

General Osteopathic Council TOUCH EXPLORING ITS COMMUNICATION **REFLECT AND PLAN** PRACTISE PEER DISCUSSION REVIEW FOCUS ON OPS OBSERVERS IN PRACTICE





WORKING AND LEARNING TOGETHER

CONNECTING WITH OTHER OSTEOPATHS AND HEALTH PROFESSIONALS



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

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Find PDFs of this and previous issues of The Osteopath at: osteopathy.org.uk/ theosteopathmagazine



Welcome



We are joining with the General Chiropractic Council (GCC) to promote good practice in communication between health professionals, which can lead to better, joined-up, high-quality patient care (p16). And you can learn more about the opportunities

of interprofessional education on p18. The GOsC is also collaborating with the GCC to understand more about the best ways to communicate with patients in the context of touch (p8).

Now's your chance to become a member of the GOsC's Council or even the next Chair. Find out why current members recommend applying on p5-6. You can read an osteopath's account of a Peer Discussion Review (p14); what you need to consider about having observers in your practice (p12); and there's still time to sign up for GOsC's free CPD webinars (p15).

Did you get a chance to read the case study about patient feedback in the May/June issue? Diana Pitt, an osteopath and Course Leader at the University College of Osteopathy (not University College London, as we mistakenly stated in the magazine) shares her learning and insights. Read the case study at: cpd.osteopathy.org.uk/building-positive-patient-relationships

Look out for the special focus on the Osteopathic Practice Standards (OPS) in our next issue as the updated Standards officially come into effect from 1 September – do get in touch with any content ideas that would help you to use the OPS in practice (see back cover).

Clare Conley

Managing Editor Email: editor@osteopathy.org.uk

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Update

July/August 2019

NEW CPD

Read updated Peer Observation Workbook

Have you asked a peer to observe you in practice and provide feedback? Peer observation can help provide reassurance and support reflection, enabling you to enhance your practice

This workbook will help you prepare for and take part in a peer observation, which is an option for an objective activity in the new CPD scheme.

Peer observation is a way of getting feedback on your practice from a colleague, helping you to reflect on what you do well and how you may be able to enhance your practice in the future. You could choose a fellow osteopath or another healthcare professional to observe aspects of your practice. It is often a two-way process, with colleagues observing each other to provide feedback on each other's practice, perhaps on different occasions.

Peer observation can cover many of the key requirements of the CPD scheme, if you reflect on the learning points, because: ■ it's an objective activity

- it may cover communication and
- it may also cover all four themes of the Osteopathic Practice Standards, depending on its scope.



covers:

- A short overview of the new CPD scheme
- Preparing for a peer observation
- Choosing a peer observer
- Ensuring patient confidentiality

Deciding on any specific areas of work that you want feedback on (it's important to discuss this with the person observing, in advance, so both parties are clear).

How can I find out more about peer observation?

1. The Peer Observation Workbook provides a practical guide to the peer observation process. See: cpd.osteopathy. org.uk/resources/peerobservation-workbook 2. Read about the Carlisle Osteopathic Group and their approach to peer observation at: cpd.osteopathy.org.uk/ learn-from-others/stories/peerobservation-carlisle-osteopathicgroup

3. Find resources, including other useful workbooks on the CPD site

at: cpd.osteopathy.org.uk 4. Read an article about having observers in your practice and how this is referenced in the updated Osteopathic Practice Standards on page 12.







SNAPSHOT

151 practise in England Scotland

137 29 practise in practise Wales in NI



GOSC NEWS

Your chance to help steer the GOsC



The GOsC is recruiting for our next Chair and two new Council members. Here, current GOsC Chair **Alison J White** explains why it's an exciting time to apply to take over this role, while overleaf three current Council members explain their roles

ABOUT THE GOSC COUNCIL

Council is responsible for ensuring that the GOsC fulfils its statutory objectives of ensuring the protection of the public through the development and regulation of the osteopathic profession. It sets the strategic direction for the organisation and oversees the implementation of that strategy. Council is made up of five lay members and five osteopath members, all appointed by the Privy Council.

lison J White has served as Chair of Council for the GOsC since April 2012 and will come to the end of her eight-year term of office in March next year. The Chair of Council is appointed by the Privy Council, with the appointment process overseen by the Professional Standards Authority. The GOsC is now inviting applications for the next Chair.

'It's an exciting time to consider applying for this key leadership role,' explains current Chair Alison J White, 'as the osteopathic profession in England starts to adapt to its recognition as an allied health profession, and changing roles and practices within healthcare, particularly in public health, will bring greater opportunities for osteopaths. The government is considering revisions to our healthcare legislation, which will provide a welcome opportunity to update policies and processes, and major challenges are expected if and when the UK exits from the European Union.'

In this context, the new Chair of Council will have a significant opportunity to shape the future of osteopathic regulation and build upon our excellent working relationships with our osteopathic stakeholders. The new Chair will need to be a real team player, as well as an influential advocate for the GOsC. Osteopaths with up-todate experience of osteopathic clinical practice, research and/or education are encouraged to apply, especially if your professional or voluntary experience has helped you develop skills in governance, leadership and strategic business development. Applications are welcomed from osteopaths and lay people.

If you think you might like to apply your analytical, leadership and influencing skills, supporting colleagues in the range of decisions Council makes, from recognising osteopathic qualifications and managing risk, to implementing our new CPD Scheme, do consider applying. Find out more about Council meetings by reading past agendas and discussion papers at: <u>osteopathy.org.uk/about-us/the-</u> organisation/meetings 'The new Chair will have a significant opportunity to shape the future of osteopathic regulation and build upon our excellent working relationships with all our osteopathic stakeholders'

HOW TO APPLY FOR THE POST OF GOSC CHAIR

Applications close at midday on 28 August 2019, with interviews on 15 October 2019. If you are interested in applying, or want to know more about the role, please contact GOsC's Council and Executive Support Officer, Marcia Scott, by emailing <u>mscott@osteopathy.org.uk</u> or see: <u>osteopathy.org.uk/recruitment</u>

'If I can be a Council member, any osteopath can'

Three current Council members – all osteopaths – explain what they have gained from the role and why they would recommend that you apply



Haidar Ramadan

Haidar was appointed to Council in 2012 and is currently serving his final year of a second four-year term.

