



General
Osteopathic
Council

BOUNDARIES
APPLYING THE
OPS IN PRACTICE

NEW CPD
OBJECTIVE
ACTIVITIES

RESEARCH FOR CPD
A GUIDE TO USEFUL
RESOURCES

The **Osteopath**

Supporting high standards in osteopathic practice

JANUARY/FEBRUARY 2019 | VOL 22/ISSUE 1

CONCERNS FALL TO FIVE-YEAR LOW

BUT COMMUNICATION AND CONSENT STILL MAIN ISSUES





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The GOsC is a charity registered
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The Osteopath

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Design and production

The Osteopath is designed on behalf of the GOsC by Immediate Media Co.
www.imcontent.co.uk

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ISSN 1466-4984

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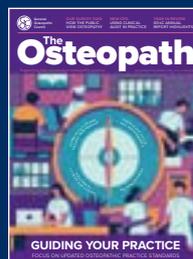
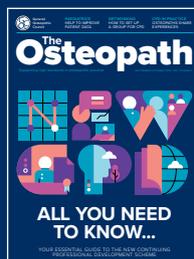
Education, standards and new CPD scheme

Osteopathic education, the Osteopathic Practice Standards, the new CPD scheme, policy development and research, enhanced patient partnership, patient care and patient safety.
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x230 or x233

Registration

The current CPD scheme and CPD audits.
cpd@osteopathy.org.uk
x235

Applying to the Register, annual renewal, registration fees, updating your details, practising status and professional indemnity insurance.
registration@osteopathy.org.uk
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Welcome



The number of concerns about osteopaths is at a five-year low, according to the latest sector-wide report on types of concerns. While this is good news, issues relating to communication and consent are still causing the most concerns. Read an analysis of the report, with learning points that all osteopaths can think about for CPD and professional development, on p7.

If one of your new year resolutions is to connect more with other osteopaths, you can read how Emily Moss reached out to osteopaths in her area (p14) and you'll find ideas and resources to help you join or set up a new group, on p15. An objective activity is a requirement for the new CPD scheme and some osteopaths have told us that they're not quite sure exactly what this means. Check out the concise guide on p12. Are you currently using research for your CPD and professional development? Find out some easy ways to access and use research, from p18. In our Focus on standards this issue, we explain the guidance on boundaries in the updated Osteopathic Practice Standards, see p16.

Looking to the future, we welcome Leonie Milliner, who will join the GOsC as the next Chief Executive and Registrar, in March (p4). This means we say goodbye to Tim Walker, who looks back over his eight years in the role, as he hands over to Leonie (p6).

Please take 10 minutes to take part in our 2019 readers' survey (p5). Your feedback in last year's survey has been very useful in helping us develop the magazine and other communications, and we'd appreciate your participation this year.

Clare Conley

Managing Editor

Email: editor@osteopathy.org.uk

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Update

January/February 2019

NEW APPOINTMENT

Leonie Milliner to join the GOsC as next Chief Executive

Leonie Milliner will take over as GOsC Chief Executive and Registrar, when Tim Walker stands down, in early March 2019

Leonie will join the GOsC from the Association for Nutrition, where she has led professional regulation for Registered Nutritionists, as Chief Executive. She has previously worked for the Royal Institute of British Architects (RIBA) and has extensive experience and knowledge of the education sector. Leonie also brings relevant experience from her non-executive career, including with the General Pharmaceutical Council, Nursing and Midwifery Council and the Quality Assurance Agency for Higher Education.

Leonie said: "I'm delighted to be joining the GOsC. It will be a huge privilege to serve as Chief Executive and Registrar at a time of enormous challenge and change for regulated health professionals. I look forward to bringing my experience in the regulation of Registered Nutritionists to the GOsC, for the benefit of patients, taking forward the work of current Chief Executive and Registrar, Tim Walker."

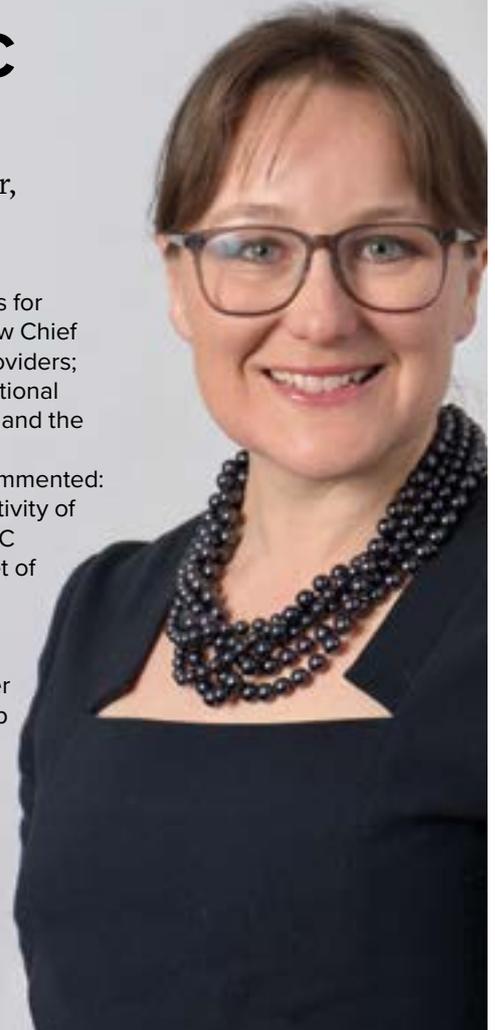
Many key stakeholders from organisations across the osteopathic sector, were

involved in the recruitment process for the appointment of the GOsC's new Chief Executive, including: education providers; the Institute of Osteopathy; the National Council for Osteopathic Research; and the Osteopathic Development Group.

GOsC Chair, Alison J White, commented: "Leonie will bring energy and creativity of thought to the role, which the GOsC Council feels is critical at the outset of its next corporate plan."

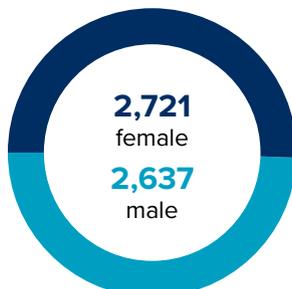
Alison added: "I would also like to thank Tim Walker for his tremendous work at the GOsC over the past eight years. His leadership of the GOsC has led to increased patient safety and public protection, and the development of the osteopathic profession through raising standards and collaborative work."

Read Tim Walker's reflections on his eight years at the GOsC, on p6



SNAPSHOT

REGISTER STATISTICS: 6 DECEMBER 2018



NEW CPD

Look out for your CPD pack

New CPD scheme packs will be sent to each osteopath three months after you join the new scheme

To help you transition to the new scheme, we will be posting out a CPD pack. Our aim is to give you helpful information, useful tips and plenty of links to further help and resources on: cpd.osteopathy.org.uk

The new CPD scheme officially launched on 1 October 2018, but osteopaths are joining at different times, depending on their renewal dates. We are writing to each osteopath with detailed information about the requirements of the new scheme as they join it, then, three months after you join the new scheme, you should also receive your CPD pack.

As well as providing tips and guidance, the pack will help remind everyone that they are now on the new scheme.



■ The Your Guide to the CPD Scheme booklet will be in the mailing

- If you want a sneak preview of the booklet that will form part of the mailing, see: cpd.osteopathy.org.uk/yourguide
- Find out more about when you will join the new scheme at: cpd.osteopathy.org.uk/when-do-i-join

NEW CPD

Keeping CPD records: new workbook

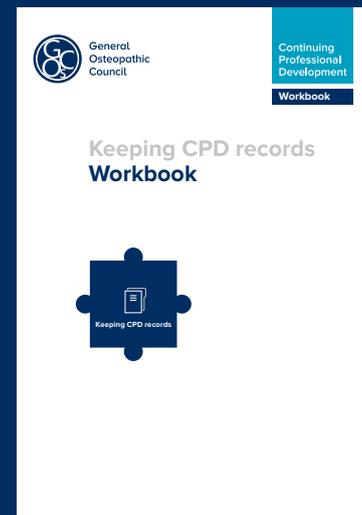
This new workbook has been prepared to support and advise you on the options available for keeping your CPD records

You might choose to keep your records in the o zone, making use of the new online CPD Diary, designed to help you keep track of your CPD, or you could try a different method. It's up to you to decide what suits you best and this Workbook helps you look at the options.

The new CPD scheme, which launched on 1 October 2018, introduces some new requirements, but the requirement to keep a record of your CPD activities is unchanged.

As part of the new scheme, you will need to share your CPD records with a peer before your Peer Discussion Review towards the end of the three-year cycle.

The 'Keeping CPD Records' Workbook covers:



- The features of the new CPD scheme
- Methods of recording your CPD activity
- Things to consider when keeping your records
- Linking to the themes of the Osteopathic Practice Standards
- Lots of useful links and resources.

The Keeping CPD Records Workbook is available in PDF and in editable Word format in the Keeping Records section of the new CPD site, at: cpd.osteopathy.org.uk/themes/keeping-a-record

THE OSTEOPATH

Help us shape the future of The Osteopath magazine

Our reader survey is now open – take part to help us develop the magazine, and you could receive a John Lewis voucher

The Osteopath magazine is one of the main ways the GOsC communicates with osteopaths. We want to make sure you are getting the information you need, especially as you start the new CPD scheme and begin familiarising yourself with the updated Osteopathic Practice Standards.

We would like to know which articles you find most useful. What would you

like to read about this year? What do you think of the new design of the magazine?

We have four £25 John Lewis vouchers which will be allocated randomly to participants, as a thank you for your time. But you can still respond anonymously if you prefer.

