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the osteopath







The General Osteopathic Council

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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.

Professional Standards ext 238 / 235 / 240

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

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.

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Volunteers needed to test the revalidation scheme

We are recruiting osteopaths to take part in a year-long pilot to test the proposed revalidation self-assessment scheme. You will already have received a Revalidation Pilot Invitation Pack, which outlines how you can help shape the development of the scheme.

To date, over 250 osteopaths have registered their interest in taking part in the pilot, but we would still welcome more volunteers to test the scheme and help us ensure it is practical for the many varied circumstances in which osteopaths practise.

Why me?

Osteopathy is a richly diverse profession, and revalidation needs to work for all types of practice. We need a wide range of osteopaths to test the scheme to help us understand the impact revalidation might have on your individual practice. For example, do you work part-time and also teach? Or have you taken time out from practice to raise a family? Do you specialise in a particular area of practice (e.g. paediatrics or sport, animal osteopathy)? Do you work in a multidisciplinary practice, within the NHS or as a sole practitioner? Are you newly-qualified or do you have an established practice that employs other osteopaths? As a group, the pilot participants need to be representative of the profession at large.

Why a pilot?

The pilot will help us assess the costs and benefits of the proposed revalidation

process, both to the individual osteopath and to the GOsC. Can it achieve the desired outcomes without overburdening the osteopath or osteopathic regulation? Is the revalidation self-assessment practical for the many varied circumstances in which osteopaths practise?

The lessons learned will largely determine the future development of revalidation for osteopaths. Our aim is to develop a form of revalidation that stimulates continual improvement in the quality of osteopathic care, within individual practice and across the profession as a whole.

What is being tested?

The aim of the pilot is to test Stage 1 of the proposed revalidation process. It is not about testing osteopaths.

The revalidation scheme that is currently proposed for osteopathy would comprise

four stages (see Figure 1). Stage 1 – in which the osteopath will assess their practice – will be carried out by all osteopaths. It is Stage 1 that we will be piloting before further developing Stages 2–4.

What does participation involve?

In order to test Stage 1, we will be asking pilot participants to complete the proposed revalidation self-assessment form. This requires you to undertake a detailed assessment of your practice and to collect supporting evidence that demonstrates your practice is up-to-date.

We are developing information to guide osteopaths through the revalidation process, along with a range of methods (or tools) that may help osteopaths to collect the required evidence. We will ask you to test these mechanisms and tell us if they are suitable for use in osteopathic





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practice and whether they help you to assess and enhance the quality of your practice.

Pilot participants will also be asked to provide regular feedback throughout the year-long pilot. We want to know about your experience of completing the self-assessment process – how long has it taken you, and what are your views on the clarity of the guidance and the effectiveness of the tools.

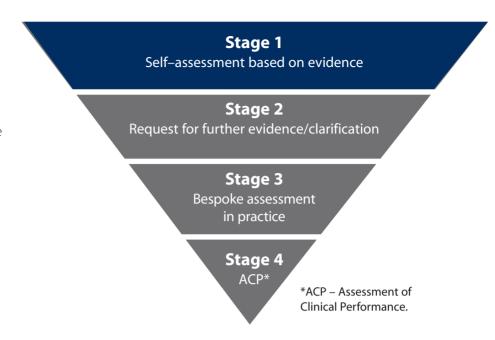
What's in it for me?

We believe there are real benefits for all osteopaths in taking part in the pilot. You will have the opportunity to:

- > feed into the independent analysis of the proposed revalidation scheme;
- > learn more about your practice and the practice of others, as well as gaining a finer understanding of patients' expectations and preferences;
- > learn about methods for collecting evidence that demonstrate the quality of your practice and the osteopathic care you provide – these may be new skills that could benefit your business development; and
- > take advantage of expert training and support to help you successfully complete the revalidation self-assessment form.



Figure 1: The four-stage revalidation model



Those who complete the pilot will also be given a certificate of completion awarding a full year's worth of continuing professional development (CPD) hours.

conducted by independent consultants KPMG. All this will inform the further development of the revalidation scheme for osteopaths.

Timetable

We expect the pilot to get fully underway in October 2011 and run for a year. It will begin with training workshops for participants around the country. The schedule of these workshops will be published in the summer when the dates and locations are confirmed.

Once the pilot has finished, we will analyse the feedback from participants and assessors, along with the conclusions of the evaluation and impact assessment

Participating in the pilot

If you would like to register your interest in taking part in the pilot, email your details to: revalidation@osteopathy.org.uk. For further information on any aspect of the revalidation scheme, contact the Professional Standards Department on 020 7357 6655 ext 235 or email: revalidation@osteopathy.org.uk. Alternatively, visit the dedicated revalidation page on the ozone: www.osteopathy.org.uk/ozone/my-registration/revalidation.

"I feel it is important for a broad spectrum of the profession to engage in the revalidation pilot, so it is tested across a wide range of osteopaths in different practice set—ups and with differing lifestyles and other commitments. Hopefully then we will have a workable and manageable scheme to implement, which will not be overly burdensome on hard-working individuals."

Julia Young DO, Devon

Fitness to Practise report 2010/11

Resolving issues involving osteopaths' fitness to practise is an integral part of the GOsC's duty to regulate the profession, thereby protecting the public and the profession's reputation. The following report of the GOsC fitness to practise committees covers the period from 1 April 2010 to 31 March 2011.

The statutory committees, generically referred to as the fitness to practise committees, are the Investigating Committee, Professional Conduct Committee and Health Committee. The Health Committee had no cases to hear this year, and so this report focuses on the Investigating Committee and Professional Conduct Committee.

Investigating Committee

The Investigating Committee (IC) consists of osteopathic and lay members. When a formal complaint about an osteopath is received by the GOsC, it is the duty of the IC to examine the evidence and decide whether there is a case for the osteopath to answer. Allegations fall into four categories and it is not uncommon for one complaint to contain many allegations:

- > unacceptable professional conduct
- > professional incompetence
- > a relevant criminal offence (conviction)
- > ability to practise is seriously impaired due to a mental or physical condition (health).

From 1 April 2010 to 31 March 2011, the IC met on six occasions and considered 30 cases. The decisions are set out in the table below (left). The IC concluded that 13 cases should be heard by the PCC.

Professional Conduct Committee

The Professional Conduct Committee (PCC) also consists of osteopathic and lay members. It considers cases that are referred from the IC where there is a case to answer in relation to an osteopath's conduct, competence or conviction of a criminal offence. The PCC's role is to decide whether the allegations made are proved. This takes place at a public hearing, unless there is a good reason to hear the allegations in private. Both parties (the osteopath and the GOsC) are permitted to attend the hearing and put forward their case.

From 1 April 2010 to 31 March 2011, the PCC considered 17* new cases. The sanctions imposed are listed in the table below (right).

Review hearings

When the PCC imposes a Conditions of Practice Order or suspends an osteopath from the Register (a Suspension Order), it may decide to review the case before the Order expires. During the period of this report, the PCC reviewed three Suspension Orders.

Interim suspensions

The IC and PCC will, if it is necessary to protect members of the public, order the Registrar to immediately suspend an osteopath's registration. The suspension is likely to remain in place during the investigation of a complaint, unless there is a change in circumstances.

Interim suspension is used only in relation to the most serious allegations, and the IC exercised this power on just one occasion between 1 April 2010 and 31 March 2011.

Appeals

An osteopath and the Council for Healthcare Regulatory Excellence (CHRE) can both appeal a Professional Conduct Committee decision. No appeals were made during the period of this report.

What happens when a complaint is made?

The diagram at the top of page 7 illustrates the procedures followed when a complaint is made about an osteopath.

IC decisions		
Allegation	Case to answer	No case to answer
Unacceptable professional conduct	0	1
Professional incompetence	0	0
Unacceptable professional conduct and/or professional incompetence	13	13
Conviction	0	3
Health	0	0
Total cases considered	13	17

	nacceptable professional conduct	Professional incompetence	Conviction
Removed	1	0	1
Suspended	2	0	1
Conditions of practic	e 1	0	0
Admonished	6	0	0
Not proved	2	0	0
Total	12	0	2

At the time of writing this report, the PCC had not reached a decision in three of the cases considered.

Complaints procedure **Complaint made** We are not able to investigate Considered by a Screener the complaint Investigated and considered by the The IC does not refer the complaint **Investigating Committee (IC)** for a hearing Public hearing before the The complaint is not proved and no action **Professional Conduct Committee (PCC)** is taken against the osteopath If the complaint is proved, the PCC can: The osteopath and/or the Council 1 Admonish the osteopath for Healthcare Regulatory Excellence 2 Put conditions on the osteopath's practice

Who makes complaints?

Register.

3 Suspend the osteopath's registration

4 Remove the osteopath's name from the

Anyone who has a concern about an osteopath's fitness to practise can raise it with the GOsC. The vast majority of complaints come from patients – 25 of the 30 complaints considered by the IC during the period of this report were made by patients. However, the police will inform the GOsC when an osteopath is cautioned for, charged with, or convicted of a criminal offence and these cases will be considered by the Investigating Committee. Four of the cases that were considered by the IC during the period of this report related to a caution or conviction for a criminal offence.

How long does it take the IC to consider a case?

This will depend on the nature and the complexity of the case. The GOsC has targets for completion of the main stages of the fitness to practise process. These are:

- > Consideration by the IC within four months of receipt of complaint.
- > Hearing by the PCC within nine months of referral by the IC.
- > Total time taken from receipt of complaint to conclusion 13 months.