'Becoming a Council member has enabled me to contribute to the development and progression of the profession to be ready for the challenges facing healthcare in the 21st century.

'I'm privileged to be part of Council which oversaw the formulation and implementation of the new CPD scheme and the updated Osteopathic Practice Standards (OPS), and the launch of the Osteopathic Development Group, the leadership programme for osteopaths. During this time, the GOsC was consistently evaluated as a highly performing regulator by the Professional Standards Authority.

'I really enjoy the in-depth and sometimes challenging discussions around professionalism and patient safety both at committee and Council meetings.

'During my time on Council, I've been able to improve my communication

HOW TO APPLY

Applications to join Council will open in October 2019, with interviews in January 2020.

If you are interested in applying, or want to know more about the role, please email GOsC's Council and Executive Support Officer, Marcia Scott, on: <u>mscott@osteopathy.</u> <u>org.uk</u> or visit: <u>osteopathy.org.uk/</u> <u>recruitment</u> skills, develop my soft skills including being influential and the ability to look at the bigger picture. It has also enhanced my in-depth understanding of healthcare regulation, the challenges facing the profession and the provision of osteopathic education in the UK.

'If you're considering applying, I'd recommend reading the most recent Council papers to get some insight into the main topics being discussed; and how vital our role is as "critical friend" to the Executive team. And one more piece of advice, if I can be a Council member, then I believe any registered osteopath can – so why not give it a try?'



John Chaffey

John joined Council in 2012 and will come to the end of his term in 2020. He is also a member of the GOsC's Policy Advisory Committee.

'I encourage you to apply and do something interesting that is helpful to patients and the profession. You will get to work with some very clever people from different backgrounds, develop new skills and get the chance to influence the direction of regulation for the benefit of patients.

'The competency-based application process is approved by the Privy Council. All you have to do is match some experience you have to the competencies. Relevant experience can be from any part of your life, sports clubs, social groups, university days, unions, previous jobs, teaching, management. The competences are chosen to demonstrate how you make decisions, respond to conflict and understand the purpose of the GOsC. So don't let the application form put you off as there is also helpful guidance in the recruitment pack, that takes you through the process.'



Deborah Smith

Deborah Smith was appointed to Council in 2016 for a four-year term. She is also a member of the Remuneration and Appointments Committee.

'My application to join Council stemmed from my interest in professional standards, developed through a postgraduate project on safeguarding children.

'Council provides a broad range of experiences from the committees and council meetings and excellent opportunities for professional development. Being involved with recruitment, and learning from the very experienced lay members, have been highlights for me.'

FIND OUT MORE

- Biographies for current Council members are at: <u>osteopathy.org.</u> <u>uk/about-us/the-organisation/</u> <u>council</u>
- Council agendas and papers are at: <u>osteopathy.org.uk/about-us/</u> <u>the-organisation/meetings</u>
- The procedure for Council appointments is at: <u>osteopathy.</u> <u>org.uk/about-us/the-organisation/</u> <u>appointments</u>

WORKING TOGETHER

Communicating and learning with osteopaths and other health professionals can help to enhance practice and lead to more joined-up, high-quality patient care – and it's central to the new CPD scheme.



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Just a touch?



Rachel Heatley, GOsC's Senior Engagement Officer, reports on a new literature review and workshops exploring the communication of touch in manual therapies

he number of concerns, claims and complaints against osteopaths has fallen to a five-year low, according to a recent report (Types Of Concerns Raised About Osteopaths And Osteopathic Services 2013–2017. See: <u>osteopathy.org.uk/concerns-report-2018</u>) published by the GOsC in conjunction with the National Council for Osteopathic Research (NCOR).

Patient satisfaction with osteopathic care is very high, somewhere in the region of 96%. However, patient-reported concerns in the areas of consent and communication and boundary transgressions are higher than desirable. Given the essential role touch plays in manual therapies, the GOsC and the General Chiropractic Council (GCC) commissioned the University of Huddersfield to undertake a literature review on the subject.

The aim of the review was to help the GOsC and the GCC gain a better understanding, and to provide guidance for osteopaths and chiropractors on the best ways to communicate with patients in the context of touch, to support enhanced communication, and to avoid misunderstandings and transgressions of boundaries.

What the literature review tells us

The How Is Touch Communicated In The Context Of Manual Therapy? Literature Review was undertaken by Dr Michael Concannon, Senior Lecturer in the School of Human and Health Sciences at the University of Huddersfield and a practising podiatrist, together with Samuel Lidgley, a practising osteopath and researcher.

Three overarching themes emerged from the review:

- touch and professional boundaries
- communication and education
- practice and regulation.



Patient representative, Gul Begum, took part in the London workshop

Overall, the key message from the review is that touch is a complex phenomenon to investigate. Research has explored the centrality of touch to manual therapies and the positive and negative aspects of touch in the context of professional boundaries, looking at the ways in which touch can convey intimacy, empathy and care – with a distinction between procedural and expressive touch.

Despite the importance of effective

patient-centred communication, the research team found that limited published research exists on communicating in the context of touch. This is particularly true within osteopathic and chiropractic therapies. There is also a lack of research targeting the exploration of the experience and understanding of osteopaths and chiropractors and patients in boundary violations.



Osteopath, Francis Job, at the London workshop

The review identified potential considerations for training and education on communication around touch and gaining consent. This includes consideration of different methods to support chiropractors and osteopaths to explore issues, for example through reflection on case studies or vignettes.

The research team recommended that further research is needed into the opinions and experiences of patients in this area, particularly in the UK where very little relevant research has been conducted.