Please tell us what you think. You can share your views now at: bit.ly/TO-readers19



Looking back and ahead



GOSC Chief Executive and Registrar **Tim Walker** is stepping down at the end of February. Here he reflects on his eight years at the GOSC

When I first wrote for The Osteopath magazine in autumn 2010, I said it was a privilege to become the GOSC's Chief Executive and Registrar. Not only have the past eight years been a privilege, but working for the GOSC and with the osteopathic profession has been a highlight of my career.

I started out with a commitment to meet as many registrants as possible, and I have valued the opportunity to meet thousands of osteopaths at regional meetings, conferences and in their practices. It is only by gaining this insight into the day-to-day work, and listening to the hopes and fears of the profession, that we can aspire to be an effective regulator.

Recent initiatives, particularly the development and launch of the new CPD scheme and publication of the updated Osteopathic Practice Standards, have been better designed and, I believe, will be more effective because of the constructive input of many osteopaths from across the profession.

I also hope that through collaborative working with the profession, we have not only supported the development of the profession, but have also engendered greater understanding and cooperation among its diverse groups. It is great to see organisations – ostensibly with little in common – now working together on shared projects and with shared goals.

Among the highlights of the past eight years have been, for me: the development of the osteopathic leadership programme; seeing NCOR develop a new approach to evidence and research in osteopathy;

helping the Osteopathic Foundation be reinvigorated as a grant-giving trust; supporting the Institute of Osteopathy to gain Allied Health Profession status for osteopaths, and working with European partners on setting common EU-wide standards. I was also really pleased that early on in my time at GOSC, we were able to reduce the registration fees paid by osteopaths by 25%.

Some might say that elements of the broader work that we are involved in is not directly relevant to regulation, but I disagree. I have always believed that a stronger profession with well-developed institutions, providing effective support for the osteopathy profession, is essential to ensuring better outcomes for patients.

I often reflect that you don't become a regulator to be popular, but I hope that we have managed to change the nature of the dialogue between the regulator and the profession. There will always be some tension between regulators and the regulated, but I believe we all share a common goal, which is ensuring the highest standards of care for patients.

I would like to take this opportunity to wish Leonie Milliner, the new Chief Executive and Registrar, the very best for her time at GOSC. I am sure Leonie will bring new ideas and new energy to the role. I would also give my thanks to all those who have supported me at the GOSC; the Council, its committees, and my amazing staff team.

The past eight years have given me a great appreciation for what osteopaths and osteopathy can do (both collectively and occasionally for me personally), and I wish the profession well for the future. ●



■ Over eight years at the GOSC, Tim has met thousands of osteopaths around the UK

'We all share a common goal, which is ensuring the highest standards of care for osteopathic patients'

Cause for concern?

A new sector-wide report shows that while overall concerns have fallen to a five-year low, communication and consent problems are still the largest cause of complaints



‘All osteopaths could make use of the report to consider aspects of their own practice and to help when planning their CPD’

The number of concerns, claims and complaints against osteopaths has fallen to a five-year low according to a recent report published by the GOsC in conjunction with the National Council for Osteopathic Research (NCOR).

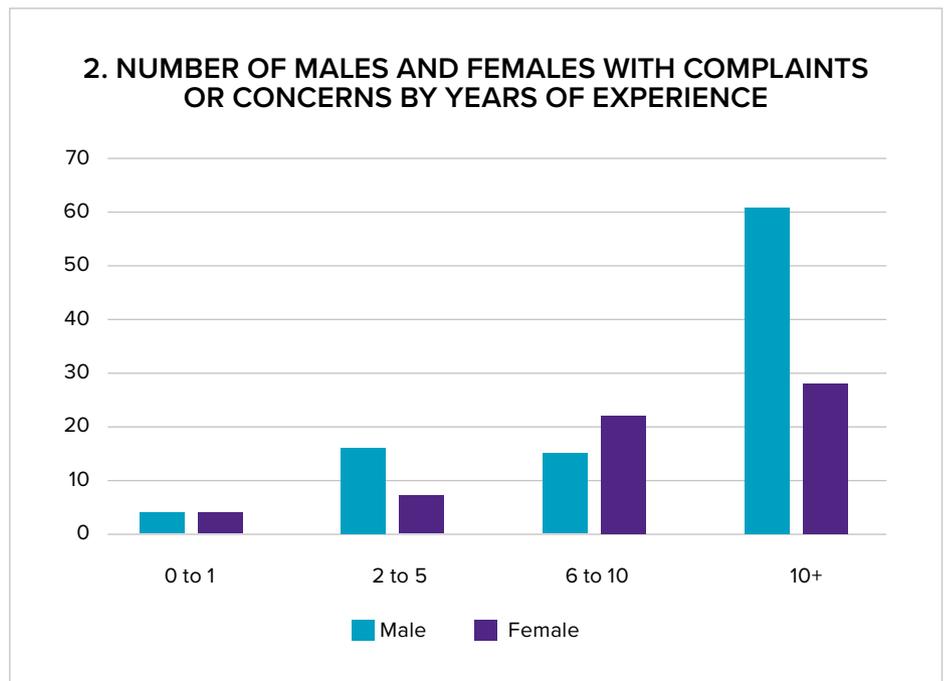
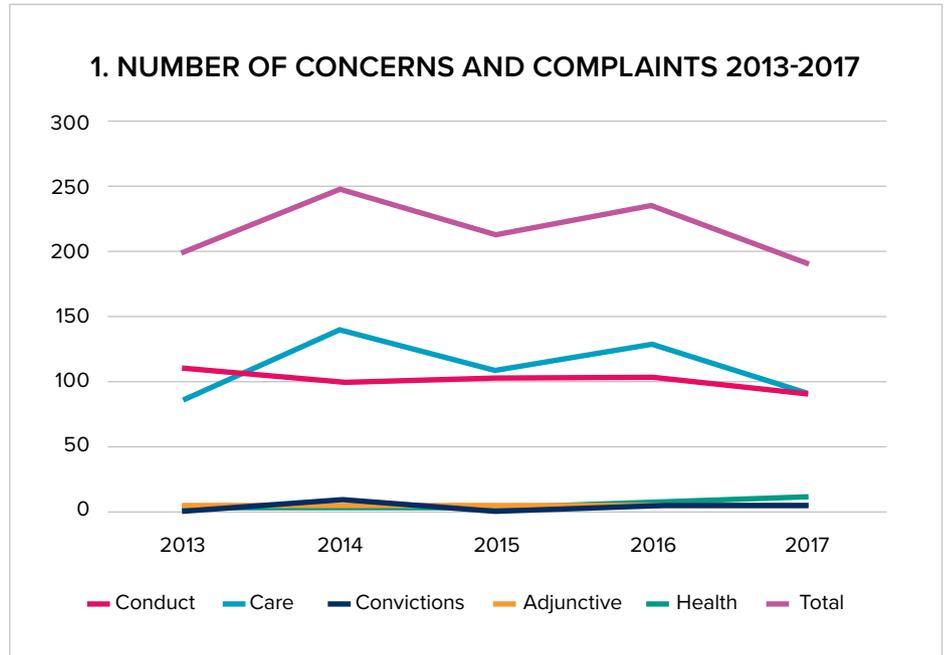
Over the past five years a joint initiative has been undertaken by the GOsC, the Institute of Osteopathy and the three major providers of professional indemnity insurance, to track trends in concerns raised about osteopaths. Data is collected by each of the organisations about complaints and claims made, as well as informal concerns raised about practice. All of the data is coded using a common classification and then aggregated into a single anonymised data set by NCOR.

This collaboration is unique to the osteopathic profession and provides valuable feedback for osteopaths, students and educational providers.

This year’s data (2017) shows a fall on each of the preceding four years with the total number of concerns – 191 in all – falling below the 200 recorded in 2013. This is also encouraging because over the past five years the GOsC Register has grown by approximately 10%.

95% of concerns relate to conduct or clinical care

Every year the majority of concerns – around 95% – relate to conduct or clinical care; with criminal convictions, complaints about adjunctive therapies and health matters only registering small numbers. The headline trends over the past five years can be seen in graph 1 above.



Insight into osteopaths who receive complaints

The data also provides insight into the characteristics of those who are subject to complaint or concern. Data about gender and time in practice has only been collected for the past two years.

However, what we do see is a higher proportion of complaints and concerns about male osteopaths, and a higher proportion among those who have been in practice for ten or more years. Graph 2, above, shows this data.

What we don’t know at the moment –

and would like to research further – is whether female osteopaths (who are more likely to work part-time) may be seeing fewer patients, and whether we can obtain more insight into the points in an osteopath’s career when they are most at risk of receiving a complaint.

References

1. Carnes, D. (2016) **What can osteopaths learn from concerns and complaints raised against them? A review of insurance and regulator reports**, International Journal of Osteopathic Medicine 22, 3e10. <https://doi.org/10.1016/j.ijosm.2016.07.002>



Which issues are most likely to lead to claims, complaints or concerns?

Communication and consent

In relation to concerns about conduct of osteopaths, every year since the data collection and analysis began, the largest categories have related to communication and consent, with between one third and one half in this area. In 2017 this has dropped from the previous year, but the single biggest category continued to be 'communicating inappropriately', followed by 'failure to obtain valid consent/no shared decision-making'. It is because of ongoing concerns in this area that the GOsC has chosen to focus on communication and consent as a compulsory feature of the new CPD scheme.

Failure to protect dignity

There is also a continuing trend in concerns raised about 'sexual impropriety' or 'failure to protect the patient's dignity/modesty'. In 2016 there was a welcome drop off in concerns and complaints in this

area, but this picked up again in 2017. We know that sometimes concerns can arise from a lack of effective communication between osteopaths and patients but, in all instances, these concerns should be avoidable.