From receipt of complaint, it took an average of 3.9 months for cases to be considered by the IC. For the 14 cases that

were concluded by the PCC, it took an average of 16.2 months from the start of the case to its conclusion. This average was affected by the length of time it took to conclude two serious criminal cases. These cases took 26 and 28 months each to conclude and resulted in the removal of both osteopaths. Setting aside these two cases, it took an average of 14.4 months from the start of the case to its conclusion.

Improvements to the process

In line with the Council's duty to regulate the profession and to manage complaints and concerns regarding an osteopath's fitness to practise, the GOsC must ensure that its complaints processes are clear and easy to follow. Last year we volunteered to take part in a mystery shopping pilot scheme, conducted by the CHRE. The purpose of this exercise was to find out how regulators handle the very early stages of a person expressing a concern about a regulated professional and to implement improvements if necessary. During the pilot, five telephone calls were made to the GOsC (see chart below).

can appeal the PCC's decision if they

think it was wrong

For further information on any of the issues raised in this report, contact our Regulation Department on 020 7357 6655 ext 236 or email: regulation@osteopathy.org.uk.

Overall experience

Overall, do you feel:	Yes completely	To some extent	Not at all	Total
Confident that your				
complaint was taken seriously?	5	0	0	5
Appropriate advice was given				
to you?	5	0	0	5
Information was relayed in a				
concisely and coherently?	5	0	0	5
Confident in the service				
provided?	5	0	0	5

On a scale of 1–10 where 10 is excellent and 1 is very poor, the GOsC was rated overall at 9.

In Council

Jane Quinnell, Governance Manager

14 October 2010 – 69th meeting of the General Osteopathic Council

RECRUITMENT CAMPAIGN FOR GOSC CHAIR

The current Chair of the GOsC, Professor Adrian Eddleston, will step down in March 2012. Advertising for a new Chair – who can be an osteopath or lay person – will start in June 2011 to enable an appointment by December and a handover/shadowing period.

FORUM FOR OSTEOPATHIC REGULATION IN EUROPE (FORE)

At a recent meeting of FORE, progress was made towards formalising European osteopathic standards with the European Committee of Standardisation. Once the work commences, there will be a Europe-wide standard for osteopathy, recognised by the European Commission, within three years (see page 13 for further details).

CUSTOMER COMPLAINTS POLICY

Council agreed the adoption of a new corporate complaints policy as at present there is only a policy for making complaints about individual staff members. The current process for making a complaint against a member of the governance structure, e.g. a Council Member, will be retained.

STUDENT FITNESS TO PRACTISE

Council received a report from the Student Fitness to Practise Working Group, which sets out draft guidance on student fitness to practise. Council agreed to informally consult with stakeholders on the draft guidance and noted plans for the recruitment of a specialist to develop guidance about the management of health and disability in training for the Osteopathic Educational Institutions (OEIs) and students.

OSTEOPATHS' ADVERTISING

The GOsC will shortly be providing individual advice to osteopaths whose websites could potentially be in breach of the UK Code of Non-broadcast Advertising, Sales Promotion and Direct Marketing (CAP Code) – as of 1 March 2011, the Advertising Standards Authority's remit also covers online marketing communications, including website content and social networking sites. The British Osteopathic Association is supporting the GOsC's work in this area.

OSTEOPATHIC PRACTICE STANDARDS

The consultation on the draft Osteopathic Practice Standards closed on 30 November 2010. Council received a report outlining the initial findings from the consultation and steps to be taken to develop a new Osteopathic Practice Standards document. Council is expected to approve the new Osteopathic Practice Standards, incorporating feedback from the consultation, at its April meeting (see page 12 for further information).

FITNESS TO PRACTISE REPORT

It was reported that the high number of complaints received in the early part of 2010 did not seem to be repeating itself this year, with only one complaint received up to the beginning of February. The Professional Conduct Committee is currently sitting more than once a month to deal with the high number of complaints, with a case to answer, made last year (see pages 6 and 7 for further information).

BUSINESS PLAN AND BUDGET 2011–12

The draft business plan, budget and risk analysis, based on the second year of the three-year Corporate Plan 2010–13, was approved by Council.

Although additional expenditure is planned in 2011–12 on scope of practice research, Osteopathic Practice Standards, security policy development and governance changes, savings have been identified on research activity, service contracts and more effective procurement. This means that no increase in fees is required. In addition, increases in VAT, insurance premium tax and National Insurance are also being contained through efficiency savings.

Work on the revalidation pilot project is funded by a grant from the Department of Health.

REVALIDATION

Council approved for publication two new documents that will inform the development of revalidation. The first of these is guidance on the latest assessment criteria and examples of evidence which will be used for the revalidation pilot, scheduled to take place later this year. The guidelines can be found at: www.osteopathy.org.uk/uploads/draft_revalidation_guidelines_pilot.pdf.

The second document is the survey, 'How do osteopaths practise?', which was carried out by KPMG to inform the impact assessment of the pilot. This report will be available shortly on the **o** zone: www.osteopathy.org.uk/ozone/my-registration/revalidation/researching-the-scheme/how-osteopaths-practise/.

Council also agreed a list of benefits and incentives for osteopaths who complete the revalidation pilot, including the award of a full year's worth of continuing professional development (see pages 4 and 5 for further information).

QUALITY ASSURANCE PRELIMINARY REVIEW

Revisions to the Quality Assurance Agency (QAA) Review Method Handbook and the annual reports submitted by the Osteopathic Educational Institutions (OEIs) are being undertaken as part of a review of the GOsC's quality assurance procedures. Council agreed that these will be published for a three-month public consultation by the QAA, which began on 18 February 2011. The consultation will be accessible via the QAA website (www.gaa.ac.uk) and the GOsC public website (www.osteopathy.org.uk/ about/our-work/consultationsevents/consulting-you/).



Future Council meetings

- > 12 April 2011
- > 14 July 2011
- > 11 October 2011
- > 26 January 2012
- > 17 April 2012

Meetings begin at 10am at Osteopathy House and agendas and papers for the public session are available on the GOsC public website (www.osteopathy.org.uk) or from Jane Quinnell, approximately 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.

Osteopaths join the Register under new powers

In April 2009, the GOsC acquired new powers to allow individuals who did not apply for registration in the initial two-year transition period (1998–2000) to join the Register. Potential registrants had until 31 December 2010 to submit their applications. During this time, we received 55 applications for registration under the new powers. Of those, four applications have so far been successful and the practitioners have since joined the Register. We also have a number of applications currently being processed.

These new powers were sought to address the potential unfairness to pre-2000 UK-qualified practitioners who were precluded from applying for registration once the transition period came to a close.

Applications received before 31 December 2010 will continue to be processed until an outcome has been reached.

Welsh Language Scheme consultation

A consultation on the GOsC's proposed Welsh Language Scheme opened at the end of March.

As a public body, the GOsC is required by the Welsh Assembly Government, under the Welsh Language Act 1993, to prepare a Welsh Language Scheme. The draft scheme explains how we propose to provide services to patients and members of the public who are speakers of Welsh. Responses are invited from anyone with an interest in our work.

Launching the consultation, GOsC Chief Executive and Registrar Tim Walker said:

"We are committed to treating the English and Welsh languages on an equal basis and this scheme sets out how we propose to do this.

"I would encourage everyone to have their say about our proposals by participating in the consultation."

The GOsC is consulting a wide group of stakeholders, including osteopaths, patients and the public, patient organisations, regulatory bodies and Welsh-speaking community contacts. Public notices have also been published in Welsh-language newspapers.

The consultation document is available to view and respond to on our public website at: www.osteopathy.org.uk/ about/our-work/consultationsevents/consulting-you/.

The consultation closes on 23 June 2011.

To obtain a paper copy, please contact the Osteopathic Information Service on 020 7357 6655 ext 242 or email: info@osteopathy.org.uk.

After the consultation closes, a report on the consultation and its responses will be prepared and sent to the Welsh Language

Board, which will approve the final scheme. We plan to publish the approved scheme in summer 2011.



The new o zone: how has it been received?

The o zone – the GOsC's dedicated website for osteopaths – was relaunched at the end of December 2010. Initial feedback has been positive, with osteopaths commenting that the new site "is really easy to navigate", that "the CPD section is much easier to use" and that "access to more research journals is a great innovation".





This is encouraging news for the GOsC as our main aims in developing the new site were to:

- > make it easier to navigate and use;
- > introduce a wider range of online services;
- > make practice guidance more accessible;
- > enable the site to be updated more swiftly and regularly; and
- > encourage more feedback and wider participation by registrants in our work

What does the new **o** zone offer?

- > An improved CPD area.
- > The introduction of online renewal of registration (see page 11 for further information).
- > A new package of online research resources for osteopaths, including the *International Journal of Osteopathic Medicine* (IJOM).
- > An automated forgotten-password facility.
- > An events diary.
- > A quick access feature on the home page providing direct links to specific pages.
- > Live consultations area. You can currently give us your views on the review of the quality assurance process for osteopathic qualifications and our proposed Welsh Language Scheme.
- > A dedicated revalidation section, with up-to-date information about the development of the scheme and the upcoming pilot (see pages 4 and 5 for further information).
- > Access to final-year students of osteopathy which will offer guidance on registering with the GOsC and getting established in practice.

Popular content

The most popular content on the new site remains the CPD sections and 'Update my details' page. Areas that have seen an increase in visitors include the 'Revalidation' section; 'Publications'; 'Practice guidance'; 'Registration'; and the Fitness to Practise bulletins.

New sections that are proving to be popular include the Events diary, the information for final-year students and 'IJOM Plus', our online research resources package.

