8HR  
tel: 07714 239 636  
email: cranialgroupscotland@hotmail.co.uk

> 24

**How to treat: Frozen shoulder**

Speaker: Professor Eyal Lederman  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: cpd@cpdo.net

> 25

**Fascia research: What's new and relevant for manual therapists**

Speaker: Dr Robert Schleip  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: cpd@cpdo.net

> 26-27

**Meditation, emotion and the eight transverse diaphragms**

Speaker: Andrew Stones  
Venue: London  
tel: 020 7483 0120  
email: info@ccst.co.uk  
website: www.ccst.co.uk

June

> 8-10

**The speech of the embryo**

Speaker: Dr Jaap van der Wal  
Venue: Skylight Centre, 49 Corsica Street, London N5 1JT  
tel: 07000 785 778  
email: info@cranio.co.uk

> 11-15

**Osteopathy in the cranial field (module 2/3)**

Speaker: Tim Marris  
Venue: Proitzer Muhle, Germany  
email: info@sutherlandcranialcollege.co.uk  
website: www.sutherlandcranialcollege.co.uk

> 16

**Managing shoulder conditions using a process approach**

Speaker: Professor Eyal Lederman  
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19  
tel: 020 7263 8551  
email: cpd@cpdo.net

**Attention osteopaths:**

To advertise your course in the free course listing in *The Osteopath* and on the o zone, email details to the editor: [editor@osteopathy.org.uk](mailto:editor@osteopathy.org.uk). The resource is open to all osteopaths running courses for their colleagues.

**CLASSIFIEDS**

**RECRUITMENT**

**Associate osteopath required**

three days per week in multidisciplinary clinic, Ripon, North Yorkshire. Will suit recent graduate. Minimum two years' commitment. CV to Mark Young, Ripon Natural Health Centre, 27 Market Place, Ripon HG4 1BN or mark@riponnaturalhealth.co.uk

**Goodwill for sale.** Osteopathic practice established for 38 years in north-west Lancashire. Database of 13,000+ patients. Sale due to retirement. Accounts available. Excellent location in current setting with low rent and overheads, plus car park. Expansion possible. Reply to matrix22@ntlworld.com.

**Associate required in Canada.**

Practice located in Camrose, Alberta, a town with beautiful ski/walking trails and within driving distance of the Rocky Mountains. Classical approach an advantage. Send CV to ciara@camroseosteopath.com or visit: www.camroseosteopath.com for more information.

**Associate osteopath required –**

with potential for partnership – in well-established central London multidisciplinary practice. Initially two half-days with potential to increase. Would suit motivated and dynamic osteopath with good business acumen. Cranial experience ideal but not essential. Please email CV and covering letter to info@oasishealthclinic.co.uk

**Osteopath wanted** for busy multidisciplinary clinic in Gloucestershire, to take over from our osteopath who is going on maternity leave. This will be a permanent, part-time position with possibility to expand. Must be comfortable with cranial and treating paediatrics. Please send CV by email to lucyrrid@gmail.com.

**Seeking locum, Tauranga, New Zealand** for six+ months from April 2012. Sole practitioner practice established 1998, structural basis but varied techniques. Locum pays low room rent and keeps 100% of fees, fully furnished, nearby house available if required. Contact douge@clear.net.nz

**Chipstead RFC** is looking for an osteopath to provide sports care for their First XV. The position would suit a recent graduate or someone interested in starting pitch-side care who works in the area. Two sessions per week – Thursday evening training, injury assessment and strapping, etc, and Saturday afternoon for pre-match strapping, pitch-side first aid and post-match assessment. £40 for each session. Please send a declaration of interest in the first instance with a CV detailing your sports care experience to Simeon Milton, 128 Great Tattenhams, Epsom Downs, Surrey KT18 5SE.

**Penn Clinic in Hayes,** Middlesex, has been established for 43 years with 10 practitioners and now requires an osteopath initially for Saturdays with good scope for expansion. Please send CV to pennclinic@yahoo.co.uk

**South of France/Monaco.** We are looking for a seriously talented osteopath with a minimum of three years' experience. We need an interesting, friendly, personable and well-groomed osteopath to take our team to four. Contact info@englishosteopath.com or call 00 33 6 22 35 24 58.