Concerns raised about clinical care

When we look at the concerns raised about clinical care by osteopaths, there are two areas that stand out. These are:

- 'treatment causes new or increased pain or injury' (38%)
- 'inappropriate treatment or treatment not justified' (18%).

Again these suggest some element of poor communication. We know from other research that around 30-50% of patients will experience transient mild to moderate worsening of symptoms after their treatment⁴(see p8), so it appears logical that communicating this to patients as part of the informed consent process could help to reduce the potential for complaints.

6 learning points from the research

1 Remember, most complaints are avoidable. Where possible, you should seek to resolve any concerns at a practice level to avoid escalation to the GOsC or your insurer.

2 Use this research report to identify any circumstances where you may have had a 'near miss' and reflect on what you might do differently in future.

3 It is often those who have been in practice longer who have concerns or complaints raised about them. Take time to think about any areas of your practice which may need enhancing.

4 When thinking about your CPD in communication and consent, don't just focus on the consenting aspects, think about the way you interact verbally and non-verbally with patients.

5 Why not spend some time being observed by a colleague (and vice-versa), so you can compare and improve aspects of each other's practice? Peer observation counts as an objective activity, for the new CPD scheme.

6 If you integrate other treatment methods into your practice (such as acupuncture), be sure that you communicate this effectively to your patients and obtain valid consent for any adjunctive treatments.

READ THE FULL REPORT

The full research report contains more detail and can be read at: osteopathy.org.uk/concerns-report-2018

All osteopaths could make use of the report to consider aspects of their own practice and to help when planning their CPD. The data collection is continuing and the report for the analysis of 2018's results will be published later this year.

New CPD: your views



How prepared do you feel for the new CPD scheme?
Fiona Browne, GOSC's Director of Education, Standards and Development, outlines what you've told us so far

In early 2018, more than 500 osteopaths took the time to complete our second CPD Evaluation survey. It gave them the opportunity to reflect on their own CPD and the new CPD scheme, and helped us understand more fully how to help osteopaths participate successfully in the scheme.

But when we looked at the participants, we discovered that fewer younger osteopaths and fewer male osteopaths had taken part in the survey. So Dr Stacey Clift, Professional Standards Officer, invited a sample of 156 osteopaths which included an increased proportion of younger and male osteopaths to take part in a 10-minute phone conversation. The aim was to explore how they felt about the new CPD scheme and to check if the findings would tell us anything different to the main sample.

We are very grateful to the 24 osteopaths from this group who we were able to speak to. We asked them the following:

- How aware or prepared do you feel for the new CPD scheme?
- Have you undertaken any of the new features of the new CPD scheme yet?
- Do you have any questions about the new scheme?
- Any challenges or concerns about the new CPD scheme?
- What support from us would help you

to engage with the scheme?

This is what they said when we spoke to them in August/September 2018:

Awareness, understanding and preparedness for the CPD scheme

10 responses (41%) indicated a high level of awareness (scores of 9 or 10) and 2 responses (8%) show a score

of 1 or 2, indicating a small, but still significant level of unawareness or preparedness for the scheme.

Both the CPD telephone survey and the main CPD survey earlier in the year showed a similar level of awareness of the scheme. Views around preparedness in the telephone survey were mixed, with some osteopaths saying they



CASE STUDIES

Your views:
new CPD siteSee: cpd.osteopathy.org.uk

“I think the CPD website is absolutely amazing and I felt very reassured by it.”

Paula Collier-Ward, osteopath, Derby



‘The resources on the new CPD website allowed us to reflect and learn more by enabling structured case-based discussions.’

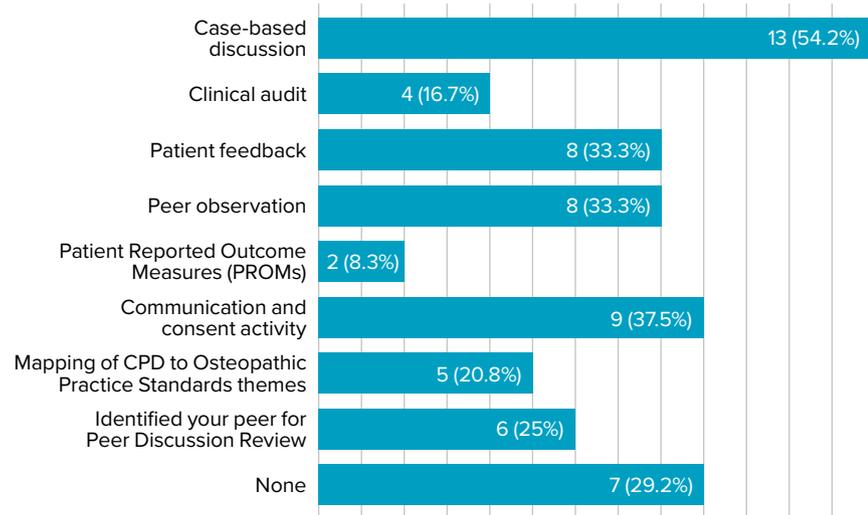
Hugo Saad, osteopath, Liverpool



“The new CPD website is a much welcomed resource, which will be of great assistance to the group”

Kenneth McLean, Edinburgh Osteopathic CPD group

HAVE YOU UNDERTAKEN ANY FEATURES OF THE NEW CPD SCHEME YET?



Multi answer: Percentage of respondents who selected each answer option (eg 100% would represent that all this question's respondents (24) chose that option)

feel unprepared, and some that they feel prepared.

Trying out new features

As the table above shows, only 29% of the osteopaths in the telephone survey had not tried out any aspects of the new CPD scheme. This compares to 75% of osteopaths in the main second CPD survey in early 2018, who said they had not yet tried out specifically an objective activity. This could suggest that more osteopaths are trying out the objective activities as they move closer to the start date of the new scheme.

The most popular new CPD scheme activities as revealed by both the main CPD survey and the additional CPD telephone survey, are: case-based discussion; patient feedback; peer observation; and activities in communication and consent. (See p12 for more on objective activities).

A lower proportion of osteopaths in the telephone survey have linked their CPD to the Osteopathic Practice Standards (OPS), so we'd like to find out more about what resources would help osteopaths feel more confident to do this. See the November/December 2018 *The Osteopath* [bit.ly/TheOsteopathNovDec2018] for a guide to the updated OPS and p16 of this issue.

Identifying a peer

The CPD phone survey showed that six respondents (25%) had identified their

peer for the Peer Discussion Review. In contrast, 64% of osteopaths in the main survey responded 'yes' to the question: 'Have you identified or begun to think about who might be your Peer Discussion Reviewer under the new scheme?'

 **Action point:** Think about what is important to you in selecting a peer and how you might find that person. Also see: 6 things you can do to start preparing for your PDR, on p17 of the September/October 2018 CPD launch issue of *The Osteopath*: bit.ly/TheOsteopathSeptOct2018. ●

WATCH OUT FOR THE THIRD CPD EVALUATION SURVEY IN MARCH

Take the opportunity to reflect on and plan your CPD, by taking part in the third CPD survey, coming this spring. We are keen to hear from as many osteopaths as possible so pop it into your CPD plans now. By taking part you will be providing us with information to help us develop the right resources that suit your needs and to support you to participate successfully in the new scheme. Look out for more information in the March/April 2019 *The Osteopath*, the monthly GOsC ebulletins, the GOsC website and on our social media channels.

What is an objective activity?



An objective activity is one of the requirements of the new CPD scheme – but what does this actually mean? Managing Editor **Clare Conley** explains

What is an objective CPD activity?

An objective activity is any CPD activity that involves you getting feedback on your practice as an osteopath, which then enables you to analyse and reflect on this to show how it has informed your practice. This activity might include: a case-based discussion, patient feedback, peer observation or clinical audit.

How many objective activities will I need to do?

You'll need to carry out at least one objective activity over the three-year cycle but you can choose to incorporate more objective feedback into your CPD. Osteopaths have found that they have enjoyed discussing and getting feedback about cases from colleagues or from their patients and are choosing to do these activities more often.

Can I get objective feedback on other aspects of my role?

Yes, it doesn't only have to cover clinical practice. For example: a teacher getting feedback from students; a CPD group organiser getting feedback from members, or a performance appraisal at your practice, could also give you objective feedback to meet this requirement.

Where can I find out more about objective activities?

You'll find objective activity workbooks, templates, case studies and other resources on the CPD microsite at: cpd.osteopathy.org.uk/themes/objective-activity – you can filter by objective activity and type of resource. ●

Here are some options you might want to try



You could get feedback from peers

Case-based discussions

Discussing a particular case with a colleague and identifying learning points.

Peer observation

Being observed in practice by a peer, who could be an osteopath or another healthcare professional. It's usually a two-way process, with colleagues observing each other to provide feedback on practice.

You could get feedback from your patients

Patient feedback

Obtaining patient feedback using questionnaires or other methods about any aspect of your practice.

Patient Reported Outcome Measures (PROMs)

Ask at least 25 patients to give anonymous feedback about how they are responding to treatment and the National Council for Osteopathic Research (NCOR) will analyse the data, and send you a report you can use for objective feedback.