As well as access to the International Journal of Osteopathic Medicine, the IJOM Plus page offers free access to six other health journals, special discounts on journals of interest to you, and discounts on hundreds of books within the health professions field. You can also set up free e-alerts, which automatically notify you when the latest articles in your areas of interest are published online (see page 17 for further information). In the first month that this package was live, there were 165 visits to that page, with 139 of you going on to access the IJOM Plus landing page on the Elsevier website.

Tell us what you think

We hope you will visit the **o** zone soon, take a look around, use the resources and send us feedback. There is a feedback and enquiries form on the 'Contact us' page, which you can access at the top of every page of the site.

We will also be carrying out a survey towards the end of the year to ask for your views about the relaunched **o** zone and ways we can further improve the site

For further information or to offer your comments and suggestions, contact Margot Pinder, Web Manager, on 020 7357 6655 ext 228 or email: mpinder@osteopathy.org.uk.

Renew your registration online

You can now complete and submit your renewal of registration form online via the o zone. This new service is designed to be quicker, and more efficient and convenient. You can also pay your fees online when making a single instalment – if you pay by existing Direct Debit your payments will continue to be taken monthly.



For the time being, you will still need to send us a copy of your professional indemnity insurance certificate – we are currently looking at ways this can also be brought online. However, if you have access to scanning facilities, you can scan the certificate and email this to: bbuckingham@osteopathy.org.uk.

To renew online:

1. Visit www.osteopathy.org.uk and click on 'Registrants' Log in' (top right-hand corner).

Enter your GOsC registration number (e.g. 2347) into the box marked 'Registration' and your password into the box marked 'Password'.

If you are logging on to the new **o** zone for the first time since its relaunch in December, your password has been set for you as your date of birth in the format dd/mm/yyyy – you must include both forward slashes when you type in your birthdate.

2. Once you are logged in, visit the 'My Registration' page, select 'Update my details' and then click on 'Annual renewal'.

On completion of the annual renewal form click '**Submit**', double-check your information is correct, and then click '**Continue**'.

3. Select 'Payment of fees' and follow the online payment instructions. A receipt will be sent to your email address.

Direct Debit payments: if you pay by existing Direct Debit, your charges will not be displayed on the website for payment. Your payments will continue to be taken on a monthly basis and details of your payment

schedule will be sent to you separately.

Feedback

We welcome your feedback on this new registration facility, which you can send to bbuckingham@osteopathy.org.uk. Your comments and suggestions will help us to improve our services.



On the move...

ICO opens new clinic

The Institute of Classical Osteopathy (ICO) has recently opened the London Centre for Classical Osteopathy (LCCO). The LCCO is situated in the Sports Therapy unit at London Metropolitan University's Science Centre and offers subsidised, low-cost classical treatment.

For further information, visit: www.lccoclinic.org.

OCC moves to Wandsworth

The Osteopathic Centre for Children (OCC) formally opened its new clinic in Wandsworth on 17 February 2011. The new premises offers improved access and reduces costs as part of the OCC's ongoing commitment to grow its services for families who are in need.

For further information, visit: www.fpo.org.uk.

Inverness osteopath removed from the Register

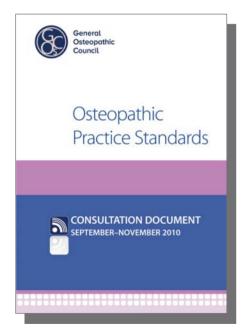
Mr Keith Grieve of Inverness has been removed from the GOsC Register on the grounds of unacceptable professional conduct. The Professional Conduct Committee (PCC) considered evidence of Mr Grieve's criminal convictions, which constituted a clear abuse of his professional position and an abuse of trust.

The full decision of the PCC is published on the GOsC public website at: www.osteopathy.org.uk/information/complaints/hearings/findings.

Osteopathic Practice Standards consultation –

what you told us

In February, the GOsC received the final report of the **Osteopathic Practice Standards** consultation from independent consultants Hewell Taylor Freed and Associates (HTF), which conducted the consultation on our behalf. To gather your views, HTF conducted around 100 interviews with osteopaths representing a range of different practice types, and hosted 12 focus group meetings across the UK involving a further 160 osteopaths. They took account also of 160 electronic and postal responses to the consultation document.



Responses from the consultation were very positive, with 97% of respondents agreeing that it was a good idea to combine the *Standard of Proficiency* and *Code of Practice* into one document. Over 70% of respondents also considered that the Osteopathic Practice Standards document was an improvement on the previous Standards and Code documents.

Many respondents wished to understand more clearly how the GOsC would apply the Osteopathic Practice Standards in our regulatory functions. Linked to this, there were concerns about the use of the word 'must' in the guidance.

Some other issues highlighted in the feedback are listed below.

The use of the term 'diagnosis'

Respondents pointed out that it is not always possible for an osteopath to make a definitive diagnosis, as further investigations or a trial of treatment can be necessary in order for the osteopath to properly understand the patient's problem. Some thought that it was not possible for an osteopath to consistently meet a standard that required a 'diagnosis'.

Civil proceedings and personal conduct

Feedback indicated concerns about the guidance that requires an osteopath to report to the GOsC if civil proceedings, relating to their practice of osteopathy, were issued against them. Some responses also raised concerns that an osteopath's conduct in his/her personal life may impact unfairly on their professional life.

Consent

The consultation generated much discussion about the guidance relating to the communication of risks and obtaining patient consent.

Areas of concern for osteopaths included how to identify and quantify the risks associated with osteopathic treatment and how to recognise when implied consent is sufficient or when verbal or written consent are necessary. There was also a call for clarity on the law relating to consent from children in all four UK countries.

The feedback report

The range and quality of the feedback on the draft Osteopathic Practice Standards received by Hewell Taylor Freed and Associates was exceptionally good and, subject to Council approval, it is the GOsC's intention to publish the full feedback report on our public website (www.osteopathy.org.uk).

We are extremely grateful to all osteopaths who took the time to consider the draft standards and provide invaluable insight and recommendations.

Next steps

The Osteopathic Practice Standards Working Group, charged with overseeing the development of the new standards, has now studied the consultation feedback in depth and will make recommendations to the Council for further revisions to the draft document.

If the Council approves the revised Osteopathic Practice Standards at its meeting on 12 April, the new document will then be prepared for publication this summer.



Building European cooperation

The Forum for Osteopathic Regulation in Europe (FORE) and the European Federation of Osteopaths (EFO) have for some time been looking at formalising osteopathic standards within Europe, not only to protect patients but also to ensure osteopaths across Europe can practise as autonomous healthcare professionals.



Voluntary standards do exist in the form of European Frameworks on standards of osteopathic education, training and practice* agreed by FORE and ratified by the EFO. These standards have attracted attention at an EU and national policy level but have no official status. The push for regulation is also competing with a number of conflicting priorities on European government agendas, along with attempts by influential lobbies of other professional groups keen to include osteopathy within their own scope of practice. This is why members of FORE and the EFO have been testing the feasibility of developing a European Standard with the official EU body for standardisation, the European Committee of Standardisation (CEN).

What is CEN?

CEN is made up of national standardisation bodies, such as the British Standards Institute in the UK, which collectively develop and agree EU-level standards on products and services. You will probably be familiar with the 'CE' mark denoting a particular product or service conforms to the European standard (Conformité Européen).

What is the status of a CEN Standard?

A CEN Standard for osteopathy would not affect those countries with national legislation regulating osteopathic practice, such as the UK. What it would do is provide patients with a benchmark standard of care they should expect from osteopaths in countries currently without any regulatory mechanisms. The GOsC would also be in a more informed position when considering registration applications from osteopaths trained in

another European country, and when advising UK osteopaths who wish to practise elsewhere.

Who is funding a CEN Standard on osteopathy?

The development of a CEN Standard is paid for by those taking the project forward. It is estimated that this will cost on average €12,000 per year. It is proposed that this be split between EFO and FORE member organisations.

As with all national osteopathic registers and associations involved in this project, the GOsC is likely to pay a proportion of these costs from existing funds; this could be in the region of €3,000.

Although we already have an agreed standard in this country, we feel it is essential to support the development of high standards across Europe and ensure that a CEN Standard for osteopathy does not conflict with standards of education, training and practice in the UK, allowing for greater professional mobility and more consistent standards of patient care. The British Osteopathic Association will also be contributing funds through its membership of the EFO.

How long will this project last before implementation?

On average, CEN Standards take around three years to develop, depending on how quickly a consensus can be reached. It would most likely go through different drafts and will be subject to two rounds of public consultation. The Standard would come into force six months after being finalised.

To help this process, and to keep costs down, we will be using existing documentation as a basis, including FORE's European Frameworks and standards developed by the EFO.

For more information about CEN, the development of European osteopathic standards, the work of FORE and practising elsewhere in Europe, please contact Sarah Eldred, Communications Manager, on 020 7357 6655 ext 245 or email: seldred@osteopathy.org.uk.

* European Framework for Codes of Osteopathic Practice, FORE 2007; European Framework for Standards of Osteopathic Practice, FORE 2007; European Framework for Standards on Education and Training, FORE 2008.



Protecting children and vulnerable adults

Arrangements in England, Wales and Northern Ireland

A report on the Government's review of the Vetting and Barring Scheme and broader criminal records regime has implications for osteopaths practising in England, Northern Ireland and Wales. The review was launched in response to concerns raised about the proportionality of the initial process to protect children and vulnerable adults.

The report recommends that the Vetting and Barring Scheme (VBS) continues, and applies to individuals carrying out activities which may involve regular or close contact with children and/or vulnerable adults These individuals will include osteopaths. However, you will not need to register with the VBS and there will be no ongoing monitoring.