Responding to the findings: workshops

In March 2019, Dr Michael Concannon facilitated two workshops held at the University of Huddersfield and in London to discuss the findings of the review. The workshops also provided the opportunity to identify areas for the GOsC and the GCC, and others in the sectors, to consider further how to support patients and practitioners to maintain and enhance communication in the context of touch. More than 60 participants took part, including patients, osteopaths, chiropractors, educators, policy makers, other regulators, other health professionals, and researchers.

Steven Bettles, GOsC Policy Manager, framed discussions by reassuring participants that the intention of the GCC and the GOsC is to ensure the beneficial aspects of touch are not overregulated in efforts to manage the risks of appropriate touch.

Steven said: 'As regulators, we are keen to explore where problems and risks might arise in practice and help our registrants to recognise and avoid these. It's great to have registrants, patients and members of professional associations here to contribute to this process.'

Dr Concannon opened the workshops by presenting the findings of the literature review, highlighting key areas for discussion, including the disconnect between theory and practice and the lack of detail within research on boundaries.

Dr Concannon used Open Space Technology (OST) to facilitate the

'The review identified points for training and education on communication around touch and gaining consent'

workshops. OST is a technique for hosting meetings that allows participants to explore a topic freely, without a specific agenda or a pre-determined outcome.

Participants worked in groups to identify and discuss what they consider to be the most important issues, who the key stakeholders are and what the next steps should be.

The level of discussion indicated that touch is an issue that both practitioners and patients want to talk about.

Key issues discussed at workshops

Through the lively discussions between participants a broad range of issues emerged:

- positive aspects of touch are critically important
- communication around touch is complex and nuanced
- patients' individual perspectives and experiences are key to how touch is interpreted
- language used for touch is limited
- education is required for practitioners and patients around touch
- more opportunities for discussion and reflection with peers are needed
- more research on patient experiences and perspectives is essential
- greater focus is needed on patientcentred care measures such as PROMs (Patient-Reported Outcome Measures) and PREMs (Patient-Reported Experience Measures).

Consent was the most common topic with participants agreeing that consent should be considered as an ongoing process throughout a consultation.

Gul Begum, a patient representative who took part in the workshops, reaffirmed this need. Gul said: 'When it comes to touch, what reassures me as a

IN PRACTICE

patient is that during the consultation the osteopath seeks verbal and nonverbal consent, which is so important for touch. Patients should always be viewed as potentially vulnerable in the practitioner-patient consultation. I believe good communication will help to reduce instances of complaint.'

Osteopaths and chiropractors alike agreed that practitioners need more opportunities to talk about touch with peers and reaffirmed the need for more education and CPD on the topic.

Julia Gover, a chiropractor who attended the Huddersfield workshop, said: 'One theme that recurred throughout the day was the need for reflective practice and high-quality CPD specifically focused on the patient experience, and I feel regulators and associations could take this forward.'

Francis Job, a registered osteopath and London workshop participant, echoed Julia's sentiments on education. He said: 'Education and good CPD are essential in helping osteopaths to avoid unintentional transgressions.'

Talking point: the nuanced nature of touch

An interesting talking point which emerged from the workshops regarded the nuances and contradictions which exist in contemporary society when it comes to touch. Some participants suggested that people nowadays are more aware of issues surrounding touch and consent and there can be a fear of crossing boundaries. At the same time, patients usually come to chiropractors and osteopaths because they want



Osteopath, Akin Celik, gives feedback

manual therapy and expect to be touched.

Participants acknowledged the need for a better understanding of crosscultural boundaries as well as potential differences when it comes to age, ethnicity and gender.

Above all, what participants valued most was the involvement of patients at the workshops and the opportunity to hear directly from patients. Manoj Mehta, Head of Osteopathy, British College of Osteopathic Medicine, said: 'What really helped me today was hearing from a patient, so I think we need to gather more information from patients about their perceptions of touch and their expectations. The workshop has been a great start, but I feel it is very important to keep up the momentum.'

The resounding message from

both workshops was the need for more research on patient views of touch in manual therapies. In particular, practitioners wanted to know more about patient experiences of touch in different contexts, and to understand more about their communication needs.

Both osteopaths and chiropractors welcomed the cross-disciplinary collaboration and felt much more could be achieved by working together (see CAIPE article on p16).

Paul McCrossin, President, United Chiropractic Association, said: 'It was refreshing to be able to have the opportunity for a positive and informative interaction between the chiropractic and osteopathic professions'.

Tim McClune, an osteopath who attended the Huddersfield workshop, said: 'I found the workshop very helpful as an opportunity to talk with chiropractors and discuss our shared clinical experiences. It's actually very rare for the two professions to get together.'

READ THE LITERATURE REVIEW

You can read How Is Touch Communicated In The Context Of Manual Therapy? A Literature Review at: osteopathy.org.uk/how-is-touchcommunicated

If you have any comments on the review or thoughts on resources that could help manual therapists in this area, please email Fiona Browne on: <u>fbrowne@osteopathy.org.uk</u>

What's next for the 'Touch' project?

Fiona Browne, GOsC Director of Education, Standards and Development, summarised the key findings from the day and outlined the next steps for the project.

The workshops showed that the unique dynamic of each individual consultation is relevant to the way that touch is given and received. They explored the differing perspectives of:

Patients bringing their own histories and experiences of touch, which inform how they perceive and receive touch.

- Practitioners bringing different intents for touch: therapeutic, caring, healing, fixing.
- Society bringing a variety of perspectives on how touch might be intended, received and communicated in any moment.

But, crucially, there was a fear of losing touch which is a critical part of manual therapy care as well as an awareness of the challenge of communicating without specific language to convey what we are doing. The groups discussed how this learning might translate into more research and how further exploration of these matters for existing practitioners is an important part of education and CPD.

The GOsC and GCC will write up a discussion paper for further consultation and engagement with the sectors and with patients to articulate the issues, to seek the views of osteopaths, chiropractors, patients and others, in informing next steps.