**Newmarket, Suffolk.** Osteopath required for our busy practice based in the heart of British horse racing country. An opportunity to rapidly establish a full patient list. Ideal candidate will have full insurance recognition and experience in structural and visceral osteopathy, orthotic prescription, sports injury treatment and rehab, and a background in sport and management would be an advantage. Two bed furnished accommodation available on site. Please email bruce@derbycottageclinic.com.

**COMMERCIAL**

**For sale.** Osteopathic patient list and good will, in large complementary medicine surgery established nearly 60 years in a major East Midlands city. Price £10K. Sale due to retirement. Please contact Neil on 07510 149 373 for further details.

**Existing self-contained,** ground floor osteopathic clinic in Highgate, London N6, to let. 3/4 rooms + reception – 850 sq ft (plus gymnasium of 550 sq ft if required). Central heating. Prominent location close to the centre of the village. Call 020 8374 1144.

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# CPDO

# 2012

Dates	Title	Lecturer	Cost	Deposit	CPD hrs
<b>Full day courses</b>					
<i>10% discount on most courses booked before 9 Jan 2012</i>					
14-15 Jan, 4-5 Feb & 17-18 March	<b>Foundation Acupuncture Training Course (3 weekends certificate course)</b>	Jennie Longbottom	£665	£350	42
21-22	<b>Basic visceral: The abdomen</b>	Joanna Crill Dawson	£235	£150	14
21 Jan	<b>Pilates: the lower back in focus</b>	Susie Lecomber	£125	£125	7
4 Feb	<b>How to support your patients in the process of change</b>	Tsafi Lederman & Jenny Stacey	£125	£125	7
15-16-17 Feb	<b>Osteopathic approach to trauma</b>	Jean-Pierre Barral	£565	£350	20
24-26 Feb	<b>Neuromuscular Re-Abilitation</b>	Prof. Eyal Lederman	£385	£200	20
3-4 March	<b>Integrative osteopathic technique: SI joints pelvis and LEX</b>	Prof. Laurie Hartman	£265	£150	14
9-10-11 March	<b>Care of mother and baby: A family approach</b>	Averille Morgan	£385	£200	20
25-26-27 April	<b>Neuro-vascular manipulation of head, neck and cranium</b>	Jean-Pierre Barral	£565	£350	20
12-13 May	<b>Positional release</b>	Leon Chaitow	£265	£150	14
16 June	<b>Managing shoulder conditions using a process approach</b>	Prof. Eyal Lederman	£125	£125	7
16-17 June	<b>Visceral osteopathy: the skeletal and visceral pelvis</b>	Joanna Crill Dawson	£235	£150	14
8-9 Sep, 6-7 Oct, 17-18 Nov	<b>Foundation Acupuncture Training Course (3 weekends certificate course)</b>	Jennie Longbottom	£665	£350	42
22 Sep	<b>Pilates: the neck and shoulders in focus</b>	Susie Lecomber	£125	£125	7
28-29-30 Sept	<b>Harmonic technique</b>	Prof. Eyal Lederman	£385	£200	20
6-7 Oct	<b>Osteopathic technique: Cervical spine, CD and UEX</b>	Prof. Laurie Hartman	£265	£150	14
20-21 Oct	<b>Functional stretching</b>	Prof. Eyal Lederman	£235	£150	14
27-28 Oct	<b>MET in management of spinal, respiratory &amp; pelvic dysfunction</b>	Leon Chaitow	£265	£150	14
3-4 Nov	<b>Basic visceral: The thorax</b>	Joanna Crill Dawson	£235	£150	14
7-8-9 Nov	<b>Advanced abdomen and pelvis</b>	Jean-Pierre Barral	Fully booked		20
17 Nov	<b>Managing acute and chronic neck conditions – a process approach</b>	Prof. Eyal Lederman & Tsafi Lederman	125	125	7
<b>Evening courses and lectures (start time 19.00)</b>					
19 & 26 Jan	<b>Visceral osteopathy: introduction to peripheral nerves</b>	Joanna Crill Dawson	£90	-	6
19 Jan	<b>How to treat: Acute disc / lower back pain</b>	Prof. Eyal Lederman	£45	-	3
26 Jan	<b>Relation of Low Back Pain to Findings on Imaging - Why the Disparity?</b>	Prof. David Coggon	£25	-	2
9 Feb	<b>How to treat: Chronic lower back pain</b>	Prof. Eyal Lederman	£45	-	3
23 Feb	<b>Understanding infant communication</b>	Cherry Bond	£45	-	3
15 March	<b>How to treat: Trapezius myalgia</b>	Prof. Eyal Lederman	£45	-	3
24 May	<b>How to treat: Frozen shoulder</b>	Prof. Eyal Lederman	£45	-	3
25 May	<b>Fascia research: what's new and relevant for manual therapists</b>	Dr. Robert Schleip	£55	-	3
4 Oct	<b>How to treat: Tennis elbow</b>	Prof. Eyal Lederman	£45	-	3
25 Oct	<b>How to treat: Whiplash injuries</b>	Prof. Eyal Lederman	£45	-	
9 Nov	<b>Fascial fitness: training principles for the collagenous tissue network</b>	Dr. Robert Schleip	£55	-	
15 Nov	<b>How to treat: Impingement syndrome of the shoulder</b>	Prof. Eyal Lederman	£45	-	