You could gather feedback yourself

Clinical audit

You can audit any aspect of your practice:

1. Select a topic – for example, how to reduce missed patient appointments
 2. Collect or review data on this area of practice
 3. Compare with agreed practice standards
 4. Identify and implement any changes
 5. Carry out a re-audit to test the impact of changes.
- NCOR can help you with research to set standards and criteria for your audit: www.ncor.org.uk

‘The new scheme is more flexible than I thought’

Meet and greet

Meeting and engaging with people in the osteopathic profession is particularly important as more osteopaths start the new CPD scheme

Meeting with osteopaths, and other members of the osteopathic profession, face-to-face, helps the GOsC to provide information and also to understand any concerns about any aspects of the GOsC’s work. This feedback is then used to develop our work including providing resources to support osteopaths in practice. In recent months, we have been busy visiting osteopaths, students, local and regional CPD groups and osteopathic teaching staff including:

Worcester Osteopathic CPD Group: meeting a group of 30 osteopaths

GOsC’s Chief Executive, Tim Walker, met with more than 30 osteopaths to discuss the new CPD scheme at an evening event last September. Attendees asked questions about how to cover the four themes of the Osteopathic Practice Standards (OPS); how to plan their CPD across the three-year cycle, and how to record it. Tim highlighted useful resources on: cpd.osteopathy.org.uk including the Planning and Keeping CPD Records workbooks.

Meeting staff and students at Swansea University

In early October, Steven Bettles, GOsC’s Policy Manager, presented to: Swansea University’s staff and teaching faculty about the updated OPS; Year 1 students on professionalism; and gave Year 2 students an overview of the updated OPS.

Running a workshop for 60, at the iO 2018 Convention, London

During a three-hour session with 60 osteopaths at the iO (Institute of Osteopathy) Convention, in October, Steven: gave an overview of the new CPD scheme; talked through the Peer Discussion Review (PDR), and gave attendees an opportunity to work through the PDR template (cpd.osteopathy.org.uk/pdr) with a colleague, to give them a feel for how it will work. This was followed by a brief overview of the updated OPS and what has changed.

Judging by the responses and feedback from the osteopaths who attended, they feel quite prepared for the new scheme. One attendee said: ‘The new scheme is more flexible than

I thought. Reflecting slightly more on the activities I already do, will ensure that most of the new CPD requirements are met.’

Answering questions at the London Osteopathic Society

Steven also presented to the London regional group where he took questions from more than 40 osteopaths at a CPD evening. Overall, feedback showed that by the end of the evening, there was a sense of reassurance that the scheme will be manageable and that many osteopaths are already meeting most of its requirements.

Coming up in 2019

The GOsC will be running sessions at the iO Roadshows. For more details see: www.iosteopathy.org ●

CONNECTING FOR CPD

- Find a CPD course or event near you at: cpd.osteopathy.org.uk/events
- For more information about joining or setting up a CPD group, see the box on page 15



Group benefits



Emily Moss set up a group in Petersfield after graduating, to connect with other osteopaths for CPD and work opportunities

Connecting with osteopaths and other health professionals is central to the new CPD scheme, particularly for learning with others, objective activities and Peer Discussion Reviews. Joining a regional or local group can be a good way to connect and network.

When starting out as a newly qualified, self-employed osteopath, Emily Moss, took the initiative to reach out to other osteopaths in Petersfield, Hampshire, and surrounding areas to sound them out about starting a new group. She told Managing Editor, Clare Conley, how she went about setting up the group, and the resulting benefits.

So, what made you decide to set up a group in the first place?

It was just over two years ago, soon after I graduated from what was then the Surrey Institute of Osteopathic Medicine (now Nescot), in Epsom with a BSc(Hons). I was starting out as a self-employed osteopath by renting rooms, which meant I wasn't working with a clinic full of other practitioners.

So I wanted to get to know some other osteopaths in the area for cheaper CPD, to share knowledge and potentially get some locum work from it. The name of the group can fluctuate but usually we're the Petersfield Osteopaths Networking Group (the acronym is quite tongue-in-cheek!)

How did you get started?

I googled osteopaths in my area, found email addresses and sent a mass email out asking if they would be interested. Once I'd got some interest from about nine people, I arranged an introductory meeting over a meal at a restaurant. I then got a better idea of the best timings for organising future meetings.

What are the key aims of the group?

The overall aim is to share knowledge and to provide cheaper, more accessible and regular CPD options. Plus the opportunity to get good referrals for patients in different areas and for specialties. And the social aspect to reduce the isolation of being self-employed is also important.

How is the membership growing?

I haven't been publicising the group as such as I wanted to keep it small,

'The social aspect is important as it helps to reduce the isolation of being self-employed'

accessible and as cheap as possible, while also keeping the organisation involved at a manageable level for me. Osteopaths in the group can invite others that might be interested though and we currently have around 15 members.

How is the group organised on an ongoing basis?

I am generally the central organiser. There's a regular interval for meetings – usually we hold them every third Thursday evening of every third month. I send a 'round robin' email after each meeting to summarise what was discussed and telling people the date for the next meeting. I then send another email out closer to the time of the next meeting, to remind people and let them know location and topic. We share hosting the meetings at our clinics. We also keep in touch via email and Facebook and an app for coordinating events, chats and news.

Topics for the meetings are decided by a mixture of: members making requests for particular topics; current news, eg GDPR (General Data Protection Regulation); and pot luck! We've had a Clinical Practice talk about consent and communication; a vascular surgeon speaker; and we've also talked about case histories, mindfulness and other topics. For future meetings, we are planning to cover women's health and pelvic floor exercises, and we are in the process of arranging talks about the new CPD scheme.

What do you think the main benefits have been so far?

I personally have ended up working as a locum, working with a couple of the osteopaths in the group. We have also had people team up in their clinics and referrals have been made between members, and participants have shared other CPD events of interest. We've saved money by keeping the group in the local area with minimal travel costs. The only additional costs are for social dinners (we had a Christmas social) and speakers at meetings, which are shared between attendees – there's no membership fee.

Any other tips to share with others thinking of setting up a group?

It's always a big hit to have food and drink at meetings! Having a central organiser has worked quite well but if everybody in the group is good with technology and on Facebook, a shared calendar or event has been quite helpful for reminders and keeping track of attendance for meetings. If you're thinking of trying to connect more with other osteopaths in your areas, don't be afraid to just put yourself out there, even the social aspect is invaluable. ●



WHY NOT JOIN OR SET UP A NEW CPD GROUP?

1. Find a list of regional and local groups at: cpd.osteopathy.org.uk/groups
2. If you're interested in setting up a new group, the GOsC can put you in touch with osteopaths in your area. Email Stacey Towle: stowle@osteopathy.org.uk
3. Download the Osteopathic Communities of Practice guide for practical tips and advice on setting up a group at: bit.ly/ODG-CDP
4. Read about how osteopath, Claire Piper, set up the Kent and East Sussex Osteopaths (KESO) group in the September/October 2018 The Osteopath: bit.ly/TheOsteopathSeptOct2018
5. Or think about setting up a virtual group which meets by Skype, phone or similar channels. Read how a small group of osteopaths set up a virtual group at: cpd.osteopathy.org.uk/virtualgroups

Setting boundaries



Steven Bettles, osteopath and GOsC's Policy Manager, explains the OPS guidance on boundaries and how it can be applied in practice

In the current Osteopathic Practice Standards (OPS), **D16** states: 'Do not abuse your professional standing'. This could take many forms, but the focus within the current guidance is on failure to establish and maintain boundaries with patients. In the updated standards, this is now covered under standard **D2**, which states:

Theme D: Professionalism
Standard D2

You must establish and maintain clear professional boundaries with patients, and must not abuse your professional standing and the position of trust which you have as an osteopath.

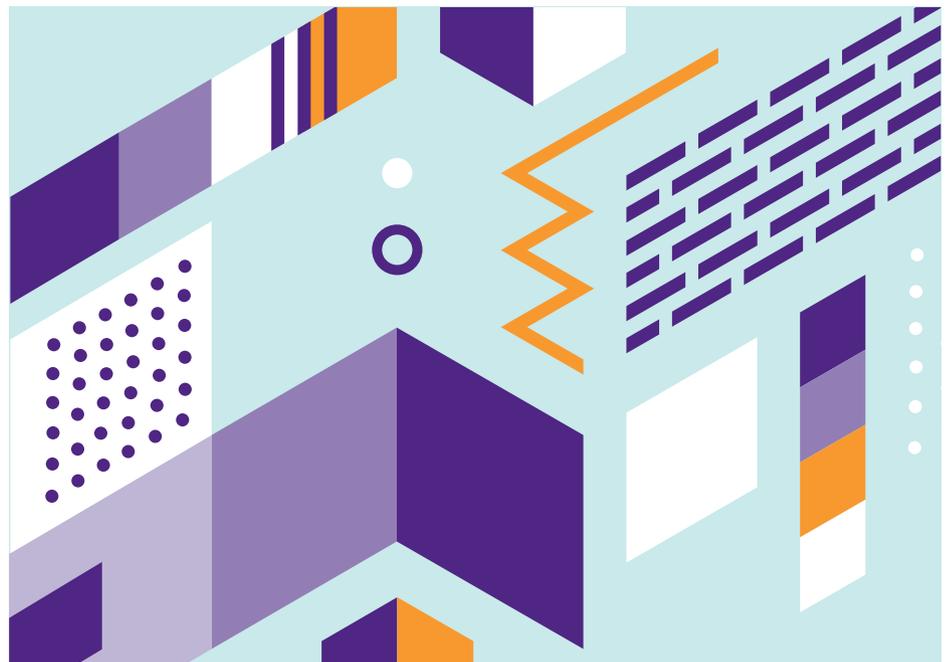
See: standards.osteopathy.org.uk/themes/professionalism

The reference to boundaries is now, therefore, embedded within a standard.

What does the guidance add?