Touch: exploring the research

Dr Michael Concannon talks about the process and initial findings



Dr Michael Concannon is a Senior Lecturer in the School of Human and Health Sciences at the University of Huddersfield, and a practising podiatrist. He worked with Samuel Lidgley, practising osteopath and researcher, on the How Is Touch Communicated In The Context of Manual Therapy? Literature review. Findings from the report were discussed with patients, osteopaths and chiropractors at two workshops facilitated by Dr Concannon on 26 March 2019 in Huddersfield and then in London on 27 March 2019.

Was there anything surprising about the literature review?

I was surprised by the lack of research in this country on how touch is communicated in manual therapies. The current literature doesn't really speak to the problem. It is particularly surprising detailed research has not been carried out when one considers the potential for fitness to practise issues related to boundary transgressions across regulated health professions.

What did you find challenging?

My first challenge as a researcher was the diversity of terminology in the

research but even more challenging was the complexity of the issue at hand. How touch is communicated is affected by a whole range of factors – physiological, emotional and societal – and each of these elements is a research project on its own.

Patients want to be 'fixed' by osteopaths and chiropractors and they expect to be touched as part of that process, but at the same time there is a fear regarding communication and consent and overstepping boundaries. Getting the balance right is a challenge for practitioners.

Why do you think there is a lack of research?

My instinct is that the main challenge is the cost of doing research. The other problematic issue is that those who have carried out or have been affected by boundary transgressions are likely to adopt a defensive approach and may be reluctant to answer questions about their experience.

What was your reaction to the workshops?

I was very pleased by the high levels of engagement during the workshops.

The collaborative nature of the workshops, bringing together health professions and patients, was also a positive experience. The discussions showed that chiropractors and osteopaths in both Huddersfield and London were thinking along the same lines. I think these workshops were an important first step in the ongoing collaboration between the GCC and the GOsC.

In terms of outcomes, it would have been nice if there were clear answers, but the issue is just far too complex to solve in two workshops. They have really helped to deepen understanding of the literature review, but I think it's important to try to reach out to a wider number of practitioners in both professions and seek their views on this topic, to help broaden discussions.

'It's important to identify what best practice looks like for practitioners communicating touch'

What do you think should happen next? I think there needs to be a severalpronged approach. More research could be done on patients' experience with boundary transgressions as well as clinicians who go through the fitness to practise process.

It's important to identify what best practice looks like for practitioners communicating touch. Then perhaps to look at developing resources for both practitioners and patients to help facilitate discussions about what will happen during a consultation, so transgressions can be prevented before they become a problem. Education is also key to preventing boundary transgressions and more attention needs to be focused on how best to teach and assess ethics relating to touch, particularly at undergraduate level.

Observing in practice



Steven Bettles, GOsC Policy Manager, explores what you need to consider when having observers in your practice

ere at the GOSC, we receive a number of queries from osteopaths asking whether they are able to have observers in their practice, and how this is referenced within the updated Osteopathic Practice Standards (OPS). Often the query relates to osteopathic students, or prospective osteopathic students who ask if they might observe osteopaths working with patients, but the guidance could apply equally to colleagues undertaking a peer observation for you, as part of your CPD, for example.

Being observed in practice or observing the practice of others can be an excellent way of gaining new and different insights into osteopathic care for patients. It can also help to develop a student of osteopathy or inspire a prospective student to train as an osteopath. But whatever the benefits, it is critical that patients understand the purpose of the observation and understand that there is no obligation on them to consent.

So, the answer to the query is yes, it's perfectly possible to have an observer in your practice – and indeed can be valuable (see the article on the Peer Observation Workbook on page 4) – but there are various matters that you will need to consider in order to meet the OPS in this respect.

Firstly, let's look at A4:

Theme A: Communication and patient partnership **A4:** You must receive valid consent for all aspects of examination and treatment and record this as appropriate.



'Being observed in practice or observing the practice of others can be an excellent way of gaining new and different insights into osteopathic care for patients'

The guidance to A4 doesn't specifically talk about observers in practice, but it's important that patients give consent to anyone else being present. Patients should be specifically informed as to the purpose of the observation, normally in advance of their consultation so that they are able to consent: for example, is the purpose of the observation to support a student in their osteopathic training, or an observer to give you feedback on your practice as part of your own development? The patient should also be reassured regarding issues of privacy, confidentiality, and the management of their information (see the Ensuring Confidentiality section on page 13). They shouldn't feel under any pressure to have an observer in the room and should

understand that they are free to decline the request or change their minds without prejudicing their treatment or care.

Keeping patient records

There is guidance in the OPS in relation to what your records should include:

Theme C: Safety and quality in practice

C2: You must ensure that your patient records are comprehensive, accurate, legible and completed promptly.

C2.1.15: where an observer is present (for example, a chaperone, peer observer, osteopathic student, or potential student) as well as their status and identity, you should record the patient's consent to their presence.

Ensuring confidentiality The OPS sets out:

> Theme D: Professionalism D5: You must respect your patients' rights to privacy and confidentiality, and maintain and protect patient information effectively D5.1.2: ensuring that your staff or anyone else attending your clinic in a professional capacity (for example, students of osteopathy, potential students or peers) keep such information confidential.

The guidance does not stipulate how you should ensure that confidentiality is maintained, so this is up to you. You might, for example, ask observers to sign a form in which they agree not to disclose patient information outside the practice.

CPD: what you need to consider about observers

If you are interested in trying out peer observation as an objective activity towards the new CPD requirement, there is a workbook available on our CPD site (see More Information).

I was asked recently whether having a student observer might count as CPD for the osteopath being observed. The answer is – it depends. If you gain feedback from the osteopathic student, for example, that enables you to reflect on your practice, then you may well feel that this forms useful CPD. Understanding current approaches within osteopathic education might also be useful CPD – for example, how would a student gain



consent from a patient – does this differ from your method? As with all CPD, remember to reflect on and record the activity to outline what you did, and the impact of this on your practice. The templates available on the GOsC website can help you to do this.

Having an observer and the considerations around this might also fall within the context of this standard:

D9: You must support colleagues and cooperate with them to enhance patient care.