The report also recommends that:

- > The Criminal Records Bureau (CRB) and the Independent Safeguarding Authority (ISA) should be merged to create a single agency that will provide a process for disclosing CRB checks and making barring decisions. The ISA is currently tasked with making decisions on whether an individual should be barred from working with children and/or vulnerable adults.
- > The new agency will be funded from the fees charged for CRB checks and it is recommended that the Government consult on

raising the cost of CRB checks.

- > Regulators (including the GOsC) and employers will still be required to provide information to the new agency on individuals who have demonstrated a risk of harm to children or vulnerable adults.
- > Two offences will remain under the new system:
 - > it will be an offence for a barred person to work with vulnerable groups in a regulated activity role;
 - > it will be an offence for an employer or voluntary organisation to knowingly employ a barred person in a regulated activity role.

These and other recommendations are contained in the Protection of Freedoms Bill, which is currently being passed through Parliament.

For more information, visit the Home Office website: www.homeoffice.gov.uk.



Government announces overhaul of healthcare regulation

Just four years after the last White Paper on the regulation of healthcare professionals, the coalition Government has announced a further overhaul of how osteopaths and others are to be regulated. Enablina excellence, published in February, sets out a series of proposals that will affect the GOsC and other professional regulators.

The main proposal is to simplify the complex legislative arrangements currently in place and instead allow regulators themselves to decide how they should exercise their powers and duties on behalf of the public and professions. These new arrangements would be balanced by new mechanisms for the scrutiny of regulators, such as the GOsC, by Parliament and the Council for Healthcare Regulatory Excellence, the body that oversees the work of the regulators.

The Government also wants to see regulators focusing on the costs of regulation with a strong message that it wishes to see registration fees frozen or, if possible, reduced. The GOsC Council will consider ways in which this can be done over the months ahead.

Although there are a number of health professions which have been lobbying for statutory registration, the Government has ruled out any new regulators being established. Instead it wants to see a system of 'assured voluntary registration' introduced under which any professional group could seek accreditation for a voluntary Register.

Finally, the document reaffirms the Government's desire to see further work developing an evidence base for revalidation, the work we are doing through the revalidation pilot (see pages 4 and 5). It also makes clear that it sees revalidation not just being about patient safety but also a means to increase the quality of care.

Future regulation of herbal medicine practitioners

Herbal medicine practitioners and traditional Chinese medicine (TCM) practitioners who supply unlicensed herbal medicines within their practice are to be regulated by the Health Professions Council (HPC), according to a Government report on the consultation it held on the future regulation of practitioners of acupuncture, herbal medicine and TCM in the UK.

The report sets out the Government's intention to establish a statutory Register with the HPC for practitioners wishing to supply unlicensed herbal medicine to ensure they meet specified registration standards.

The four UK health departments will consult jointly on the draft legislation before its implementation in 2012.

The Government also looked at practitioners of acupuncture and was satisfied that the existing mechanism of voluntary regulation was sufficiently robust.

The full report can be found on the Department of Health website at: www.dh.gov.uk/en/Consultations/ Responsestoconsultations/DH_124337.

GOsC wins case in Scotland against unregistered practitioner

In a breakthrough legal achievement for the GOsC, the Court of Session has ruled that Richard Sobande of Cameron Park Osteopathic Surgery in Edinburgh must stop describing himself unlawfully as an osteopath.

This is the first time we have used the civil courts to obtain an order preventing unlawful use of the title 'osteopath'.

Although Mr Sobande has never been registered with the GOsC, he has presented himself to the public as an osteopath, on the plaque outside his surgery, on notepaper, and in advertisements in the Yellow Pages knowing that he was breaking the law.

Previously, the GOsC has brought private prosecutions in England against anyone appearing to be in breach of the Osteopaths Act 1993, but this has not been possible in Scotland. This led us to lodge a petition with the Court of Session, resulting in an order from the

Court preventing Mr Sobande from using the title osteopath.

GOsC Chief Executive and Registrar Tim Walker, said:

"This ruling sends out an important message for public protection in Scotland, that no illegal practitioner in Scotland is beyond the law. We will continue to take action against anyone who unlawfully describes themselves as an osteopath, in order to maintain the reputation of the osteopathic profession and above all, to protect the public."

The judgement in favour of the GOsC can be viewed online at: http://www.scotcourts.gov.uk/opinions/2 011CSOH39.html.

With the passing of the Osteopaths Act 1993, it is an offence for anyone to claim to be an osteopath, unless registered with the GOsC.

Osteopathic education and training coming in from the cold?

Proposals from the Department of Health (England) on education and training could have important implications for the relationship between osteopaths and other health professionals. A consultation document called Liberating the NHS: Developing the Healthcare Workforce sets out proposals on workforce planning as well as the governance and funding of healthcare education and training.

As part of the proposals, a new body will be set up, called Health Education England, covering all regulated health professions (including osteopathy) which, working with the Centre for Workforce Intelligence, will look at national requirements across professions and coordinate how funding is allocated. It is not yet clear how this might impact on osteopathy as there is currently little NHS provision and, where there is funding of osteopathic education, this is only at an undergraduate level.

Nevertheless, this is an important opportunity for osteopathy to become involved in broader debates about future healthcare requirements, the numbers of health professionals, and how they train and practise. We are currently working on a response to the proposals (the final version will be published on the GOsC public website and the o zone) and coordinating a response with the British Osteopathic Association and the Osteopathic Educational Institutions to ensure that osteopathy is appropriately placed to be part of the wider healthcare debate.

Bringing fresh perspective to muscle energy technique

Robert Moran MHSc (Osteo), Co-editor of IJOM, and Nicholas Lucas MHSc (Osteo), Co-editor of IJOM

Seven years ago, we wrote an editorial called "The Seven Year Itch". Another seven years later and our message is the same: the profession of osteopathy and the patients it serves would benefit from a greater understanding of how to provide accurate diagnoses more of the time, and how to implement treatment that is as efficacious as possible. While keeping that goal in mind, the Journal also continues to publish a wide variety of papers and the contents of this issue are a typical example of the broad interests present within the readership.

International Journal of Osteopathic Medicine See Mind Journal of See Committee of See Com

Masterclass – an evidenceinformed update on muscle energy technique

Fryer's Masterclass on muscle energy technique (MET) in this edition is a great example of the profession organising itself and its knowledge base. While it is difficult to change the everyday behaviour of practising osteopaths, it is (perhaps) an easier task to help them understand how current knowledge does, or does not, support that behaviour. We are fortunate to have members of the profession who are dedicated to synthesising the current knowledge for us and providing us with interpretation. In his article, which we highly recommend you read, Fryer provides a straightforward summary of 'evidence-informed practice' - a concept that we believe many readers will appreciate as it strikes a balance between what is possible and what is practical. He then applies his description of evidence-informed practice to the topic of MET. While this paper only reflects a snapshot of the detailed information that applies to this area, it is sufficiently deep to quickly bring you up to date. The paper also includes a few direct challenges to the status quo for anyone involved in teaching MET, and we hope readers will enjoy the absence of the familiar dogma often associated with MET teaching texts and the freshness of statements such as "Sacroiliac dysfunctions proposed by Mitchell are clinical constructs, rather than definitive clinical entities" or "Practitioners should not assume every asymmetrical pelvis is dysfunctional and warrants treatment".

A revised look at normative rate in OCF – more fuel for the debate?

We also publish the findings of a study investigating the rate of the cranial rhythmic impulse (CRI). Sergueef and colleagues performed a retrospective review of 734 study participants, examined by practitioners with different levels of experience. The results are presented in terms of the palpated rate of the CRI reported by the examiners in three groups with 1, 2, or 3 to 25 years of experience. Those familiar with the literature will know that studies have shown palpation of the CRI to be unreliable, and this study, while not of diagnostic reliability, reports that each group tended to record a different CRI rate. For those readers who employ treatment based on OCF concepts, this paper will be of interest for its redefining of normative rate. For those readers who prefer their palpatory phenomenon served up with a basis of objective measurement, the paper is unlikely to move them any closer towards acceptance of the model.

Helical tensegrity and the geometry of anatomy

Also in this issue is a critical review of helical tensegrity as it relates to human anatomy by Scarr. 'Tensegrity' (a portmanteau of 'tension-integrity') seems to be attracting growing interest amongst authors from the manual therapy and

bodywork disciplines involved in the structural biology of connective tissues particularly those investigating the biological and clinical significance of fascia. Tensegrity has also been mentioned in various osteopathic texts and may provide a useful approach to viewing the musculoskeletal system other than classical Newtonian mechanics. Scarr reviews the structural mechanism of tensegrity as a potential explanation for the integration of anatomy from the molecular level to the whole body. In this detailed review, Scarr highlights many examples of anatomical structures that contain helical patterns.



Accessing IJOM online

Effectiveness of strategies to encourage a rural workforce

Workforce planning for osteopathy in the UK, Australia and New Zealand continues to be of interest to the professional bodies and regulatory authorities. There has been some concern and anecdotal reporting about difficulties in encouraging new graduates to consider moving outside of the major metropolitan areas where they trained. It's quite common to hear of rural and provincial practitioners reporting difficulties in attracting associates, despite good remuneration and working conditions. Of course, this problem is not unique to osteopathy and the same issues are also common to a range of health professions internationally. In the United States there is a well-documented shortage of physicians working in rural areas, particularly in family medicine and primary care. Many osteopathic medical schools in the US aim to produce graduates who will work in rural areas and use a range of strategies to meet this aim. In this issue, we publish a paper by Whitacre and colleagues that explores the effectiveness of some of these strategies in influencing the practice location of graduates. Although the paper will be of

most interest to those involved in health provision in the US, their approach provides a useful method of investigating this problem that could be employed in any country.