The scope of this has been expanded. The guidance now references the fact that appropriate professional boundaries are essential for trust, and an effective therapeutic relationship between the osteopath and patient. The updated guidance acknowledges that not all 'crossing of professional boundaries' is necessarily an abuse of professional standing.

Sometimes it supports empathy and trust to disclose personal information or see a patient outside of your usual hours, for example. However, there is a spectrum of appropriate behaviour, and osteopaths should ensure that patients



who may be vulnerable are protected.

The guidance points out the risks, not only of crossing sexual boundaries, but of developing social or commercial relationships with patients, and of patients developing an inappropriate dependency upon their osteopath.

Has the guidance on sexual boundaries changed?

The guidance on establishing sexual boundaries in the current standards is still reflected in the updated guidance. This includes guidance around language and behaviour which may be regarded as sexualised; and on how to manage a situation where an osteopath is sexually attracted to a patient, or a patient

displays sexualised behaviour towards the osteopath.

The current guidance states that osteopaths must not take advantage of their professional standing to initiate a personal relationship with a patient, or former patient. This is maintained in the updated version, but it now goes further in stating that osteopaths must not end a professional relationship with a patient to pursue a personal relationship with them.

So does that mean an osteopath can't ever form a personal relationship with a former patient?

Not necessarily. The updated guidance says that there are things that an osteopath needs to consider in

deciding whether such a relationship is appropriate. These include:

- The nature of the previous professional relationship.
- The length of time the professional relationship lasted and when it ended.
- Whether the former patient was particularly vulnerable when a patient, or whether they remain vulnerable.

This is consistent with guidance also provided by some other healthcare regulators. It highlights the risks and provides a framework for decision-making in such situations.

Can you give me an example of how this could work in practice?

> Scenario 1

Suppose an osteopath, while out at the pub one night, bumps into a former patient who they saw once or twice for a straightforward low-back problem three years previously. They get chatting, get on well and the patient asks the osteopath out on a date.

> Scenario 2

Compare this with a situation where an osteopath is asked out by a former patient (last treated six weeks previously) who was seen regularly over a year-long period for some complex health issues, and who had experienced depression following a very stressful divorce.

The first case scenario may not present too many challenges. Whereas the second scenario may well raise issues about the vulnerability of the former patient at the time, and currently, and whether such a relationship reflects a dependency underpinned by the power imbalance between the patient and the osteopath. ●

READ THE OPS ONLINE

Read the updated OPS and accompanying guidance online from your PC, laptop or mobile device at: standards.osteopathy.org.uk



Are your details up to date?

It is now much easier to let us know when you change your correspondence and/or practice details. Keeping these up to date in our records is important.

Your practice details are published on the online Register and, if they are out of date, patients and prospective patients could find it harder to get in touch with you.

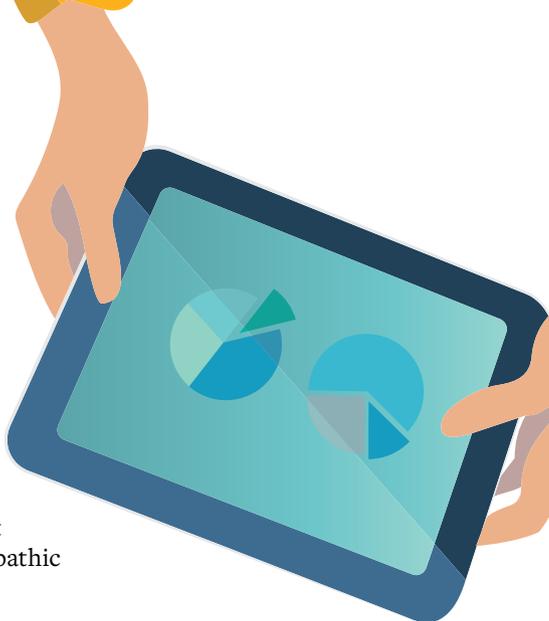
As part of our recent reorganisation of content on the o zone, we have improved the navigation of the 'Update my details' section, with clearer links to updating contact and practice details.

You can choose to supply us with separate personal correspondence

details (address and email), which will be used when the GOsC gets in touch with you. If these details are not up to date, you could miss out on important information from us – including reminders to renew your registration. You can choose whether or not you want these contact details published on the public Register.

You can update your correspondence and practice details via the o zone at any time. Simply visit the 'Update my details' area in the 'My registration' section. ●

Keeping up to date and engaging with research is a cost-effective and straightforward way of carrying out quantifiable CPD. As well as enhancing your knowledge and understanding in particular areas, it can also help you to meet the obligation to keep your professional knowledge and skills up to date, including the best available evidence to support patient care, as outlined in the Osteopathic Practice Standards (OPS).



How does research relate to the OPS?

Updated OPS – Theme B:

Knowledge, skills and performance **B3**. You must keep your professional knowledge and skills up to date.

To achieve this, you should:

B3(1): be professionally engaged, undertaking professional development activities and complying with GOsC requirements regarding continuing professional development.

See: standards.osteopathy.org.uk/themes/knowledge-skills-and-performance



And updated **OPS C1** means that osteopaths should be aware of the best available evidence to support their approaches to patient care.

Theme C: Safety and quality in practice

C1: You must be able to conduct an osteopathic patient evaluation and deliver safe, competent and appropriate osteopathic care to your patients.

Guidance **C1(1.1.4)** says that this should include the ability to develop and apply an appropriate plan of treatment and care based on the working diagnosis; the best available evidence; the patient's values and preferences; and your own skills, experience and competence

See: standards.osteopathy.org.uk/themes/safety-and-quality-in-practice

Tips for using research for CPD:

If, for example, you'd like to use a particular article in a research journal for your CPD, you could approach it as follows:

1. As you're reading the article, ask yourself questions like:

- What are the key messages?
- How does the research/information relate to my practice?
- Does the research highlight something I should consider changing?
- How could I make such a change?
- How do I evaluate the impact of any changes?

2. Take time to reflect on the article and these questions, in relation to your practice. Read an article by GOsC's Policy Manager, Steven Bettles, on how to reflect for your CPD, on page 15 of the September/October 18 CPD launch issue of *The Osteopath*: bit.ly/TheOsteopathSeptOct2018

3. Discussing a research article with a colleague or colleagues, is a helpful way to gain further insights and could count towards your 'learning with others' CPD.

4. Remember to record what you do for your CPD record – not just that you read a research article, but a brief reflection on how it has informed your practice.

Other resources to help you use research for your CPD:

NCOR:

- Join a National Council for Osteopathic Research (NCOR) research hub: ncor.org.uk/category/hubs
- Read a Snapshot Summary – these provide a brief overview of predominantly manual therapy and osteopathically relevant research, with references for further reading: bit.ly/NCOR-Snapshot-Summaries
- Ask your patients to take part in PROMs (Patient Reported Outcome Measures) – you can use the analysis for your CPD, as an objective activity

(see p12), in the new CPD scheme: ncor.org.uk/practitioners/patient-reported-outcomes

- Consider carrying out a clinical audit, another option for an objective activity: ncor.org.uk/practitioners/audit/

Access research journals on the o zone

You can access the International Journal of Osteopathic Medicine (IJOM) and six other journals: Clinical Biomechanics; The Lancet; The Spine Journal; Journal of Manipulative and Physiological Therapeutics; Musculoskeletal Science and Practice; Pain, and the Journal of

Bodywork and Movement Therapies. Log in to the **o** zone and go to: members.osteopathy.org.uk/research-journals/journals

Read an osteopath's blog post on research

Read osteopath Penny Sawell's blog post, More Evidence That Osteopaths Are Getting Into Research, with a report from a recent Sutherland Cranial College of Osteopathy Conference, including a workshop on how to convert an idea into a research project: bit.ly/osteofm-research-13Nov18

Learning together



NCOR's Director **Dr Dawn Carnes** highlights how CAHPR provides opportunities to join other allied health professionals for research

The Council for Allied Health Professions Research (CAHPR at: cahpr.csp.org.uk) was set up to develop research in the field of allied health. By doing so, CAHPR's aim is to strengthen evidence for the allied health professions' value and impact for enhancing care, and to speak with one voice on research issues. This raises the profile and influence of allied health professions in the wider health community. CAHPR represents 13 professions including osteopathy via the Institute of Osteopathy and the National Council for Osteopathic Research (NCOR).

So why is CAHPR important to osteopathy when osteopaths have NCOR to manage research for the profession?

1. The Strategic Committee of CAHPR has many links and contacts, and plays a role in representing and promoting the contribution that the allied health professions make to patient care. These links are established with organisations such as National Institute for Health and Care Excellence (NICE), NHS England, Health Education England, Arthritis and Musculoskeletal Alliance and Public Health England. Osteopathy is now represented at the highest levels in health care in the UK.
2. The CAHPR Professoriate Committee convenes to highlight and share current perspectives, knowledge and innovations in allied health care. These are shared between the professions, ensuring that the osteopathic profession is aware of current issues and their implications, so we can have foresight and plan for change.
3. CAHPR runs 24 research hubs around the UK, which are similar to the NCOR research hubs for osteopaths, but CAHPR hubs are populated by practitioners from many disciplines: orthoptists; paramedics; physiotherapists; speech and language



therapists; radiographers; podiatrists; occupational therapists; dieticians; prosthetists and orthotists; and art, drama and music therapists. This could also provide opportunities for your CPD, learning with others, for example, shadowing someone in a different profession or carrying out an objective activity, such as a case-based discussion. You can also choose to carry out your Peer Discussion Review with another health professional, towards the end of your three-year cycle of CPD.