This might, then, also contribute to CPD under the OPS theme of **D:** Professionalism. ●

MORE INFORMATION

You can read the Osteopathic Practice Standards online: <u>standards.osteopathy.org.uk</u> Visit the CPD site: <u>cpd.osteopathy.</u> <u>org.uk</u> Check out the new Peer Observation Workbook: <u>cpd.osteopathy.org.uk/resources/</u> <u>peer-observation-workbook</u>

Quick guide to observers in your practice

- There are a number of circumstances in which you might wish to have an observer in your practice, and this can be accommodated easily within the scope of the Osteopathic Practice Standards.
- Patients must be informed as to the context of the proposed observation, and they must consent to the observer being present.
- Patients must be able to refuse or change their mind without feeling under any obligation and without affecting their treatment.
- The presence of any observer should be recorded in the patient's records.
- You must ensure that patient confidentiality is maintained.

Practising Peer Discussion Review

Osteopath **Lucy Ross-Browne** explains how practising a Peer Discussion Review will help her reflect on and plan her CPD over the three-year cycle

eer Discussion Review is one of the new elements of the CPD scheme and needs to be completed before the end of the three-year cycle. Lucy qualified from the British School of Osteopathy (now the University College of Osteopathy) in 2003 and now lives and works in Dorset. Lucy set up the Practice at Ferndown with her osteopath husband George 12 years ago. She is a member of the Dorset Osteopathic Group and regularly attends meetings for CPD and peer support, as well as completing in-house CPD in practice.

'I made the decision to take my head out of the sand and get to grips with the new CPD scheme a year before I started on it, after a meeting about the new scheme at the Dorset Osteopathic Group. Like many others I had found the whole process of change daunting, so I decided to run a trial year of recording my CPD as if I had already started the three-year cycle.

'So I downloaded the Peer Discussion Review template (page 14 of the Peer Review Guidance) and filled it in for each CPD activity. I realised that I needed to plan my objective activity in line with

'I found the reflection element meant I was actually getting far more from each activity'



Helena Greenwood and Lucy Ross-Browne (on right) practise a Peer Discussion Review

the questions that need to be answered on the form. To my surprise, the whole process was not that arduous and I found the reflection element of the process meant I was actually getting far more from each activity throughout the year.

'I met with fellow osteopath Helena Greenwood to conduct a "mock Peer Discussion Review", presenting our CPD activities to each other over a latte in a café in Dorchester – a process, in retrospect, that was useful, reassuring and actually enjoyable (I know! – who would've thought I'd say that?).

'It became apparent that I need to think a bit more about the planning of CPD over the next three years, especially the objective activity – but that's OK, now I've thought about it, as I can plan a peer observation, clinical audit or a patient questionnaire.

What did I take away from this exercise?

'A sense of relief – I realised that much of the CPD I'd already been doing under the "old" CPD scheme would fulfil the requirements of the "new" scheme including:

- all Osteopathic Practice Scheme (OPS) themes covered
- objective activity
- communication and consent activity
- CPD with reflective aspect recorded appropriately

'But above all, I now have a plan. A plan of how to make the next three years work for me, while meeting the new requirements. The practice Peer Discussion Review wasn't formal or demoralising, just two colleagues sharing ideas, guiding each other's learning and enjoying a coffee. I'm very glad I didn't wait until the end of the three-year cycle to discover which areas I needed to focus on, and I'd highly recommend the process to anyone.'

FIND OUT MORE ABOUT PEER DISCUSSION REVIEW

 Go to <u>cpd.osteopathy.org.uk/pdr</u>
 Read the Peer Discussion Review Guidance, including a template for the meeting, at:

cpd.osteopathy.org.uk/resources/ peer-discussion-review-guidelines 3. Read a case study of how the Northern Ireland Osteopathic Group practised Peer Discussion Reviews as a group at: cpd.osteopathy.org.uk/pdr

Getting to grips with new CPD

Why not take part in a webinar, attend a session on CPD, or let your regional or local group lead know about any questions you have about the new scheme?



SIGN UP FOR FREE OBJECTIVE ACTIVITY WEBINARS WITH THE GOsC

We have launched a range of webinars providing the opportunity to work on objective activities including:

- case-based discussion
- patient feedback
- peer observation.

Objective activities are all about getting feedback on what you do and you'll need to carry out at least one objective activity during your three-year cycle of the new CPD scheme.

Taking part in a webinar series will give you the chance to learn new skills, complete an objective activity as well as network with other osteopaths. There are two webinar options on offer:

In-depth series: get the chance to work through an objective activity from start to finish under the guidance of a GOsC facilitator. You can choose from three objective activities and will sign up to a series of three to four webinar sessions to work through that activity.

Two-webinar sessions: if you are time-pressured or just want to do an objective activity at your own pace but with some input and guidance from a GOsC facilitator, you can sign up to join two webinars on a specific topic.

By signing up to a webinar you are committing to attend all the webinars in the series. Spaces are limited and will be allocated on a first-come first-served basis.

For more information on dates and booking details go to: <u>cpd.osteopathy.org.uk/cpd-webinars</u>

COME ALONG TO OUR CPD SCHEME SESSION AT THE IO 2019 CONVENTION

Are you still getting to grips with the new CPD scheme? Come along to the GOsC's session on Saturday 2 November at the 2019 Institute of Osteopathy (iO) Convention in Heathrow, London.

The GOsC session will start with a practical overview of the new CPD scheme, followed by breakout sessions where you can talk about specific topics. The session aims to be flexible to respond to the needs of participants, as osteopaths are at different points in their CPD cycle and have questions on different aspects of the scheme. Topics are expected to include planning your CPD cycle, recording your CPD and the Peer Discussion Review.

Find more information and book your ticket at: <u>iosteopathy.org/event/io-</u> <u>convention-2019-building-a-growing-and-</u> <u>thriving-profession</u>

WHAT YOU'VE BEEN TELLING US

Since last March, the GOSC has delivered presentations on the new CPD scheme to more than 200 osteopaths, from the iO Roadshow events in Manchester, Perth and Maidstone, to regional group presentations in Sussex and Cambridge.