**Venue for courses:**  
Middlesex University, Archway Campus, Highgate Hill, London N19  
(except for Barral's courses)

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# Neuromuscular Re-Abilitation

**A functional approach** Prof. Eyal Lederman DO PhD



Find out how to:

- **Treat the neuromuscular system after common joint and muscle injuries**
- **Treat patients after surgery (hip, shoulder, lower back and more)**
- **Work with pain conditions such as chronic back, neck and shoulder pain**
- **Treat patients with central nervous system damage (stroke, MS, head injuries)**
- **Develop specific exercise and functional activities to support movement rehabilitation**

*Neuromuscular rehabilitation is straightforward – learn to use it clinically in three days*

The aim of this workshop is to provide the theoretical and practical basis for rehabilitation of movement by focusing on motor control. It is predominantly hands-on workshop mixed with theoretical sessions.



In the workshop the participants will explore a functional rehabilitation approach, defined as ***the process of helping a person to recover their movement capacity by using their own movement repertoire.***

The functional approach has several advantages:

- The patient does not have to learn any new movement pattern, treatment uses what the patient already knows
- No need for non-functional/physiological movement education – no need for core stability training or muscle chains and muscle-by-muscle rehabilitation
- Patients can use their environment to challenge their motor losses. No need for resistance bands, wobble board, Swiss balls or any other equipment
- The patients and even their carers can learn the principles of this approach in a single session
- Learn to rehabilitate movement control effectively within a short time – no need for complex and protracted training

**Prof. Eyal Lederman** graduated from the British School of Osteopathy and has been in practice for over two decades. He completed his PhD. in Physiotherapy at King's College, London, where he researched the neurophysiology of manual therapy. He also researched and developed Harmonic Technique. He is involved in research examining the physiological effects of manual and physical therapies and the development of Neuromuscular Re-Abilitation.

Prof. Lederman has been teaching manual technique and the physiological basis of manual therapy internationally to different disciplines of physical therapists. He has published articles in the area of manual therapy and is the author of the books "Harmonic Technique", "The Science and Practice of Manual Therapy" and "Neuromuscular Rehabilitation in Manual and Physical Therapies". He is currently writing his fourth book titled "Therapeutic Stretching: Towards a Functional Approach".

**Dates: 24-25-26 Feb 2012**

**Start on Friday 18.00 -21.00**

Venue: Middlesex University, Archway Campus,  
London N19

**Cost: £385.00\*** (deposit £200.00)

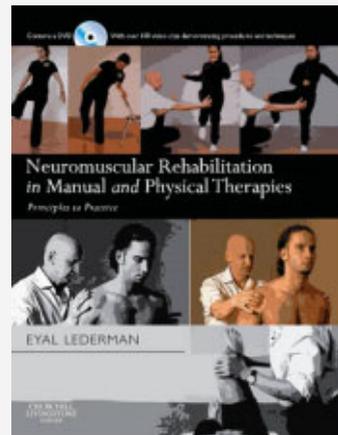
**Students: £185.00** (deposit £100.00)