How can CAHPR help me use research for my CPD?

1. Join a regional CAHPR research hub: cahpr.csp.org.uk/content/regional-hubs-and-contacts
2. Check out CAHPR's top 10 tips: cahpr.csp.org.uk/content/cahpr-top-ten-tips Written and produced by CAHPR hubs, these tips offer brief summary advice on key topics including:

- **Tips for running a journal club** – this can be a useful way to get a group of like-minded professionals together to consider evidence formally or informally and it is great for CPD.

Read the top tips on how to set up and run a journal club in your work area.

- **Share your experiences** – taking part in or setting up a journal club. Are you already in a journal club or thinking of setting one up? We'd like to share your experiences of topics covered, how you've used this for CPD and to connect with other health professionals, and any other tips. Please email: editor@osteopathy.org.uk

Other CAHPR top 10 tips cover:

- Using social media
- Getting your paper published
- Becoming a peer reviewer
- Preparing a scientific poster.

3. **Apply for a 2019 CAHPR Public Health Research Award** – for research supporting Public Health England's priorities including: increasing physical activity and promoting workplace wellbeing. Applications open in January 2019. Find out more about the other priorities and awards at: cahpr.csp.org.uk/content/cahpr-public-health-research-awards

Clinical conundrums



NCOR Researcher **Austin Plunkett** discusses managing uncertainty in clinical practice

Uncertainty is prevalent in healthcare. All aspects of the clinical encounter are complex and take place within wider, multidimensional contexts. Uncertainty can be present at all stages, even before the patient and clinician meet. The patient may already experience uncertainty relating to the broader aspects of their life and wellbeing including chronicity, quality of life, survival, finances, occupation and family matters.

Uncertainty persists throughout assessment and the taking of a case-history, informed consent, differential diagnosis, treatment, management and onward referral, through to outcomes assessment. At each of these stages both clinician and patient are seeking further information to improve their understanding of the situation.

The clinician's ability to tolerate the uncertainty they face might be considered an essential clinical skill (Cooke et al, 2017). Osteopaths tend to report being open to, and comfortable with, uncertainty in their reasoning while considering case histories (Roots, Niven and Moran, 2016) and osteopathic educational providers aim to produce graduates who are comfortable with clinical uncertainty (Esteves, Bennison and Thomson, 2013).

In contrast, low tolerance of uncertainty is associated with increased cost and increased risk to the patient

through issues such as unnecessary testing and investigations (Cooke et al, 2017), and may increase risk of patient complaints (Carnes, 2016). Consequently, an improved understanding of clinical uncertainty may help reduce anxiety, improve outcomes, and even help to avoid or ameliorate complaints from patients.

The relationships that osteopaths and our patients have with uncertainty will shift depending on the surrounding context and nature of the situation, which will be different at different times. For instance, patients will seek information from their osteopath in order to make informed decisions about their care. Indeed, this is a key component of informed consent: the patient must be informed by the clinician. Consequently, the clinician must provide clear information for the patient to assess, and must be confident in the patient's ability to assess and to communicate their understanding. Doing this while dwelling in the murky domain of uncertainty can be daunting, even for experienced clinicians.

Osteopaths may wish to shield patients from uncertainty in order to increase the patient's confidence and reduce anxieties relating to pain, function, treatment, prognosis, and impact on daily life. However, this information might be difficult to communicate: evidence may be equivocal, and patients may tend to have variable outcomes. Additionally, the

patient's perspective and experiences may vary from the clinician's, leading to further uncertainty. If a patient's models of health and disease are significantly different from the osteopath's, communication can become difficult, and expectations can become mismatched.

Healthcare researchers often opine that 'further research is required' where evidence is unclear, indicating a desire on their behalf to eliminate uncertainty. Patients seek certainty from their clinicians, which demonstrates their trust in the expertise and skill of their healthcare provider. Between these two domains, in an 'uncertainty sandwich', is where the clinician is expected to thrive. The speakers at the National Council for Osteopathic Research (NCOR) 2019 conference will provide insights from their research in multiple aspects of clinical practice, giving attendees the opportunity to engage with current thinking in this complex area. ●

NCOR'S 2019 CONFERENCE: CLINICAL CONUNDRUMS

Book your place at NCOR's

Conference: 2 March 2019, London

Speakers include: Dr Dawn Carnes, Dr Jeremy Howick, Dr Phil Bright, Dr Moira Kelly, Dr Roger Kerry, Dr Dave Newell

Find more information and book at: ncor.org.uk/conference

References

1. Carnes, D. **What can osteopaths learn from concerns and complaints raised against them? A review of insurance and regulator reports.** International Journal of Osteopathic Medicine, 2016, 22:3-10. Available online at: [journalofosteopathicmedicine.com/article/S1746-0689\(16\)30050-5/fulltext](http://journalofosteopathicmedicine.com/article/S1746-0689(16)30050-5/fulltext)
2. Cooke, G., Tapley, A., Holliday, E., Morgan, S., Henderson, K., Ball, J., Driel, M. van, Spike, N., Kerr, R., Magin, P. **Responses to clinical uncertainty in Australian general practice trainees: a cross-sectional analysis.** Medical Education, 2017, 51(12):1277-1288. Available online at: [dx.doi.org/10.1111/medu.13408](https://doi.org/10.1111/medu.13408)
3. Esteves, J., Bennison, M., and Thomson, O. (2013) **Script concordance test: Insights from the literature and early stages of its implementation in osteopathy.** International Journal of Osteopathic Medicine, 16(4), 231-239. Available online at: sciencedirect.com/science/article/pii/S1746068913000904
4. Roots, S., Niven, E., and Moran, R. (2016) **Osteopaths' clinical reasoning during consultation with patients experiencing acute low back pain: A qualitative case study approach.** International Journal of Osteopathic Medicine, 19, 20-34. Available online at: [journalofosteopathicmedicine.com/article/S1746-0689\(15\)00073-5/fulltext](http://journalofosteopathicmedicine.com/article/S1746-0689(15)00073-5/fulltext)

Courses 2019

For more courses, see the new CPD site at: cpd.osteopathy.org.uk/events
Please email details of future courses to: info@osteopathy.org.uk
Inclusion of courses does not imply approval or accreditation by the GOsC.

February

2-3

Psychologically-informed practice for treating people with pain

Speakers: Lisa Roberts, Tamar Pincus, Steven Vogel

Venue: University College of Osteopathy, London, SE1 1JE

Tel: 020 7089 5333

cpd@uco.ac.uk

uco.ac.uk/cpd

2

Ergonomics for manual therapists

Speaker: David Annett

Venue: University College of Osteopathy (contact details as above)

2-3

Integration of Autonomic Function

Speakers: Professor Wilfrid Jänig, Tim Oxbrow, Christian Fossum and Danny Orchard

Venue: Core Clapton, 161 Northwold Road, Upper Clapton, E5 8RL

coreclapton.org/cpd

9-10

Dry Needling / Medical Acupuncture

Speakers: Aaron Shewring and Ben Calvert-Painter

Venue: London School of Osteopathy

info@cpd-today.co.uk

cpd-today.co.uk

10

'The Miserable Baby' Part 1 – Treating Feeding and Digestive Disorders in Babies

Speaker: Miranda Clayton

Venue: London School of

Osteopathy, London SE1 3BE

Tel: 07792 384592

mumandbabyCPD@gm.com

mumandbaby-at-home.com/cpd-courses

16-17

Hartman's masterclass in manipulative techniques: upper body

Speaker: Prof. Laurie Hartman

Venue: Whittington Education Centre, London, N19

Tel: 020 7263 8551

cpd@cpdo.net

cpdo.net

16

Nutrition in practice: Low tech nutritional assessment of patients and crash course in evidence based nutritional supplementation

Speaker: Prof Adam Cunliffe

Venue: Whittington Education Centre, London, N19

(Contact details as above)

22-24

Functional Neuromuscular Rehabilitation

Speaker: Dr. Eyal Lederman

Venue: Whittington Education Centre, London, N19

(Contact details as above)

24

'Postpartum Mum' – Treating the Postnatal Patient

Speaker: Miranda Clayton

Venue: London School of Osteopathy, London SE1 3BE

Tel: 07792 384592

(Contact details see 10 Feb)

30

Cervical spine risk assessment and consent for manual therapists

Speakers: Roger Kerry and Steven Vogel

Venue: University College of Osteopathy, London, SE1 1JE

Tel: 020 7089 5333

cpd@uco.ac.uk

uco.ac.uk/cpd

March

2-3

Maternal-Foetal relationships and their effects on the development of the child's brain and gut

Speaker: Professor Frank Willard

Venue: European School of Osteopathy, Maidstone, Kent

Tel: 01622 760816

CPD@eso.ac.uk

eso.ac.uk/event

2-3

Integration of the ANS within the Osteopathic Treatment

Speakers: Professor Wilfrid Jänig, Tim Oxbrow, Christian Fossum and Danny Orchard

Venue: Core Clapton, 161 Northwold Road, Upper Clapton, E5 8RL

coreclapton.org/cpd

2-3

Reappraising entrapment neuropathies: pathomechanisms, diagnosis and management

Speaker: Annina B Schmid

Venue: University College of Osteopathy, London, SE1 1JE

Tel: 020 7089 5333

cpd@uco.ac.uk

uco.ac.uk/cpd

9

Rehabilitation of the Shoulder

Speakers: Tim Allardyce, Danny Church and Ben Calvert-Painter

Venue: London School of Osteopathy, London

info@cpd-today.co.uk

cpd-today.co.uk

10

'The Miserable Baby' Part 2 – Further Treatment Approaches for the Unsettled Baby