The majority of osteopaths we've met so far have said that the new CPD scheme is more straightforward and less intimidating than they had anticipated. They quite often say that they didn't feel prepared for the scheme before the presentation, but afterwards they have a clearer understanding of the requirements and are aware of the resources and useful tools that are available. They also feel more confident about starting on the scheme. The importance of planning is raised repeatedly, with many osteopaths indicating that they want to start sooner rather than later and intend to record their CPD as they progress through their CPD cycle. Most questions from osteopaths centre on the Peer Discussion Review, clinical audit, and how to link their CPD to the Osteopathic Practice Standards.

You can find answers to these sorts of questions at: <u>cpd.</u> <u>osteopathy.org.uk</u> Or, if you have specific questions or concerns, tell your regional or local group leads as we have invited them to bring your feedback to us in Q&A webinars over the summer. Or contact the GOsC directly by emailing: <u>newcpd@osteopathy.org.uk</u>



Working and learning together

There can be challenges in working with and understanding the role of other health professionals, but help is at hand with a project to share good practice



Fiona Browne, GOsC Director of Education, Standards and Development, explains how osteopaths working with other health professionals can improve communication and result in joined-up high-quality patient care

ommunicating with other health professionals to support a patient health journey is sometimes reported by osteopaths as being challenging.

In any communication between people, ideas are transmitted by the giver and hopefully understood by the receiver. But the challenge is that each communication is framed and interpreted through the particular individual's own unique experiences, contexts, assumptions and biases. Matters such as using different language to describe things, or simply 'thinking as an osteopath', or 'thinking as a doctor', can contribute to misunderstandings both for the giver and the receiver of the information.

There can also be challenges in terms of the level of understanding other health professionals have around what osteopaths do, as well as challenges for osteopaths in understanding what exactly other health professionals provide for patients. Add to this the potential dangers on both sides in making incorrect assumptions about individual osteopaths or other individual professionals, it is perhaps not surprising that there is potential for miscommunication.

It can be the patient who suffers when there is miscommunication. Trying to connect the different perspectives on their own health can end up being a burden on the patient, and can impact their ability to live their life in the way they want.

So what can we do to support better communication between osteopaths and other health professionals to support patient care?

We know some osteopaths are already working successfully with other health professionals for the benefit of patients, bringing together different and broad insights, and outcomes, that may not have been possible without collaboration and good communication across professions. We at the GOSC, the General Chiropractic Council (GCC), the Council of Osteopathic Educational Institutions (COEI) and the Centre for the Advancement of Interprofessional Education (CAIPE), are keen to gather these examples of good practice so we can understand more about them and help share the learning with osteopaths, and other health professionals, to enhance effective communication both for the benefit of the patient and also for all health professionals involved. So do please get in touch – see details below.

We are delighted that CAIPE recognises the role of osteopathy and chiropractic in joined-up patient care and is keen to work with the GOsC, the GCC and with COEI as we gather osteopathic examples of good practice in interprofessional care to inform and enrich osteopathic education.

Dr Kerstin Rolfe, Chair of the Council of Osteopathic Educational Institutions (COEI), said:



'Osteopathic educational institutions are keen to provide opportunities for osteopaths to work with other health ollaborative project

professionals. This collaborative project will help to support these opportunities as well as to support others to understand the contribution that osteopathy can make to patient care.

'This collaboration will also help the educational institutions to work with

faculty to consider further opportunities for support and development arising from this work. We are very pleased to have the opportunity to work with CAIPE, the GOSC and the GCC.'

Penny Bance, Director of Education, Registration, Standards at the General Chiropractic Council (GCC), said:



'The GCC is committed to supporting high quality patient care and we are excited to work with CAIPE, GOSC and

COEI to explore opportunities for professionals working and learning with others'.

Richard Pitt, Chair of the Centre for the Advancement of Interprofessional Education (CAIPE), said:

'CAIPE welcomes the opportunity to work with the GOSC, COEI and the GCC in a project to facilitate and support osteopaths and chiropractors and other health professionals to work together around the patient and patient journey, to collate case studies about the benefits of doing so for patients and practitioners. It is hoped the collection will provide a rich and useful resource both for practising professionals and educators, students and others.'

→

SHARE YOUR EXAMPLES OF WORKING SUCCESSFULLY TOGETHER

Do you have any examples of how you are or have previously worked successfully with other health professionals for the benefit of patients that you can share with us? If so, please email Fiona Browne at: <u>fbrowne@osteopathy.org.uk</u>

Do you want to learn more about the work that CAIPE does? If so, please visit its website <u>caipe.org</u> – and see page 18.

Collaborating for education



Richard Pitt, Chair of CAIPE, outlines how learning together can lead to a better understanding of other health and social care professions

Richard Pitt is Chair of CAIPE, and has been an active member since 1997. Through CAIPE (Centre for the Advancement of Interprofessional Education), Richard promotes quality collaborative practice to support patient care between different health professions with a range of organisations in health and social care including the Professional Standards Authority; the nine UK statutory health professional regulators; higher education institutions; the World Health Organization; Health Education **England; Public Health England; NHS England; and NHS National Services** Scotland.

Originally qualifying as a nurse, Richard has recently retired from active roles over the past 40 years in nursing and higher education, most recently as Director of Interprofessional Learning in the Faculty of Medicine and Health Sciences, at the University of Nottingham.

n increasingly ageing population with complex health and social care needs is making it ever more necessary for health and care professions to have an understanding of each other's role in the delivery of safe quality care. Identifying interprofessional opportunities for students of osteopathy and chiropractic and registered professionals to learn or practise with other health professions in the UK has been reported to be challenging because of the limited opportunities to do so. This means that opportunities to support other

professions to learn about osteopathy and vice versa can be limited.