**CPD hours: 20**

(\*10% discount for booking before 9 Jan 12)

**Book on-line: [www.cpdo.net](http://www.cpdo.net)**

## ***Neuromuscular Rehabilitation book:***



**Read the introduction and summary chapters  
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# THE BRITISH SCHOOL OF OSTEOPATHY

## Continuing Professional Development

[www.bso.ac.uk/cpd](http://www.bso.ac.uk/cpd)

### NLP and Osteopathy



Neuro Linguistic Programming (NLP) is described as “a system of alternative therapy ... which seeks to educate people in self-awareness and effective communication, and to change their patterns of mental and emotional behaviour” (Oxford English Dictionary). For osteopaths

working with people in pain, it introduces strategies to support patients that may complement clinical practice. In this interactive workshop, delegates will learn (and have the opportunity to try out) tools and techniques to benefit their clinical practice. No previous knowledge or experience of NLP is necessary—the only requirement is an openness to learn new ideas.

**Saturday 28 January Course fee: £125**

### Nutrition in Practice

Day 1 is an Introduction to Nutrition. At the end of the day, delegates will be confident in their ability to assess the nutrition needs of their patients and give advice and guidance about macronutrients and micronutrients to help their recovery.



Day 2 is Applied Nutrition.

This workshop builds from the previous day's course in learning how to apply fundamental nutrition guidelines to different situations. At the end of this day, delegates will be able to confidently assess body composition and have a good understanding of the applied role of nutrition in specific circumstances.

**Saturday/Sunday 28/29 January  
Course fee: £125 (1 day)/ £200 (2 days)**

### Functional Active Release



This course will introduce the application and theory of this useful remedial myofascial technique, with 12 different techniques explored and practiced through the day. Participants will see how Functional Active Release can be applied in a clinical setting and use biomechanical evaluation

to identify patients that could benefit. Functional Active Release is ideal for deep muscular dysfunction anywhere in the body and for enhancing performance in sports patients.

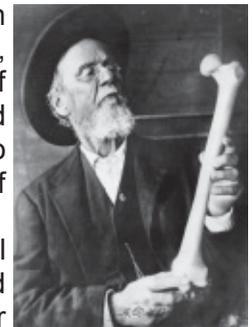
The course leader is Robin Lansman DO, Tutor in the Sports Injury Clinic at the BSO.

**Saturday 28 January Course fee: £125**

**Ex-BSO students receive a 10% discount on all course fees**

### Still Technique Part 1 - (Part 2 - 11 March 2012)

Based on the written fragments of Still's techniques, *Still Technique* is a system of osteopathic diagnosis and treatment which aspires to recreate the manipulations of the 'Old Doctor'.



A cross between structural and functional, it can be used as an alternative or supplement to HVT release techniques, when such approaches are inappropriate or ineffective. It is also applicable to every area of the body and suitable for a wide range of patients.

This course will introduce the theory and practice of Still Technique and is suitable for graduates and fourth-year undergraduates.

**Sunday 29 January Course fee: £125**

**\*Special offer: Book Still Technique 1 and 2 for only £200 (£50 saving)\***

To register your interest or for further information on any of the CPD courses, please contact: Katie Elford on 020 7089 5352 or [k.elford@bso.ac.uk](mailto:k.elford@bso.ac.uk).



# THE BRITISH SCHOOL OF OSTEOPATHY

## Continuing Professional Development

[www.bso.ac.uk](http://www.bso.ac.uk)

### Risky Practice Conference



The second Risky Practice Conference will help you identify and find practical ways to manage the risks facing chiropractors, osteopaths and physiotherapists in practice, with key note speeches on:

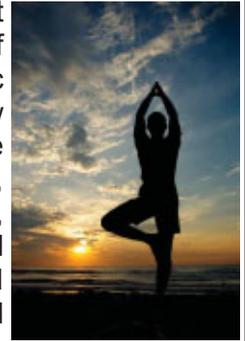
- exploration of different concepts of risk;
- common treatment reactions and responses to treatment;
- serious adverse events and osteopathy; and
- good complaints—how to establish an effective patient complaint system.

Two streams of workshops aim to improve skills and knowledge in revalidation, communicating risks and benefits and promoting your business within ASA guidelines.