Speaker: Miranda Clayton

Venue: London School of Osteopathy, London SE1 3BE

Tel: 07792 384592

(Contact details see 10 Feb)

14

Neuro and intracranial anatomy and pathology

Venue: University College of Osteopathy, London, SE1 1JE

eventbrite.co.uk/e/neuro-and-intracranial-anatomy-and-pathology-14-march-2019-tickets-48699189587

16-17

Clinical Pilates Matwork Progressions

Speaker: Sandie Ennis

Venue: University College of Osteopathy, London, SE1 1JE

Tel: 020 7089 5333

cpd@uco.ac.uk

uco.ac.uk/cpd

24

Strain-Counterstrain (Positional Release)

Speaker: Jo Holmden

Venue: London School of Osteopathy

info@cpd-today.co.uk

cpd-today.co.uk

31**Headaches****Speaker:** OPHM**Venue:** University College of

Osteopathy, London, SE1 1JE

Tel: 020 7089 5333

cpd@uco.ac.ukuco.ac.uk/cpd

April

6-7**Complete Taping Course****Speakers:** Ben Calvert-Painter and Danny Church**Venue:** London School of

Osteopathy

info@cpd-today.co.ukcpd-today.co.uk**6-7****A process approach in manual and physical therapies****Speaker:** Dr. Eyal Lederman**Venue:** Whittington Education

Centre, London, N19

Tel: 020 7263 8551

cpd@cpdo.netcpdo.net**6-7****Expectant Mothers Course****Speaker:** Helen Robinson**Venue:** London School of

Osteopathy

info@cpd-today.co.ukcpd-today.co.uk**7****'Let's Breathe' – Treating Respiratory Disorders in Infants & Children****Speaker:** Miranda Clayton**Venue:** London School of

Osteopathy, London SE1 3BE

Tel: 07792 384592

mumandbabyCPD@gm.commumandbaby-at-home.com/CPD

May

10**Introduction to Diagnostic Ultrasound in Musculoskeletal and Sports Medicine****Speaker:** Chris Myers**Venue:** University College of

Osteopathy, London,

SE1 1JE

eventbrite.co.uk/e/introduction-to-diagnostic-ultrasound-in-musculoskeletal-and-sports-medicine-tickets-46843168177**11****The Sacral-Iliac Joint and Pelvis****Speaker:** Danny Church and

Ben Calvert-Painter

Venue: London School of

Osteopathy

info@cpd-today.co.ukcpd-today.co.uk**18****Clinical Pilates for women's health, demystifying the pelvic floor****Speaker:** Sandie Ennis**Venue:** University College of

Osteopathy, London, SE1 1JE

Tel: 020 7089 5333

cpd@uco.ac.ukuco.ac.uk/cpd**18****Advanced Ergonomics****Speaker:** David Annett**Venue:** University College of

Osteopathy, London, SE1 1JE

(Contact details as above)

18**Nutrition and human performance: Ergogenic aids that actually work & Nutrition and recovery from musculoskeletal injury: Nutritional approaches to inflammation from systemic to local****Speaker:** Prof. Adam Cunliffe**Venue:** Whittington Education

Centre, London, N19

Tel: 020 7263 8551

cpd@cpdo.netcpdo.net**18****Exercise prescription: a process approach****Speaker:** Dr. Eyal Lederman**Venue:** Whittington Education

Centre, London, N19

(Contact details as above)

18**Palliative Care For Manual Therapists Conference****Speakers:** Claude Chidiac,

Bobby Qureshi, Prof. Patricia

Schofield, Annie Halett

Venue: University College of

Osteopathy, London, SE1 1JE

eventbrite.co.uk/e/palliative-care-conference-tickets-50685525772**18-19****Fluids: Osteopathic concepts; Management of dysfunction; Treatment approaches and techniques****Speaker:** Richard Twining**Venue:** European School of

Osteopathy, Maidstone, Kent

Tel: 01622 760816

CPD@eso.ac.ukeso.ac.uk/event**23****The gastrointestinal system: lecture, dissections and case studies****Venue:** University College of

Osteopathy, London, SE1 1JE

eventbrite.co.uk/e/the-gastrointestinal-system-23-may-2019-tickets-48699354079**25-26****Spinal and Peripheral Manipulation****Speakers:** Ben Calvert-Painter

and Danny Church

Venue: London School of

Osteopathy

info@cpd-today.co.ukcpd-today.co.uk

June

1-2**Foundation in Acupuncture for Osteopaths – Part 1****Venue:** University College of

Osteopathy, London, SE1 1JE

eventbrite.co.uk/e/foundation-in-acupuncture-for-osteopaths-1-2-june-and-6-7-july-2019-tickets-48698302935**1-2****A yoga-based approach to therapeutic movement and exercise****Tutor:** Yinka Fabusuyi**Venue:** University College of

Osteopathy, London, SE1 1JE

eventbrite.co.uk/e/a-yoga-based-approach-to-therapeutic-movement-exercise-1st-and-2nd-june-2019-tickets-49043323902**15****Managing the acute and chronic shoulder: a process approach****Speaker:** Dr. Eyal Lederman**Venue:** Whittington Education

Centre, London, N19

Tel: 020 7263 8551

cpd@cpdo.netcpdo.net**29-30****Motivational Interviewing****Course leader:** Dr Vanessa

Bogle

Venue: University College of

Osteopathy, London, SE1 1JE

eventbrite.co.uk/e/motivational-interviewing-29th-and-30th-june-2019-tickets-50776232077**30****First Aid Appointed Person Course****Speaker:** Steven Bruce**Venue:** Skylight Centre, 49

Corsica Street, London N5 1JT

Tel: 07000-785778

info@cranio.co.ukcranio.co.uk

July

6-7**Foundation in Acupuncture for Osteopaths – Part 2****Venue:** University College of

Osteopathy, London, SE1 1JE

eventbrite.co.uk/e/foundation-in-acupuncture-for-osteopaths-1-2-june-and-6-7-july-2019-tickets-48698302935

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Osteopath with excellent communication and patient management skills sought for a long-established and growing practice in Haywards Heath, West Sussex. Days and hours flexible. We are based in a busy leisure centre, well placed within the locality and see a good variety of patients – you don't need an interest in sports injuries for this position. Added perk: free use of the gym! For further details, please email Adam Fiske at midsussexosteo@gmail.com

Osteopath required: New Forest

Osteopath required to lead on women's health and paediatrics for a busy New Forest clinic. At present we have two osteopaths with an increasing list and we want to expand into this market which is at present underutilised. Real potential for the right candidate – Saturday working is required. We are growing and want someone who is keen to be an integral part of our expansion. New graduate or experience considered. Contact: steven@thenewsurgery.com with CV and covering letter.

Osteopath required: Petersfield

Osteopath of good heart and hands sought for Petersfield Osteopathic Practice. Osteopathy in its widest traditions, principles and practice. You may be an experienced colleague seeking to develop additional days; or a recent graduate

with an expressed interest in osteopathy in the cranial field and biodynamic work. Peer support and mentoring, networking group, postgraduate study days; with room rate availability, two days per week. Contact: Carolyn McGregor on 07766 330 489, or email: carolynhomoeopath@hotmail.co.uk

Associate required: Brighton

Associate required with a view to buying into the practice. Established 17 years, the practice encompasses all aspects of osteopathic technique but leans heavily towards use of the IVM. Please email: yogalife@btinternet.com for further information.

Associate osteopath required: Carshalton

We are looking for an enthusiastic and dependable osteopath to join our team at Wallington Osteopaths. We require a commitment for a minimum of two half-days per week for a long-term position starting in January 2019. Please send your CV to: clinic@wallingtonosteopaths.co.uk

Associate required: Herefordshire

Associate required for 1-2 days a week at Leominster Osteopaths, Herefordshire. An interest in classical osteopathy preferred but not essential. Potential to grow and increase hours. Mentoring offered. Please phone 01568 610 610, or email:

enquiries@leominsterosteopaths.co.uk for more information.

Associate osteopath required: London W1/SW5

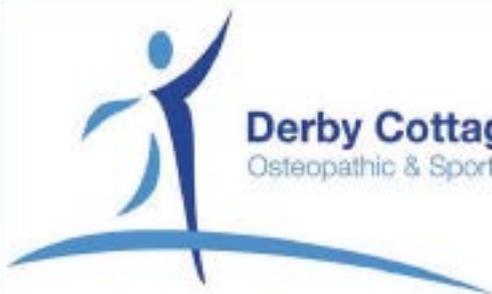
Associate with minimum five years' experience to cover at least three sessions a week. Must have experience with pregnant mothers, newborns, children, good musculoskeletal skills and patient rapport. Long-established practice. Send CV to: antony@kaneandross.co.uk, or call 020 7436 9007

Courses: Animal Osteopathy at the Osteopathic Cranial Academy (OCA)

Our next open day is Sunday 17 February 2019. Registration is now open for our UK September 2019 PGCERT. Registration is still open for Australia March 2019. For information, contact: info@ocauk.org For admissions, tel: 01235 768 055, or visit ocauk.org