The benefits of collaborating

- Registered professionals can benefit from addressing interprofessional collaboration issues to support changes to further develop and improve practice (Reeves, Tassone, Parker, Wagner, & Simmons, 2012).
- Health and social care students can benefit from mutual learning and understanding about the roles of different health and social care professionals in relation to a particular practice area being studied in a classroom and/or placement context

METHODS OF LEARNING TOGETHER

There are many ways that students and registered health professionals can learn and work together. Examples of interprofessional education can include:

- interactive/simulation of cases
- volunteering in other settings
- clinic-/community-based
- approaches
- digital stories
- patient journeys/experiences
- reflection
- immersion events (a highly participative session bringing together a number of different health professional students) (Blue, Mitcham, Smith, Raymond, Greenberg, 2010; Buring, Bhushan, Broeseker, et al, 2009; Bridges, Davidson, Odegard, Maki, Tomkowiak, 2011).

 Patients can benefit from more joinedup care.

Changes are needed in education to create the right environment for sustained change

To be effective, there is a need for attention at the structural level of interprofessional education. For example, the introduction of organisational sponsorship and leadership, and programmes that work at the interface of education and practice could be helpful. Faculty and professional development also needs to occur in parallel to curriculum development.

Developing faculties, providing different opportunities and support, can prepare faculty members to deliver a workable curriculum for the local context and in the process, advance faculty members' skills to teach, implement and offer interprofessional education that assures student engagement (Anderson, Hean, O'Halloran, Pitt & Hammick, 2014).

Interprofessional education has the potential to involve practitioners in deeper reflection and analysis of their collaborative working (same ref). This, in turn, enhances patient care. Their examples are mainly drawn from undergraduate curriculum development, but apply equally to postgraduate, classroom and practice-based interprofessional education. Clearly there are challenges for educators in the development and delivery of effective interprofessional education, but there are ways to overcome these and ultimately we can work towards bringing interprofessional education practitioners together as a community of practice.

What is CAIPE?

The Centre for the Advancement of Interprofessional Education (CAIPE) was established in 1987 as a membership organisation and UK-based charity, to promote health and wellbeing and to improve the health and social care of the public by advancing interprofessional education (IPE).

CAIPE is a community of practice committed to collaborative working across health and social care and related services. CAIPE aims to promote and develop interprofessional education, research, learning and practice nationally and globally. The organisation supports students, academics, practitioners, researchers and people who use services by sharing information, informing, educating, publishing and enabling networking opportunities.

CAIPE has a range of publications, particularly for educators, to help inform the development of interprofessional learning in education. For example:

■ Principles of Interprofessional Education to support successful inclusion of interprofessional education covering values, process and outcomes for the consideration of all who are engaged in commissioning, designing, delivering and evaluating interprofessional education (CAIPE 2011).

• Steering the development of interprofessional education: Exploring how a peer group can support learning, the resolution of conflicts, and the development of insight, understanding and skills (Barr, Gray, Helme, Low, & Reeves, 2016).

■ Introducing Interprofessional Education is addressed to readers new to interprofessional education who want to learn more as they prepare to become involved in pre-qualification, post-qualification or work-based



interprofessional education. It can be used by individuals working alone but will have added value if used by a group. It offers examples from around the world to demonstrate the range of models and approaches used according to local need and resources. Questions are included to stimulate reflection, discussion and creative thinking within your local context (Barr, Low & Gray 2013).

■ IPE in Pre-registration Courses – CAIPE Guide for Commissioners & Regulators of Education (Barr, Low & Howkins 2012) also supports influencing commissioners and providers of interprofessional education.

CAIPE works to influence and inform the regulators of health and social care professions through representation and ongoing dialogue with key thinkers in a variety of forums and through dissemination and promotion of examples and benefits of successful interprofessional working for patients.

JOIN CAIPE AS A MEMBER

For anyone interested in finding out more about interprofessional learning and working together, CAIPE offers membership to students, individuals (academics/ practitioners/researchers), service users and carers and organisations. Membership offers access to many resources on the CAIPE website; IPE literature; publications; engagement with working groups; events and conferences. CAIPE's most recent innovation is the development of nine IPE digital stories for teaching, stimulating discussion and to enhance learning. CAIPE also provides workshops, consultancy and speakers to organisations.

Several interprofessional education events are held every year to share IPE developments, innovations and experience, for CAIPE members. These events provide the opportunity to network with key educators in other professions and to enhance the understanding of osteopathy as well as other professions.

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Helping CUTIES



NCOR Director **Dawn Carnes** outlines plans for the CUTIES study to build an evidence base for osteopathy in the care of infants



niversity College of Osteopathy (UCO) and the National Council for Osteopathic Research (NCOR) have secured resources to conduct a randomised controlled trial to assess the effectiveness of osteopathic care for the treatment of distressed and unsettled infants who cry excessively (eg babies with colic/silent reflux). The study will be called CUTIES, which stands for Crying, Unsettled, disTressed Infants: Effectiveness Study, and is expected to start later this year.

After several years of requests from the profession for a randomised controlled trial in this area I am delighted to lead this trial which will be funded by NCOR and sponsored by UCO. The European School of Osteopathy has confirmed its collaboration and we have also established links with osteopathic universities in Australia and Switzerland as potential recruiting sites, making this a multicentred international study.

Why is this study needed?

The reason why we think this study is important is because infants who cry excessively, and are unduly distressed and unsettled, can have a marked impact on family life. Around one in six families are affected (Hiscock, Jordan 2004) with excessive infant crying associated with maternal depression, anxiety and loss of parenting confidence (Johnson et al 2015). The six to eight week natural peak for crying in infants has been associated with the peak age for severe infant injury or death as a result of abuse, and can have deleterious effects on maternal mental health (McCallum et al 2011).

In the UK, we estimate that between 87,500 to 175,000 parents in the UK are seeking osteopathic care for their infants (Fawkes et al 2013, GOsC.org.uk). To put this in context, there were 679,106 infants born in the UK in 2017 (Office for National

'We are looking for osteopaths to recruit infants into the trial and to deliver interventions – volunteers will be trained' Statistics). This means that around one in every eight/nine infants may present for osteopathic management.