You can read all about the latest developments in osteopathic research in the March issue of IJOM, which is available now on the o zone. Simply log on to the site - www.osteopathy.org.uk/ ozone – 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 will also have access to case reports, continuing education and professional development articles and quizzes, self-assessment exercises, research and treatment bulletins, commentaries, book reviews and technical reports.

Online research resources

As well as online access to IJOM, you will be able to review six other Elsevier journals as part of a new package of research resources for osteopaths. These titles include: the Journal of Bodywork and Movement Therapies; Manual Therapy; The Spine Journal; the Journal of Manipulative and Physiological Therapeutics: Medicine: and Clinical Biomechanics.

Other benefits of IJOM Plus 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 'Flsevier Bookclub' on hundreds of books within the health professions field; and
- > 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.

Personalising your account

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, simply visit the 'Research journals' page on the **o** zone and access the Elsevier site from here Click on the 'Receive free email alerts' on the right-hand side of the page, registering as a guest by entering your email address and creating a password. From here, you can create your profile, set your email alerts and manage your personal account and services.

For further information, contact Brigid Tucker, Head of Policy and Communications, on 020 7357 6655 ext 247 or email: btucker@osteopathy.org.uk.





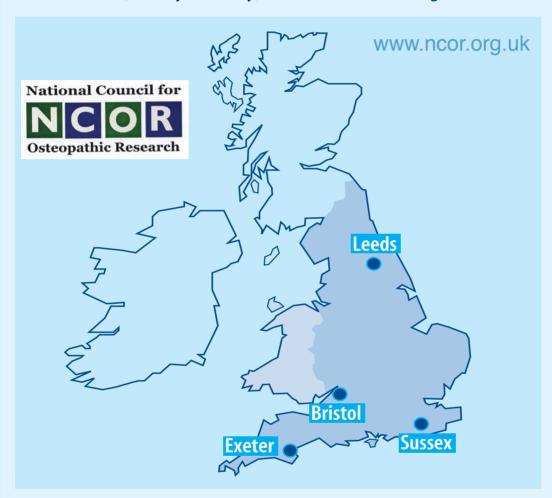


NCOR research hub news

In order 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–Thursday) or email: c.a.fawkes@brighton.ac.uk.



Conference calendar

> 6–9 May

Conference of the International Society for Complementary Medicine Research, Chengdu in Sichuan, China

More information can be found at: http://eng.2011iscmr.org.

> 26–28 May

11th Congress of European Federation for Research in Rehabilitation, Italy

Further information about the congress can be found at: www.efrr2011.it.

> 20-23 June

16th International World Physical Therapy Congress, Amsterdam, Holland

Further information can be found at: http://www.wcpt.org/congress.

> 14–18 September

Summer school on CAM research methodology, Potsdam, Germany

Further information and an application form can be found at: www.charite.de/epidemiologie/english/ag_witt_news.html.

> BRISTOL

Thursday 19 May 2011 7–9pm

The next meeting will look at the evidence concerning coccygeal pain.

> EXETER

Saturday 21 May 2011 10am-12pm

Further development of a study looking at career progression amongst osteopaths.

> HAYWARDS HEATH

See www.ncor.org.uk for the next meeting date.

> LEEDS

See www.ncor.org.uk for the next meeting date.

NCOR research conference

Over 100 osteopaths attended the NCOR research conference in Eastbourne on Saturday 26 February. A series of excellent and entertaining presentations was delivered by Dr Nefyn Williams; Dr Janine Leach; Professor Ann Moore; Dr Dawn Carnes; Mr Steven Vogel; and Dr Ian Drysdale.

NCOR has been asked by a number of groups and individuals if we will repeat the conference in the north of England. Discussion is underway with presenters and further information will be available on the NCOR website in due course.

A brief report of the conference can be found in the 'In the News' section of the NCOR website (www.brighton.ac.uk/ncor/news/index.htm).

Osteopathic studies investigating the management of infantile colic

Carol Fawkes, NCOR Research Development Officer

In the second part of a series examining the evidence associated with a range of childhood conditions that may be familiar to osteopaths, we look at infantile colic. This is a distressing condition for both parent and infant. Anecdotal evidence suggests that osteopaths treat infantile colic successfully, but limited published evidence is available on this topic. This summary highlights the findings from available literature.

Definition

A wide range of definitions exist for infantile colic. This can create problems when evidence is reviewed. In epidemiological studies, infantile colic has been defined in a number of ways with prolonged crying a constant feature. The most commonly accepted way to define prolonged crying is the 'rule of 3': crying during at least three hours per day on at least three days of at least three weeks^{1,2}. This is true when it occurs in an otherwise healthy and thriving baby. The crying starts typically in the first few weeks of life, and ends by age 4–5 months ².

Incidence of colic

The reported incidence of infantile colic is between 10% and 40% ^{3,4,6}; it causes one in six families to consult a health professional².

Methods of assessing colic

Different methods have been used to establish a diagnosis, including audiotape recordings, parental diaries, the Crying Patterns Questionnaire (CPQ), non-specified questionnaires, and personal or telephone interviews 78.9.

Osteopathic literature

A limited amount of literature exists on the management of infantile colic. A very thorough review of the literature was produced by Lim, 2005¹⁰. This study looks at the literature and discusses possible causes of an infant's symptoms from an osteopathic perspective.

The limited evidence is summarised in the table on pages 18 and 19. The most recent work, a study by Hayden and Mullinger in 2006 indicates some encouraging findings but emphasises the need for a much larger study¹¹.

Colic is also one of the symptoms reported by infants diagnosed with kinetic imbalance due to suboccipital strain (KISS) syndrome¹². This is a disputed condition for some healthcare professionals¹³. A list of the possible signs and symptoms for KISS syndrome are described at www.ewmm.net¹². Its management has been documented by Zweedijk and Bekaert, 2003¹⁴.

Other studies

Chiropractic researchers have investigated the use of chiropractic techniques in the management of infantile colic. This summary has looked at osteopathic studies and techniques used in osteopathy alone. A larger review of the evidence looking at all hands-on approaches to patients with infantile colic is currently underway.

The Cochrane Library has published the protocol for a review which is being undertaken by a team including two practising chiropractors. This can be found at: http://onlinelibrary.wiley.com/o/cochrane/clsysrev/articles/CD004796/frame.html.

In conclusion

It is clear that published research looking at the use of osteopathic approaches is extremely limited in terms of quantity and quality. Systematic reviewers have concluded that available evidence is weak and insufficient to recommend the use of manual therapy and other hands-on approaches in the management of infantile colic.

The most recent review by Lucassen (2009) examined studies on a large range of interventions: 27 systematic reviews failed to find evidence of effectiveness for any of the interventions studied. Unfortunately, the management of colic remains challenging for both parent and healthcare professional.

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Evidence relating to the management of infant colic

Citation	Research design	Number of participants	Interventions used/studied	
Lucassen PLBJ, 2009 ¹⁵	Systematic review.	A total of 27 systematic reviews were examined.	Increasing carrying of the infant; reduction in stimulation; casein hydrolysate milk; cranial osteopathy; crib vibrator device; focused counselling; gripe water; infant massage; low lactose milk; simethicone; soya-based infant feeds; spinal manipulation; and whey hydrolysate milk.	
Brand PLP, Engelbert RHH, Helders PJM, et al. 2005 ¹²	Systematic review.	No clinical trials were identified that evaluated the effect of manual therapy, osteopathy or chiropractic. Pooled analysis of two randomised controlled trials showed no statistically significant effects of the treatment of children with kinetic imbalance due to suboccipital strain (KISS) syndrome.	Manual therapy, osteopathy and chiropractic used in the management of symptoms presenting in infants diagnosed with KISS syndrome.	
Arikan D, Alp H, Gözüm S, et al. 2008¹ ⁶	Prospective and randomised controlled trial.	N=175 infants in Turkey aged between 4 and 12 weeks.	Massage. The use of sucrose solution, herbal tea and hydrolysed formula were also used in some arms of the trial.	
Hayden C, Mullinger B, 2006 ¹¹	Open, controlled prospective study.	N=28 infants between 1 and 12 weeks with infantile colic.	Cranial osteopathic manipulation.	
Colli R, Biagiotti I, Sterpa A, 2003 ¹⁷	Observational study of a large cohort of babies. No additional information is disclosed concerning the research design used in the osteopathic treatment of the babies.	N= 488 babies were observed between 1999 and 2001. The effects and safety of osteopathic treatment were measured on babies presenting prolonged crying and hyperactivity.	Osteopathic treatment. No information is given concerning specific techniques employed.	
Underdown A, Barlow J,Chung V, et al. 2008 ¹⁸	Systematic review.	A total of 23 studies were reviewed.	Infant massage.	
Searle L, 1988 ¹⁹	Case study.	N=1. A two-week-old baby who screamed for most of the day.	Cranial techniques were employed.	
Attlee T, 1994 ²⁰	Commentary.		Craniosacral therapy.	
Cole S, Reed J, 2010 ²¹	Literature review.	Total number of patients is not disclosed.	Osteopathic techniques in the management of a range of musculoskeletal and non-musculoskeletal conditions are reviewed.	
Gillemot B, 2008 ²²	Commentary.			
Clemons R, 2000 ²³	Commentary.			