**Saturday 4 March Conference fee: £110**

### Yoga as Therapeutic Exercise

The course offers a short introduction to the history of yoga and its therapeutic aspects as well as how appropriate exercises can be developed to improve mobility, strength, stamina, balance, coordination and synchronization. Emphasis will be put on mindfulness and breathing, two essential parts



of yoga that can help patients to adjust their own practice to their capacity and conditions.

Luise Wörle has been teaching yoga and training yoga teachers since 1975. After working on remedial yoga, she acquired scientific credentials with a BSc (Hons) in Osteopathy and has an osteopathic practice in Munich, Germany.

**Saturday 18 February Course fee: £125**



## Postgraduate Courses



### Professional Doctorate in Osteopathy

This doctoral degree offers the most advanced level of formal learning in osteopathy outside the USA. The course is designed for those who are keen and able to engage with the challenges thrown up by doctoral-level scholarship and in-depth enquiry into a topic relevant to your professional life.

**Start date:** January 2012

**Course Leader:** Professor Stephen Tyreman

### Postgraduate Certificate in Academic and Clinical Education

This programme is 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. It offers two modules: Education for Academic Teaching and Education for Clinical Supervision; and Teaching Technical Skills. Each module will involve a four-day course which will utilise a variety of teaching approaches including lectures, seminars and practical workshops, supported by assignments.

**Start date:** September 2012

**Course Leader:** Jorge Esteves

### Postgraduate Certificate Research Methods

This programme is designed to equip osteopaths and other manual therapists with the knowledge and skills required to evaluate practice; and to consider, design, propose and deliver research. It offers two modules: Advanced Research Methods and Design; and Statistics for Healthcare Research. Each module will involve a four-day course which will utilise a variety of teaching approaches including lectures, seminars and practical workshops, supported by assignments.

**Start date:** October 2012

**Course Leader:** Jorge Esteves

To register your interest or for further information any of the postgraduate courses, please contact: Gayda Arnold on 020 7089 5315 on [g.arnold@bso.ac.uk](mailto:g.arnold@bso.ac.uk)



# Sutherland Cranial College

Plan your 2012 CPD  
with our inspiring  
program from beginner  
to advanced level



The following courses can be taken alone or as part of our 9-module pathway:

Flexible dates	Module 1	Foundation in Osteopathy in the Cranial Field   £275 Is 'cranial' osteopathy right for you? Host a two-day course in your area.
March 2-4	Module 8	The Functional Face Exploring the special senses, facial mechanics and their influence on health.   Stroud, residential   Fee: £885
March 5		Dental/Orthodontic Day   Stroud   Fee: £155
March 19-23	Modules 2-3	Osteopathy in the Cranial Field An exciting practical and anatomical approach to involuntary motion. Leeds, residential   Fee: £1430
May 10-14	Module 4	Balanced Ligamentous Tension techniques applied to the whole body. An effective way to treat acute or chronic joint problems. Stroud, residential   Fee: £1170
July 9-11	Module 5	In Reciprocal Tension – Membranes and Principles Using reciprocal tension principles for effective palpation, diagnosis and treatment.   Stroud, residential   Fee: £885
October 26-28	Module 7	Spark in the Motor Working with the CNS using fluid approaches. London   Fee: £825   Guest speaker Andy Goldman from the USA.

## New courses

January 13-15	<b>NEW</b>	Discovering the Health in Trauma An osteopathic and psychological approach to the impact of trauma. Stroud, residential   Fee: £695
April 21	<b>NEW</b>	Nature's Voice Linking the art and science of osteopathy through sound, movement and breath.   London   Fee: £105 early booking price
October 6-7 & November 3-4	<b>NEW</b>	Internal Medicine Developing osteopathic understanding and treatment of the visceral systems.   Stroud, residential   Fee: £995

## Refresher days

January 28 & June 30	<b>NEW</b>	Osteopathy in the Cranial Field <b>Refresher Day</b>   London   Fee: £165
September 29	<b>NEW</b>	BLT <b>Refresher Day</b>   London   Fee: £165

See our WEBSITE for more course information – [www.sutherlandcranialcollege.co.uk](http://www.sutherlandcranialcollege.co.uk)  
SCC Magazine available online contact course office – Tel: 01291 622555