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Date	Topic	Lecturer	Cost	Deposit	CPD points
26 Jan 19	Tissue repair: Implications to manual therapists <small>(Last course ever before Prof Watson's retirement!)</small>	Prof. Tim Watson	£135	£135	7
26 Jan 19	The spinal care revolution: a process approach	Dr. Eyal Lederman	£135	£135	14
16-17 Feb	Hartman's master class in manipulative techniques: upper body	Prof. Laurie Hartman	FULLY BOOKED		14
16 Feb 19	Nutrition In practice: Low tech nutritional assessment of patients & Crash course in evidence based nutritional supplementation	Prof Adam Cunliffe	£135	£135	7
22-24 Feb 19 <small>(Start Friday 17:00)</small>	Functional Neuromuscular Rehabilitation	Dr. Eyal Lederman	£385	£200	18
6-7 April 19	A process approach in manual & physical therapies	Dr. Eyal Lederman	£195	£95	14
18 May 19	Nutrition and human performance: Ergogenic aids that actually work & Nutrition and recovery	Prof. Adam Cunliffe	£135	£135	7
18 May 19	Exercise prescription: a process approach	Dr. Eyal Lederman	£135	£135	7
15 June 19	Managing the acute and chronic shoulder: a process approach	Dr. Eyal Lederman	£135	£135	7
28-29 Sept	Management of headaches: evidence-based manual therapy approach	Dr. César Fernández de las Peñas	£345	£345	18
5 Oct 19	From Paleo to Vegan - special diets' Impact on human health & Holding back the years. Diet and exercise strategies to increase health-span	Prof. Adam Cunliffe	£135	£135	7
5-6 Oct 19	Hartman's master class in manipulative techniques: lower body	Prof. Laurie Hartman	£385	£385	14
26-27 Oct 19	Functional stretching	Dr. Eyal Lederman	£285	£150	14
9 Nov 19	How to use placebos to help patients: an evidence-based approach	Dr. Jeremy Howick	£135	£135	7
9-10 Nov 19	Hartman's master class in manipulative techniques: upper body	Prof. Laurie Hartman	£385	£385	14
22-24 Nov <small>(Start Friday 17:00)</small>	Harmonic Technique	Dr. Eyal Lederman	£385	£200	18
23 Nov 19	Brain foods - Food and Mood & Human biome in health and disease	Prof. Adam Cunliffe	£135	£135	7

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

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New course for March!

Reappraising entrapment neuropathies: pathomechanisms, diagnosis & management

This course aims to provide a detailed insight into recent scientific advances with regards to the pathophysiology, assessment and conservative management of patients with common entrapment neuropathies. Focus will thereby be placed on patients with spinally referred pain.

Participants will develop a deep understanding of the potential pathomechanisms at play in patients with entrapment neuropathies and how to differentiate the dominant mechanisms in individual patients using methods beyond the commonly used neural integrity tests. They will be competent in designing a targeted intervention for different subgroups of patients with spinally referred pain.

The course is delivered by associate Professor Annina Schmid is a consultant MSK physiotherapist and neuroscientist affiliated with the Nuffield Department of Clinical Neurosciences at Oxford University.

2 - 3 March 2019, £270, UCO

Ergonomics for Manual Therapists

Delivered by David Annett, an osteopath and freelance ergonomics consultant this course gives manual therapists the skills to advise patients and workplaces on correct workstation setup, mobile device usage and manual handling in order to prevent injury.

2 February 2019, £135, UCO

Neuro and Intracranial anatomy & pathology

UCO have again teamed up with Dr David Parry to deliver this course designed to enforce and enhance knowledge of intracranial anatomy and selected pathology. Teaching takes place at UCO and in the King's College dissecting room followed by a visit to the Gordon Pathology museum.

14 March 2019, £205, UCO

***Complete your communication and consent
requirements!***

Cervical Spine Risk Assessment and Consent for Manual Therapists

This popular one-day masterclass, delivered by Roger Kerry and Steven Vogel, addresses practitioners' concerns about treating the neck in the context of evaluating risk and receiving consent.

30 March 2019, £145, UCO

Maternal-Foetal relationships and their effects on development of the child's brain and gut

Presented by Professor Frank Willard

Osteopathic approach led by Sue Turner and Graham Mason

Saturday 2nd - Sunday 3rd March 2019 - £300 (includes lunch and refreshments)

What happens to the mother in pregnancy has an effect on the growing foetus and, as osteopaths, we are often called on to treat problems arising after the child is born. This most interesting course will provide delegates with a greater understanding of what these problems are and how they occur, and will give an insight into how we can deal with the issues facing us.

For more detailed course information please visit us online at www.eso.ac.uk/event.



Fluids: Osteopathic concepts; Management of dysfunction; Treatment approaches and techniques

Presented by Richard Twining

Saturday 18th - Sunday 19th May 2019 - £300 (includes lunch and refreshments)

The World Health Organisation recognises the Osteopathic 5-Model Concept as making a unique contribution to health care. One of the models, the respiratory/circulatory (or fluid) model, is often under-represented in UK formal osteopathic education, despite being important to much of A.T. Still's teaching and writing and being an effective treatment approach to tissue dysfunction. Fluids comprise some 60-65% of the body and they are essential to the understanding of tensegrity biomechanics. Taking many forms - blood, lymph, extracellular, intracellular, digestive, serous and CSF - they are moved by a number of mechanisms, which need to be understood for effective treatment.

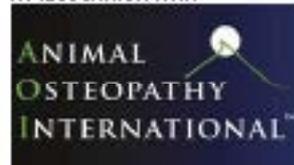
This highly practical post-graduate weekend will explore the importance of the concepts, main restriction points, and the effectiveness of fluid based approaches and techniques. As the bulk of fluids are in the visceral system, some knowledge of visceral osteopathy would be an advantage but not essential.



Animal Osteopathy: New courses - start February

The ESO is proud to be working alongside Animal Osteopathy International to provide an exciting programme of high quality animal courses. These canine and equine courses are designed and led by Dustie Houchin, the ESO's Animal Consultant and a highly respected member of our international faculty; Dustie has almost 20 years experience as an animal osteopath and is also Chair of The Association of Animal Osteopaths. Certified courses available at Stage I and Stage II - please visit our website for details.

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Join us at the iO Roadshow

The iO has a vision for osteopathy. We are inviting you to join us at one of our events where you can be part of shaping the future of your profession.

Each event will cover:

Strategy for the profession: We ask, what are the priorities for your practice? What challenges are you facing? And what opportunities should we be taking advantage of?

Promotion of osteopathy: How can we better promote the profession? What can we do to raise the profile of osteopathy, and support the promotion your practice.

The new CPD scheme: The GOsC will be providing an overview of the new CPD scheme, an introduction to the peer discussion process, and ask what is an objective activity?

How to book

Each event is a full day 9.30am – 4.30pm. Refreshments and lunch are included in the booking price.

For full details, including venues, and to book visit www.iOsteopathy.org/for-osteopaths/io-roadshow

Cost: iO Members £15 Non iO members £30

Dates and locations:

- Coventry – 15 February
- Manchester – 10 May
- Bristol – 29 March
- Perth – 9 June
- Maidstone – 21 June

Attendance at the iO Roadshow is eligible for CPD hours.

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Introduction Workshop to Classical Osteopathy
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6th of April 2019

Clinic Workshop + Practical Workshop
With Chris Campbell and Chris Batten.

7th of April 2019

Conference

Speakers: Chris Campbell, Mervyn Waldman, Michel Odent, and Sue Turner.

8th of April 2019

Practical Workshop

Only for ICO members with Mervyn Waldman.

Mervyn Waldman
"Primum non Nocere -
The Treatment of the Elderly Sick and Injured".

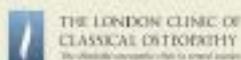
Chris Campbell
Littlejohn lectures on Psycho-Physiology.

5th | 6th | 7th | 8th April 2019

Michell Odent
How can neonates cope
with microbial and stress deprivation.

Sue Turner
Roots, stems and shoots of our tradition.

osteopathy-london.org.uk

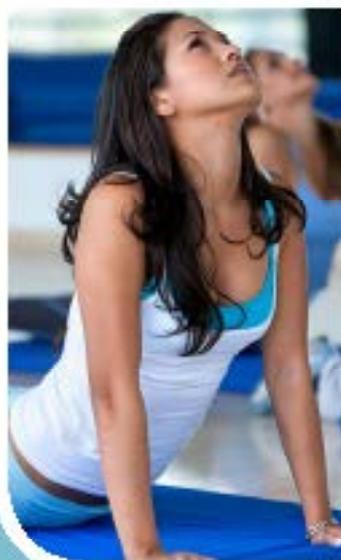


Registration & Info: icofrontdesk@gmail.com | classical-osteopathy.org

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Post-Graduate Diploma in Women's Health - Osteopathy Register now for the 2020 London Intake

The 2019 Women's Health Course starting in May 2019 is now fully booked. Due to the number of requests MIH is delighted to announce that it will run the course again in London starting in the spring of 2020.

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corinnejones.mih@gmail.com

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www.molinari-institute-health.org



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Dino Muzzi: Somato-emotional dysfunction, Osteopathy and focusing

15 to 20 September 2019

Susan Turner: Mother and Baby - Peripartum

Christian Fossum: Fascia and Women's Health

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We feel it is a good time to explore the relevance of current research in the light of our Osteopathic heritage. To this end the conference will offer lectures, discussion, practical workshops, and of course time to meet up with colleagues old and new.

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"It just feels like a 'homecoming' being with the SCCO - wonderful being with like minds. I am in awe of all the dedicated tutors and researchers within the SCCO. Thank you all so much for putting so much into the profession."

"I've not attended many SCCO events in the past, but was struck by the friendliness and openness of other attendees - more so than other 'standard' osteopathic courses I've attended. I left with a different perspective."

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In Reciprocal Tension (M5)

PAMELA VAILL CARTER *rm*
15-17 Feb 2019 Hawkwood, STROUD £995

Osteopathy in the Cranial Field (M2)

TAJI DEOORA *non-rm*
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Foundation Course (M1)

PENNY PRICE *non-rm*
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