Outcomes measured	Findings and general comments
The review examined both effectiveness and potential harm from treatment.	Examination of 27 systematic reviews failed to find evidence for effectiveness for any of the interventions studied.
Crying behaviour is the main outcome discussed.	The reviewers conclude that there is no evidence of beneficial effects for the use of manual therapy, osteopathy or chiropractic in the treatment of colic in patients diagnosed with KISS syndrome. There are, however, some contradictions in this study. The reviewers state initially that "soft", i.e. non-thrust, techniques are used and are cited in supportive evidence. However, their search focuses on the use of terms focusing on thrust techniques, i.e. spinal manipulation.
A daily diary was written by parents recording onset and duration of crying.	Massage yielded the least symptomatic improvement among all the interventions studied.
A 24-hour daily diary recorded the change in the amount of inconsolable crying, total time spent sleeping, and the time spent being rocked or held.	The authors report "a progressive, highly-significant reduction in crying (hours/24 hours) was detected between weeks 1 and 4. A significant improvement in time spent sleeping (11%). Treated infants required also less parental attention". This preliminary study suggests some benefit to infants with colic from cranial osteopathic treatment. This pilot work needs to be repeated with a much larger sample size to identify whether the findings can be replicated.
The outcome measured was symptomatic relief.	No adverse effects were reported. No other outcome information is disclosed.
These assessed the effect on growth, mother-infant interaction, rest and relaxation, reduced crying, and various physiological processes.	Nine studies providing primary data indicate that there is "some evidence suggestive of improved mother-infant interaction, sleep and relaxation, and reduced crying". The reviewers concluded that the results provide tentative evidence to support instruction on infant massage in the community in the first six months of life.
The osteopath diagnosed that the baby's parietal plates were dislodged, causing pressure on the cranium.	Case studies provide interesting information for clinicians but are regarded as a low quality of evidence in the hierarchy of research.
	The treatment of a number of childhood conditions is described. This is regarded as a low quality of evidence.
A range of outcomes are measured which are condition-specific.	The authors concluded that there is insufficient high-quality clinical trial evidence to advocate the use of osteopathic techniques in the management of infantile colic. The authors advocate the use of osteopathic treatment for low back pain.

Courses 2011

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.

June

> 1 - 2

The body bears the burden: Mind, brain and body in the transformation of trauma

Speaker: Peter Levine Venue: Windsor Suite, Columbia Hotel, London W2 tel: 020 8521 0709 email: info@breathoflife conference.co.uk website: www.breathoflife conference.co.uk

Simplifying the management of shoulder conditions

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

4 - 5

Energy medicine, frequency medicine and resonance: An update on the miracle of resonant interactions and quantum principles

Speaker: Dr James Oschman Venue: Skylight Centre, 49 Corsica Street, London N5 tel: 020 8521 0709 email: info@breathoflife conference.co.uk website: www.breathoflife conference.co.uk

The art and science of living inter-dimensionally

Speakers: Geoffrey Montague Smith and Peter Goldman Venue: Oxon Hoath, Hadlow, nr Tonbridge, Kent TN11 9SS tel: 0892 549 700 email: info@atman academy.co.uk website: www.atman academy.co.uk

10 - 13

Biodynamics 5 treatment of the head and neck

Speaker: Christian Sullivan Venue: Lendrick Lodge, Brig O Turk, Callander FY17 8HR tel: 07714 239 636 email: cranialgroupscotland @hotmail.co.uk

18 - 19

Osteopathy and obstetrics Speaker: Dr Stephen Sandler

Venue: The British School of Osteopathy, 275 Borough High Street, London SE1 1JE email: q.arnold@bso.ac.uk website: www.bso.ac.uk

18 - 19

Sensorial osteopathy – linking life substance and functional movement

Speaker: Jean Marie Beuckels Venue: European School of Osteopathy, Maidstone, Kent tel: 01622 671 558 email: corinnejones@eso.ac.uk website: www.eso.ac.uk/cpdcalendar.html

24 - 26

Dynamic basieranium

Course director: Liz Hayden Venue: Hawkwood College, Stroud email: info@sutherland cranialcollege.co.uk

25 - 26

Craniosacral therapy introductory weekend

Speaker: Michael Kern Venue: Skylight Centre, 49 Corsica Street, London N5 1JT tel: 07000 785 778 email: info@cranio.co.uk website: www.cranio.co.uk

Finding your feet

Speaker: Sarah Nesling Venue: Skylight Centre, 49 Corsica Street, London N5 1JT tel: 07000 785 778 email: info@cranio.co.uk website: www.cranio.co.uk

Craniosacral therapy introductory day

Speaker: Thomas Attlee Venue: London tel: 020 7483 0120 e-mail: info@ccst.co.uk website: www.ccst.co.uk

First aid appointed person

Speaker: Steve Bruce Venue: Skylight Centre, 49 Corsica Street, London N5 1JT tel: 07000 785 778 email: info@cranio.co.uk website: www.cranio.co.uk

Advanced ergomonics

Speaker: David Annett Venue: The British School of Osteopathy, 275 Borough High Street, London SE1 1JE email: g.arnold@bso.ac.uk website: www.bso.ac.uk

16 - 21

Craniosacral therapy introductory course

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

16 - 17**Clinical strain** counterstrain

Speaker: William H Devine Venue: Breast Cancer Haven, Effie Road, London SW6 1TB tel: + 34 93 480 25 15 email: info@advanced osteopathy.com website: www.advanced osteopathy.com

September

10 - 11

Osteopathic technique: Cervical spine, CD and **UEX**

Speaker: Professor Laurie Hartman

Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill,

London N19 tel: 020 7263 8551 email: cpd@cpdo.net

12-16 Osteopathy in the cranial field

Course director: Michael Harris Venue: Columbia Hotel,

London W2

email: info@sutherland cranialcollege.co.uk

22 How to treat: Tennis elbow

Speaker: Professor Eyal

Lederman

Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill,

London N19 tel: 020 7263 8551 email: cpd@cpdo.net

24 Pilates: the neck and shoulders in focus

Speaker: Susie Lecomber Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19 tel: 020 7263 8551

24 Sports taping of upper limb

email: cpd@cpdo.net

Speaker: Tom Hewetson Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19 tel: 020 7263 8551

tel: 020 7263 8551 email: cpd@cpdo.net

24-25

Integrated neuromuscular management of myofascial pain (trigger points)

Speaker: Leon Chaitow Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19

tel: 020 7263 8551 email: cpd@cpdo.net

October

Functional stretching: An active 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

7-9 Paediatrics post-pathway

Course director: Susan Turner Venue: Hawkwood College, Stroud

email: info@sutherland cranialcollege.co.uk

7-9

Applied kinesiology and nerve entrapment: How to unscramble hidden problems with AK

Speaker: Clive Lindley-Jones Venue: St. Hilda's College, Oxford University, Oxford tel: 01865 243 351 email: info@helixhouse.co.uk website: www.helixhouse. co.uk/ post_graduate _training_courses.asp

19-23 **Biodynamic craniosacral**

Speaker: Katherine Ukleja Venue: Skylight Centre, 49 Corsica Street, London, N5 1JT tel: 07000 785 778 email: info@cranio.co.uk website: www.cranio.co.uk

20 How to treat: Whiplash injuries

Speaker: Professor Eyal

Lederman

Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill,

London N19 tel: 020 7263 8551 email: cpd@cpdo.net

21-23

Pregnancy care

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

28

Fascia as a sensory organ: Basic research findings and implications for manual therapy

Speaker: Dr Robert Schleip Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19

tel: 020 7263 8551 email: cpd@cpdo.net

November

4-6 Rule of the artery course

Course director: Maxwell Fravel

Venue: Hawkwood College,

Stroud

email: info@sutherland cranialcollege.co.uk

5-6 Basic visceral: The thorax

Speaker: Joanna Crill Dawson Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19

tel: 020 7263 8551 email: cpd@cpdo.net

7-9

Advanced abdomen and pelvic

Speaker: Jean Pierre Barral Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19 tel: 020 7263 8551

tel: 020 7263 8551 email: cpd@cpdo.net

17

How to treat: Impingement syndrome of the 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

18-20 Harmonic technique

Speaker: Professor Eyal

Lederman

Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19

London N19 tel: 020 7263 8551 email: cpd@cpdo.net

19

The therapeutic relationship: Managing difficult situations

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

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.

The resource is open to all osteopaths running courses for their colleagues.

CLASSIFIEDS

RECRUITMENT

Torquay clinic requires an enthusiastic and confident osteopath for two days per week to develop an established list. Please contact Kevan on 07740 427 255.

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for an established Hertfordshire practice. Must be good with patients of all ages (including babies and children) and have confidence in all areas of structural osteopathic technique. Good networking and business skills an advantage, as pay is based on performance. Long-term position for the right candidate. Please send your CV and cover letter to office@tilsworthhealthcare.com quoting reference GOSCRS11.

Experienced, committed paediatric osteopath wanted for one afternoon a week during term times. Our busy clinic treats children with a wide range of interesting and complex conditions and additional needs in a caring and supportive environment. The clinic is based in Richmond, London. For further details, please contact Janice Moss on 07947 007 711.

N London/Highgate. An enthusiastic, experienced osteopath required to join a well-established busy clinic (Back Into Shape). Applicants should have at least two years' clinical experience. Opening is for Tuesday pm and Saturdays. Email covering letter and CV to:

bryan_david@hotmail.co.uk.

Cork City, Ireland – Enthusiastic and motivated osteopath required to work in primary care osteopathic practice in Cork City, Ireland.

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Acupressure and meridian massage. 10–12 June and 12 July 2011. 54 hours. £395.00. This course provides practical, 'hands on' training for anyone practising massage and joint mobilisation. For more information: tel 0115 983 5780 or visit www.sobsart.com.