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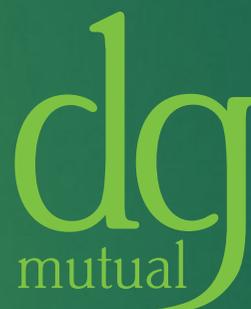
**Are you self employed?  
 How would you stay  
 afloat without income?**



**If illness strikes and you're unable to work, could you cope financially? With income protection from dg mutual you would stay afloat.**

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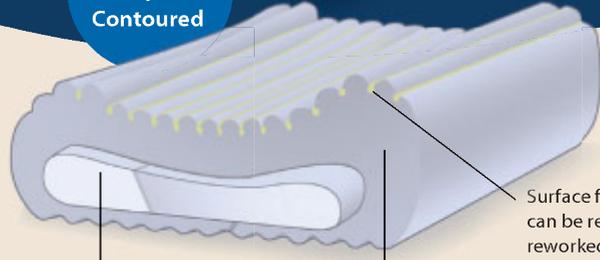
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# COMPLETE Sleeprrr

Adjustable  
Therapeutic  
Contoured

ADJUSTABLE



Removable inserts for shape, height & angle adjustment

Visco contoured profile for perfect neck support

Surface foam noodles can be removed/ reworked allowing you to customise the pillow's surface for targeted softer or firmer areas



**Osteopathy Winter Offer**  
*Free sample pillow for your clinic!*

"With it's unique patented design the CompleteSleeprrr™ adjustable has helped resolve neck pain and improve the wellbeing of thousands of patients worldwide"

## "Why is the CompleteSleeprrr™ the UK's No.1 adjustable pillow supplied to patients?"

- ✓ The CompleteSleeprrr™ adjustable pillow offers perfect support and spinal alignment with **one single pillow** that meets all patient needs. **One size suits all** – for easy stocking.
- ✓ The CompleteSleeprrr™ pillow is **100% exclusively** supplied to health professionals and clinics **ONLY** – and not available online or through retail. This exclusivity helps **generate patient referrals** that bring in more clinic traffic.
- ✓ Generous **trade discounts** allow the pillow to be offered to patients at an affordable price while maintaining generous profits.



Luxurious Memory foam  
...feeling is believing.  
Made in the UK.

### Some of the clinic feedback...

"Having used a well known brand pillow for the last 7 years, I thought I would take the plunge and try the Complete Sleeprrr free trial offer and I'm really pleased I did. I absolutely love the pillow, it's completely flexible and caters for every taste, from thick to thin and soft to firm. In fact, I've just had to buy another to stop my partner stealing mine! I will definitely be recommending this to patients and fellow colleagues when they ask for advice on pillows."

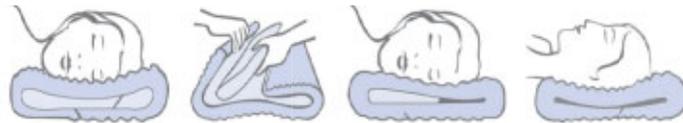
Georgina Bull BSc (Hons) Ost Med, DO, ND  
Nene Valley Osteopathy

"We have always tried to offer our patients a choice of products, including two different types of pillow. After a successful trial period we decided to stock the Sleeprrr pillow because of its versatility and the patients really liked it! The price is very competitive and the adjustability of the pillow means that it suits most patients' needs. We offer a "try before you buy" service to all of our patients and it is rare that they do not purchase a pillow after this period. Since stocking the pillow at the beginning of the year, it has become our highest selling product."

Tonie Philpott, Practice Manager, Kent House Clinic

### Therapeutically designed adjustable pillow

Your patients can adjust the pillow to suit their own comfort & postural needs, removing the risk of the pillow being too high, too low, too hard or too soft.



Customisable for back and side sleepers – suitable for large or small physiques.

### Osteopathy Winter Offer

*Free sample pillow for your clinic!*

- ✓ **1x Free CompleteSleeprrr™** and client education pack – just package and postage to pay – only £6.97
- ✓ Call NOW on **02381 290090** quoting "Osteopathy Winter Offer" for your **FREE Clinic CompleteSleeprrr™**



Free display stand available

Mayflower Medical Supplies Ltd: Tel 02381 290090, Mon - Fri, 9am – 5pm

\*Offer terms & conditions apply - 1 free sample pack available per clinic.