Club Physio CPD courses in 2011. Dry needling modules 1–3: Midlands, nr Coventry: 25–27 June. London: 14–16 Oct. Dublin: 21–23 Oct. Midlands: 25–27 Oct. Course fees: £475. Dry needling modules 4 and 5: London, Ascot: 29–30 Oct. Course fees: £350. Myofascial Trigger Point Therapy courses: London or Midlands: 18–19 Oct. Course fees: £230. For more information or to book, visit www.club-physio.net.

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COMMERCIAL

Osteopathic clinic for sale based in Northampton. Operating from charming and attractive double premises. Comes with D1 planning permission. Two flats above – ideal for letting or owner's accommodation. Separate option available to purchase business and single premises. Turnover: £100,000 per annum. Freehold asking price: £525,000. Call RTA on 0161 975 1514. Quote reference M3524.

Practice for sale in historic market town in scenic part of the Dales. Two treatment rooms and spacious accommodation, with two part-time associates. Building valued at £160K, with annual turnover of £80K. For sale at £190K. Phone Peter Hairsine on 01833 630 640.



Dates	7 <i>rol</i> e	Lecturer	Cosz	Дерови
	Weekentl courses 10,00-1	7.00		
14 May	Cognitive behavioural tools in the management of LBP	Peter Gladmell	£125	£125
4 June	Simplifying the management of shoulder conditions	Prof. Eyal Lederman	£125	£125
10-11 Sept	Ostoopathie teehnique: Convical spine, CD and UEK	Prof Laurie Hartman	Ен ну доок	6 E)
24 Sept	Sports taping: The upper limb	Tam Hemetsan	£135	£135
24 Sept	Pilatos: The neek and shoulders in feeus	Susie Leca mber	£125	£125
24-25 Sept	Management and rehab of chronic politic pain (including politic girdle pain)	Lean Chaitair	£205	£150
1 Oct	Functional stretching: An active approach	Prof. Eyal Lederman	£125	£125
21-23 Oct	Prognancy care (Start time Friday 18.00)	Averille Margan	£385	£200
5-6 Nav	Basic viscorat The thorax	Jaanna Crill Dawson	£235	£150
19 Nav	Thorapoutic rolationship: Managing difficult situations	Tsafi Lederman & Jenny Stacey	£125	£125
18-20 Nav	Harmonio tochniquo (Start timo Friday 18.00)	Prof. Eyal Lederman	£385	£200
23-25 Nav	The new estee articular approach: Upper limbs	Jean-Pierre Barral	Енну доок	6-t ₁
	Evening courses 18 00-22	.gg		
28 April	Howto troat Trapozius myakjia and chronic nock pain	Prof. Eyal Lederman	£40	
12 May	Howto troat Frozon shoulder	Prof. Eyal Lederman	£40	
22 Sept	Hawta troat Tonnis olbow	Prof. Eyal Lederman	£40	
20 Oct	How to troat Whiplash injuries	Prof. Eyal Lederman	£40	
28 Oct	Faseia as a sonsory organ: Basic research findings and implications for manual therapy	Dr. RobertSchleip	£40	
17 Nav	Howto troat Impingoment syndrome of the shoulder	Prof. Eyal Lederman	£	×40

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Functional Technique



Functional Technique is a very gentle form of technique that relies to a large degree on palpation and responding to changes in the tissue tension. It is therefore suitable for all patients, particularly children, the elderly and acute conditions. The course is an introduction to evaluating and treating all areas of the body.

This two-day course is taught by Professor Stephen Tyreman, dean of Osteopathic Education Development and Professional Doctorate Course Leader at the BSO. The course replicates the optional unit taught to fourth-year students at the BSO in their Learning for Professional Autonomy (LPA) studies, allowing both new and experienced osteopaths to expand their knowledge in this area.

Date: Saturday 7 & Sunday 8 May 2011 Course fee: £200 CPD: 12 hrs

Low Back Pain Conference

With the publication in 2009 of the revised NICE guidelines for the treatment of non-specific low back pain, this conference provides a timely exploration of diagnosis and treatment of low back pain across manual therapies. The conference programme will look at exercise and rehabilitation, and the impact of manipulation.

With speakers from different healthcare systems, and cutting edge research, the BSO's Low Back Pain conference will ensure all delegates leave with confidence in current work in this key area of osteopathic practice.

Date: Saturday 14 May 2011 Course fee: £125 CPD: 7 hours

Sports Biomechanics and Muscle Chains (1 of 3 parts)



The first of a three-part series of workshops run by Robin Lansman DO, Tutor in the Sports Injury Clinic at the BSO. Sports Biomechanics and Muscle Chains aims to equip the practising osteopath with the tools to spot and approach a variety of myofascial muscle chain dysfunctions. The theory behind this one-day workshop enables participants to modify their approach to patients by adapting to a specific framework for assessing and planning patient care whilst utilising the most appropriate treatment tools with new insight, aiming to go further than merely equipping delegates with a few additional "tools".

Course Leader: Robin Lansman DO, Tutor in the Sports Injury Clinic at the BSO

Date: Saturday 14 May 2011 Course fee: £95 CPD: 6 hours

Advanced and Applied Ergonomics for Osteopathic Treatment

David Annett leads this advanced course in ergonomics for osteopathic treatment, building on skills developed through CPD courses and practical experience. The emphasis will be on applied practice, ensuring that participants can support their patients effectively in their work environments.

You would need to have attended a previous BSO Ergonomics course to be eligible to attend.

Date: Saturday 23 July 2011 Course fee: £125 CPD: 6 hours



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

For information on our postgraduate provision, please contact:

Jorge Esteves, Head of Postgraduate Studies and Student Research on 020 7089 5310 or i.esteves@bso.ac.uk.



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Please note that this course is designed for qualified osteopaths, who must be registered with the GOsC.

Obstetrics And Osteopathy

Dr Stephen Sandler is the leading osteopath working in the obstetric field. In this course he brings together years of practical experience with his doctoral research into physiological changes in pregnancy, and ways that these can be supported.

The two-day course introduces participants to the changes in maternal physiology during pregnancy, and the potential to use these changes to better effect in osteopathic practice. The ventilatory and cardiovascular systems will be examined, and practical sessions will be used to develop techniques and treatments for the ribs, diaphragm and mediastinum, and associated muscles of respiration.

The course explores weight gain and the link between kidneys, the pre-renal fascia and the psoas muscles, and the diaphragm and T/L junction. Practical sessions will focus on changes to the uterus and breast tissues. The course will also examine changes to the musculoskeletal system, postural changes and practical techniques to support the pelvis and lumbar spine.

Date: Saturday 18 & Sunday 19 June 2011 Course fee: £200 CPD: 12 hrs



Postgraduate Courses



The BSO is currently developing a portfolio of postgraduate programmes designed to enable osteopaths and other healthcare practitioners to develop their competence in the areas of research, teaching and specialist clinical practice.

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 2011 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 2011 Course Leader: Jorge Esteves

Professional Doctorate in Osteopathy

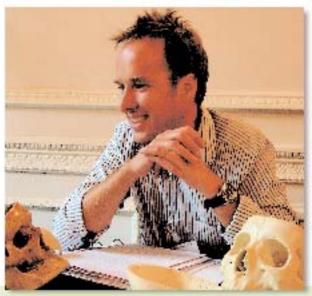
This doctoral degree programme offers the most advanced level of formal learning in osteopathy outside the USA. The course is designed for those who are keen and able to engage with the challenges thrown up by doctoral level scholarship and in-depth enquiry into a topic relevant to your professional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

Start date: January 2012 Course Leader: Professor Stephen Tyreman



Take part in the SCC Training Programme 2011

We offer an inspiring programme from beginner to advanced level



Date	Course details
Dates and location by arrangement	Foundation course A flexible two-day introduction to osteopathy in the cranial field, working with the involuntary mechanism to improve palpation skills. CPD: 16 hours 1:4 tutor to student ratio Fee: £275 Course Director: Alison Brown DO MSCC
jun+ 24-25	Dynamic basicranium An opportunity for in-depth study diagnosis and treatment of the dranial bony articular mechanism, looking at the often complex symptom patterns that we meet in practice. *Brilliant course, extremely well and professionally run, with just the right amount of challenge and support* CPD: 24 hours 1:4 tutor to student ratio Fee £859 Stroud, residential Course Director: Liz Hayden DO MSCC
September 12–16	A balance of theory and practical sessions helps students to develop palpatory and diagnostic skills using the involuntary mechanism and to learn treatment principles which can be used in practice to treat a wide range of patients. 'Great content' 'Excellent feedbackduring practicals' 'VERY well organised' 'A refreshing experience' CPD: 4 Ohours 1:4 tutor to student ratio Fee: £1185 London Course Director: Michael Harris DO MSCC
Hovember 4–6	Rule of the artery 'Helped improve my understanding of what I do; has given me more tools to work with' CPD: 32 hours 1:8 tutor to student ratio Fee: £775 Stroud, residential Course Director: Maxwell Fraval DO Aus

The SCC Pathway...

- Our entry level (module 1) and basic development courses (modules 2-3) provide a high standard of training
 in palpation of the Involuntary Nechanism (IVIN) and a grounding in osteopathic treatment approaches
- Module 4 is a useful bridge between structural and granial approaches using BLT to work with most joints.
 of the body.
- Our Pathway Courses (modules 5–9) are aimed at practitioners wanting to refine and advance their IVN skills and knowledge. These can be taken in any order.