A three day workshop to explore bio-resonance and the use of sound into the physical and subtle bodies.

24th, 25th and 26th February 2012  
The Brew House Hotel,  
Tunbridge Wells, Kent

## 'The Healing Power of Sound'

### Foundation Course

This course will enable you to immediately offer your patients a new and innovative healing modality.

"As an osteopath I found that many physical problems had underlying emotional or vibrational causes and that osteopathy alone wouldn't achieve long lasting results. Geoff and Peter are great teachers; Geoff in particular delivered plenty of scientific research to assist with understanding the techniques. I can thoroughly recommend this course – tuning forks have added another successful therapy to my practice."  
C. Bates

For more details and a full course syllabus please contact  
Melanie Harbour 01892 549700 or email [info@atmanacademy.co.uk](mailto:info@atmanacademy.co.uk)



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## FOUNDATION FOR PAEDIATRIC OSTEOPATHY CONFERENCE 2012

The Developing Child - An Osteopathic Challenge

Date: 13 & 14 October 2012

Venue: Thistle Hotel, Marble Arch, London

Registration: [www.fpoconference.org.uk](http://www.fpoconference.org.uk)

Speakers and lecture titles now available.

Discounts available for alumni members and early booking

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Harley complete care SYSTEMS

#### Harley Pillow Range

- Designer Range - Moulded Visco Elastic Memory Foam
- Original Range - Moulded Cold Cast Polyurethane
- Variety of Sizes
- All pillows are individually moulded for comfort and support