Thinking CPD ... think ESO



Osteopathy for small animals - orthopaedics from an osteopathic perspective

Saturday 21 - Sunday 22 Way 2011 (14hrs CPD) Presented by Tony Nevin Cost: £270 (inclusive of lunch and refreshments)



Popular lecturer Tony Nevin returns to the ESO for this two-day course. Day 1 will cover problems associated with the axial skeleton and Day 2 the appendicular skeleton. On each day there will be a mix of theory and practical demonstrations, as well as delegate hands-on experience.

Tony blevin graduated from the ESO in 1988. He is the IMD and co-founder of Zoo Ost Ltd and provides osteopathic treatment for both people and animals. His smallest patients have been pipistrelle bats, with the largest being the African elephant. With the help of GOSC, he and a small group of osteopaths set up the Society of Osteopaths in Animal Practice. He now lectures to underand post-graduate students on the application of osteopathic principles applied to animal practice.

Sensorial Osteopathy - linking life substance and functional movement

Saturday 18 - Sunday 19 June 2011 (14hrs CPD)
Presented by Jean Warie Beuckels
Cost: £270 (inclusive of lunch and refreshments)



Still's idea about the substance of life as a matter behind the matter remains in today's esteopathy a controversial point. Based on the work of Danis Bois, PhD, professor at University Fernando Pessoa, Lisbon, a link between life substance and functional movement could be created: Sensorial Osteopathy. Jean Warie Beuckels provides a global introduction to Sensorial Osteopathy, presented in a course of four weekends. A brief theoretical background of the extended cytoskeleton and dynamic biomechanics, combined with neurology of motion and motion perception, will precede the practice of Sensorial Osteopathy. The sensorial handling itself will be explained on the musculoskeletal, visceral, cranial, arterial and neural levels and will be applied in practice.

Jean Marie Benckels works in private practice near Bruges (Belgium). He is head of osteopathic teaching at the Baltic College, University of Applied Science, and lecturer of osteopathic medicine at the medical faculty of the University Witten/Herdecke (Germany). In 2006, under his supervision, the first German university department of osteopathic manual medicine (OMM) was established, which he nowheads. He also lectures as a clinical assistant professor at the department of OMM at the Philadelphia College for Osteopathic Medicine, where he participates in collaborative research projects.

√8) Azi tzwiitatiozi to ospażet yoszi piactico ażet -



Breathing, BREATHING THERAPY AND CAPNOGRAPHY IN CLINICAL PRACTICE:

Local Friday 18 May 2011 and Smill Saturday 14 and Study 15 May 2011

securities Mr. Georg Gefollowing, DO, Dr. Robert Kinner BA (Hone) MA PAD and Dr. David Beder FRCP; MBCGP; DCH; Dip. Payde.

The Harilley Secont - The Laurelonne Chib, ? Pit continte Since, London 117 Feed Love 11 - \$120 GBP Level H - \$250 GBP

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These weakshops show you how to provide o bjective assessment, diagnose and manage patients who show patterns of intermittent and chionic breathing dysregulation.

For will be able to understand the factors that originate and autain dysregulated breathing. You will he able to educate patients about breating behaviour. and know how to normalise breathing chemistry. You will be able to introduce breath assessment to your. practice, educate patients about breath and its impact on physiology and health. You will understand the bestor of opmography and explore the benefits of direct measurement of CO2 and use breath retraining to receivabilità fue correct outbon dioxide levels. You will understand how to use CO2 feedback methods for assessing and doing breathing retraining and how equicipality may be a whichle adulate to your practice. You will have the basics to introduce it to your practice when you are ready. Participants, who choose to do so, will receive are dits to ward becoming a Certified Breefing Prestitioner (CBP) through LifeLogic ho. in Vancouver; Canada. Becoming a Certified Breath Practitioner to about integrating knowledge of requiretory dismistry with the medianics of breathing, where the boog eventure of Destroyer returned but on at atsautique body diemietry.







Diploma in Paediatric Osteopathy (DPO) - 2011 intake

Applications are being accepted for the Foundation for Paediatric Osteopathy's Diploma programme. The course provides an opportunity to work with leading practitioners in the field of paediatric estecpathy in a unique clinical environment.

This two-year course is designed to provide the necessary experiences, knowledge and skills to manage a wide variety of paediatric clinical presentations. Working within the Osteopathic Centre for Children will expose students to a diverse group of patients with conditions from commonly presenting coliday babies to abscure genetic syndrames as parents seek help from a d'inic which is recognised internationally by families for its expertise in this field. The dinical work also includes the apportunity to treat very sick and premature infants in a hospital neonatal intensive care unit. Tutorials and seminars support clinical teaching.

At the end of this course, the Foundation expects that every DPO graduate will be both confident and competent to treat and manage the full range of paediatric presentations.

Applicants must be registered with the General Osteopathic Council and have completed a postgraduate Sutherland Cranial Teaching Foundation (SCTF) approved course before October 2011.

A prospectus and details of the application process are available online at www.occ.lik.com.

Closing date for receipt of applications is 30th June, 2011.

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CPD @ AECC

Diagnostic Imaging

Update on the best dinical tests and diagnost imaging findings for patients with low back pair

Presented by: Cynthia Peterson

This is an interactive, case-based seminar footising with low back pain from various aetiologies.

Rehabilitation of Temporom Cervico-thoracic Disorders

Presented by: Clayton Skaggs

problems and maticesetting. This programme will uncover the myths regi-deliver a simplified approach that can be used

Gait Analysis

Presented by: Dr Brett Winchester

Many of todays practitioners have abandoned their gat an underestimating their grucial role in diagnosing and measure with patients.

are part of a ct-le range of GPD events and postgraduate courses to ex Former outh, so please contectus protestour crebatest ofind outmon



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oin our mailing list - register on

Postgraduate Training 2011

Fascial & Membrane Technique - Thorax, Abdomen & Pelvis Date: Thur 26 - Sun 29 May Teacher: Peter Schwind Pub. Ruller

Venue: Stillorgan Park Hotel, Dublin Cost: €715

FMT works directly with the bridges of connective tissue that surround the visceral system, the craniosocral system and the musculoskeletal system.

Neural Manipulation 1

Date: Fri 2 - Sun 4 September Teacher: Roberto Bonanzinga nn Venue: Stillorgan Park Hotel, Dublin Cost: €595

This is a specialised course focusing on the impact of whiplash. Study the three primary areas of trauma as they relate to whiplash: physical laws, evaluation and treatment.

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roged by Deborah Convoy & Its Schriever, GCHC Registered Ottecopaths



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'The Classical Osteopathic Treatment of the Infant and Child'



approximately five hours long and includes an introductory series of lectures and demonstrations by Mercyn Waltman and Christopher Batten (Cost £40)

The Institute of Classical Osteoporthy is a company limited by grandetes regentionnimbe 27500 and a regent during no 1000100 Register of Office 20 Mero Street Hondum West Street: RHI3 5DU



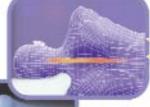
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The path to quality training

The Rollin B 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 tearn 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 B Bedker 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 for more details.



Train with the Rollin E. Becker Institute in 2011

Regional tutorials in your area - April 2011

Dates: 2nd, 9th, 10th April Venues: below Cost. £50 See website for further details

A number of four-hour tutorials are planned for early April 2011 in Wiltshire, Hampshire, Berkshire, Hertfordshire, Lancashire, London and the East Midlands.

The tutorial sessions are in a dinic setting which provides an ideal opportunity to consolidate and develop the practical skills learnt on a 40-hour/five day SCTF approved (equivalent to Level 1/2)*Osteopathy in the Granial Field course.

Cranial Anatomy

Date: 12th June Venue: L50 Course Leader: Carina Petter

A detailed exploration of the anatomy of the skull. This will include the bony structure and sutural anatomy, and the significant relationships between the skeletal, dural, vascular and neurological systems.

An opportunity to further your existing knowledge or as a primer if you are interested in taking part in a basic 40-hour course.

The Eye

Dates: 15-16 October Venue: London Course Leader

An exploration of the development of the visual system, the interaction between optometrical information between optometrical in the potential role of OCF in the treatment of coular disorders.

Guest lecturer Keith Holland is the UK's most experienced behavioural comment in

introduction to Paediatrics

Date: 14th May Venue: L50 Course Leader: Carina Petter

A one-day introduction to the ostequathic treatment of children and to help gain a deeper understanding of how osteopathic principles can help childhood disorders.

The day will look at the structural and functional implications of the birth process, ted flags in the early years of life and common presentations of childhood conditions. Includes a two hour practical for those delegates who have previously attended such a course (with any SCTF-approved provider).

Palpation

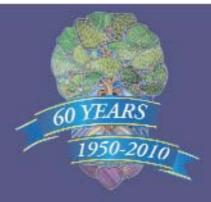
Date: end How/early Dec Venue: TBC Course Leaders: Carol Plumridge and Carina Petter

An experiential course to look at gaining a greater understanding of how we palpate and make sense of what we feel.

There will be discussion of the concept of tissue quality, how we quantify it and how understanding what it is helps us to treat more accurately and get better results.

Call 0845 5193 493 or visit www.rollinbeckerinstitute.co.uk

for registration and updated course information



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Quality assurance consultation

We are inviting views on proposed changes to our undergraduate education quality assurance processes.

The GOsC sets and maintains standards of osteopathic education and training to ensure graduates are competent and safe to practise.

The consultation documents and questionnaire are available on the Quality Assurance Agency (QAA) website until Wednesday 18 May 2011.

Visit: www.qaa.ac.uk/health/GOsC/consultation/default.asp.

Further information is also available on the GOsC public website: www.osteopathy.org.uk.