THE PROFESSIONALS FAVOURED CHOICE

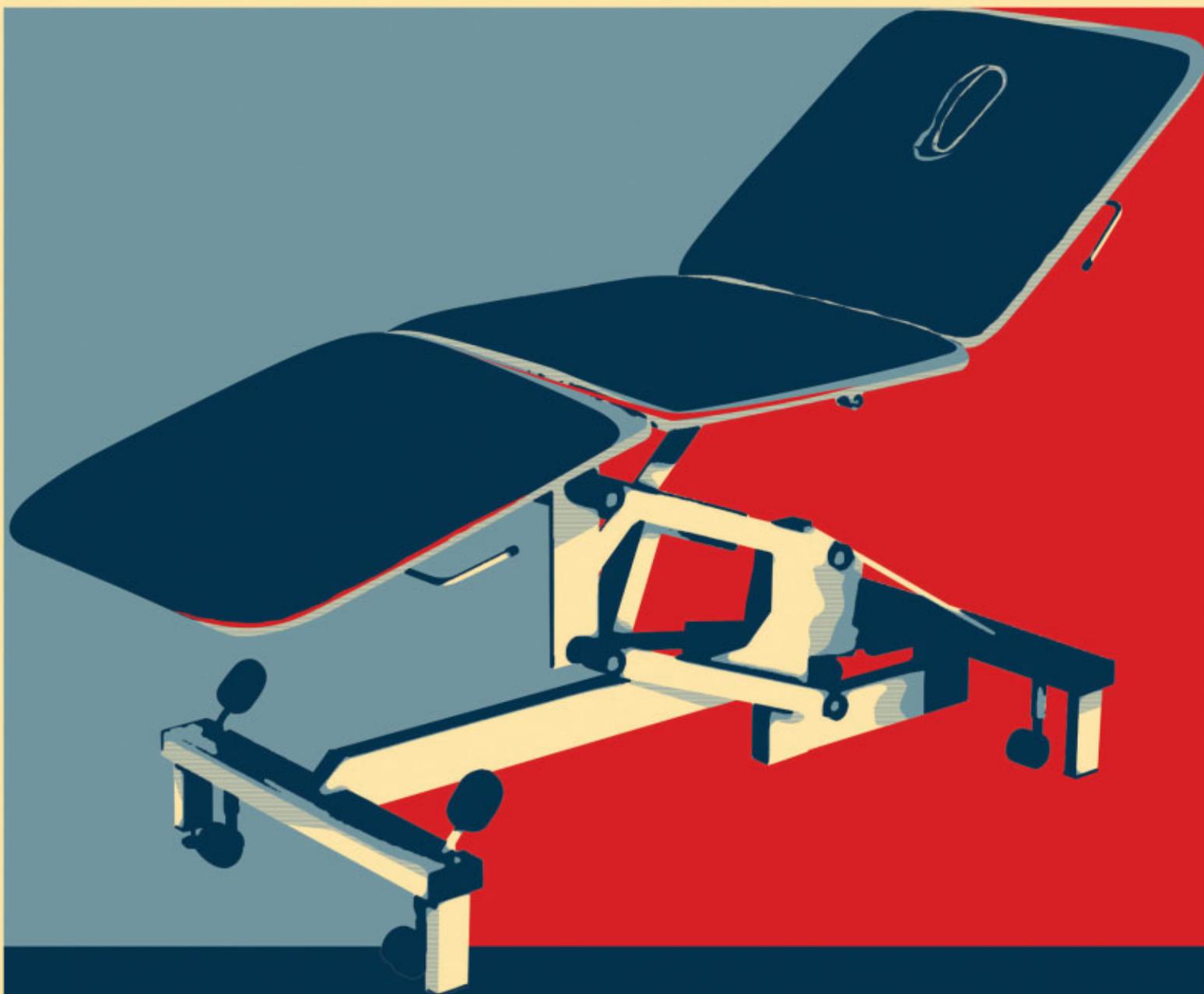


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# The path to quality training

**The Rollin E. Becker Institute** is a **Sutherland Cranial Teaching Foundation-approved** organisation providing education, practical skills and development with osteopathy in the cranial field (OCF). Established by an existing team of highly educated, motivated and experienced teacher-practitioners in OCF, the Rollin E. Becker Institute blends philosophical traditions with developments in knowledge in the cranial concept. We aim to inspire newcomers to OCF, as well as those already practising, by delivering essential and expert knowledge, invigorating the way you work.

**The Rollin E. Becker Institute** is committed to delivering a high-quality programme of courses, masterclasses and seminars relevant to the challenges facing osteopaths in the 21st century. Visit [www.rollinbeckerinstitute.co.uk](http://www.rollinbeckerinstitute.co.uk) for more details.



## Train with the Rollin E. Becker Institute in 2012

### OCF 40-hour Foundation Course

Dates: 28th-29th Jan, 4th-5th and 18th-19th Feb 2012  
Course Leader: Nick Woodhead  
Cost: £825

This SCTF-approved 40-hour course will run over three weekends to minimise disruption to practice life.

The course will examine the detailed anatomy and function of the involuntary mechanism, including diagnostic and therapeutic interventions using the involuntary mechanism approach.

With the emphasis on application of OCF in everyday osteopathic practice, the course will also provide extensive guided practical instruction with a participant to tutor ratio of 4:1 to maximise development of practical skills.

### Body Course

Dates: 24th-25th March 2012  
Course leaders: Robert Wheeler and David Hamm  
Cost: £270

This two-day, largely practical course is aimed at developing the practitioner's clinical skills beyond the cranosacral axis and extending treatment to the whole of the musculoskeletal system, including the thorax and pelvis, using the primary respiratory mechanism approach.

The course will re-visit OCF principles of diagnosis and treatment, appraise compression and patterns of dysfunction within the body tissues, and will re-consider the principles of balanced membranous, ligamentous and fascial tension in a more contemporary way whilst staying true to the philosophy of Drs. Still, Sutherland and Becker.

This course is available to all participants that have completed at least one 40-hour SCTF-approved foundation-level course, and provides a participant to tutor ratio of 4:1 to maximise development of practical skills.

Call 0845 5193 493 or visit  
[www.rollinbeckerinstitute.co.uk](http://www.rollinbeckerinstitute.co.uk)  
for registration and updated course information

sign up for our quarterly newsletter  
at our website or scan this code





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General  
Osteopathic  
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# Revalidation assessors wanted

We are currently recruiting a pool of 35 to 40 assessors to evaluate portfolios of evidence supplied by revalidation pilot participants in October 2012.

This position will be paid and full training will be provided.



See page 8 for further details or visit:  
[www.osteopathy.org.uk/practice/Revalidation](http://www.osteopathy.org.uk/practice/Revalidation)