The trial will provide information to support osteopaths, parents and other interested parties such as commissioners and educators in their decision-making about the treatment and care of infants (Carnes et al 2017).

The study will determine the effectiveness of osteopathic care on crying time, confidence in parenting, overall perceived change, and parental satisfaction and experience with osteopathic care. We will also monitor safety and risks, and determine the costs of osteopathic care for infants who are unduly distressed, unsettled and crying excessively.

The study is designed as a pragmatic (real world) randomised controlled trial comparing the difference between best usual advice with the addition of osteopathic manual therapy and best usual advice with a non-specific attention control in infants. The infants in the study will be less than 10 weeks old and will be those who have been crying excessively for at least three hours per day over three days or more, over three weeks or more.

What methodology will be used?

The design of this study will enable us to assess the effect of adding osteopathic manual therapy to a standard consultation consisting of a case history, a health screening (and hence reassurance that the infant is otherwise well and not requiring onward referral) and best practice advice (based on UK NHS guidance). The control arm will involve a light, non-specific touch attention equivalent design which is not intended to be an active physical manual treatment, hence there will be no movement of tissues or fluid flows. There are studies comparing light touch massage that show a small difference in beneficial outcomes for behavioural states (Field et al 2006, Vickers et al 2004) and other studies that show there are contextual beneficial elements of care involving touch (Teunis et al 2017, Meltzoff et al 2018). This means all infants and parents will receive best practice advice and the equivalent benefits of touch but only the intervention group will receive osteopathic care-based touch.

We are in the early stages of defining the protocols for the trial, registering the trial, and seeking ethical approval. We aim to start recruiting infants into the trial later this year.

ARE YOU INTERESTED IN TAKING PART IN THE STUDY?

We are looking for osteopaths now who may be interested in recruiting infants into the trial and delivering the interventions. We will train volunteer osteopaths in trial procedures and the delivery of the treatment and management package.

This is an excellent opportunity for osteopaths who have experience of treating infants, who are interested in doing research and providing an evidence base for the profession.

Please contact Professor Carnes at <u>dawn.carnes@uco.ac.uk</u> for further information if you are interested in taking part.

References

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Take part in the OsteoSurvey



NCOR Researcher **Austin Plunkett** explains why it's important to take part in the OsteoSurvey, describing nationwide osteopathic practice

he National Council for Osteopathic Research (NCOR) is launching a nationwide survey in order to update our understanding of the profile of people who consult osteopaths, and the role that osteopaths play in the country's health system. Your participation will make a valuable contribution to the profession.

The OsteoSurvey will help us understand what has changed in the nature of osteopathy practised, and in the people currently seeking osteopathic care, over the 10 years since the work underpinning our last survey.[†] Key findings from our previous work included the age distribution of patients nationally, their responses to treatment, and the reasons they seek osteopathic care.

Information about your work will help to raise awareness of how patients benefit from all osteopathic approaches. It will also give you an opportunity to consider your practice and any future training needs. Your reflections on participating in the OsteoSurvey will be suitable for including in your CPD records.

People who are considering treatment from any profession expect access to information about how the clinicians practise, and the OsteoSurvey will help us describe osteopathic care to the general public and other healthcare professionals. Providers of professional development and osteopathic education courses will find the OsteoSurvey valuable in prioritising research and formulating teaching plans. By exploring how osteopathy adapts to a changing population and to new healthcare approaches, we also hope that



'Your reflections on participating will be suitable for including in your CPD records'

potential students will see osteopathy as a rewarding career choice.

Participating osteopaths will be asked to provide basic demographic information for randomly selected patients as well as details of presenting complaints, medical history, and osteopathic assessment and treatment. This information is kept completely separate from information about the participating osteopath, and there is no way for the research team to work out who submitted which patient records. There are clear instructions throughout the survey, and we have piloted it with a group of osteopaths to ensure usability.

How will data be stored and used?

The information collected is unlikely to make any individual osteopath identifiable, and no attempt will be made by NCOR to discern any identity. Data will be stored in a certified data centre at Queen Mary University of London (QMUL), and will be processed and hosted in accordance with data protection regulations. Only NCOR/QMUL research personnel will have access to the complete, anonymised dataset. All patient data will be anonymised and it will not be possible to identify any individual patient. This study has undergone review by Barts and the London School of Medicine and Dentistry Ethics of Research Committee (Panel D, ref QMERC2019/23) at QMUL and was granted approval.

References

^T Fawkes C, Leach J, Mathias S, Moore A. 2010. Development of a standardised data collection (SDC) tool to profile osteopathic practice in the United Kingdom. International Journal of Osteopathic Medicine 2013 Mar;16(1):e10. doi: 10.1016/j. ijosm.2010.07.015. <u>bit.ly/JJOM-SDC</u>



TAKE PART IN THE OSTEOSURVEY Take the survey now at: ncor.org.uk/osteosurvey

Courses 2019

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

August

1

The vital glutes and psoas masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex, Jackdaw Lane, Oxford, OX4 1EQ Tel: 07850 176 600 johngibbonsbodymaster. co.uk

2

Muscle energy techniques masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex

5

The vital knee joint masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex

6

The vital hip and groin masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex

8

Cambridgeshire Osteopathic Group: clinical conundrums – a peer group discussion on challenging situations Venue: Oakingtons Osteopathic Clinic, 1 Longstanton Road, Oakington, Cambridge CB24 3BB cog@oakingtons.com

14 Cambridgeshire Osteopathic Group: emergency first aid at work

Venue: Dry Drayton Village Hall, High Street, Dry Drayton, Cambridge CB23 8DD cog@oakingtons.com

September

2 Kinesiology taping for the athlete masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

3-4

Advanced soft tissue techniques masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

5

The vital nerves masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

6

Spinal manipulation and mobilisation technique masterclass Speaker: John Gibbons

Venue: Oxford University Sports Complex

7

Cambridgeshire Osteopathic Group: anatomy workshop with Cambridge University Venue: The Anatomy Building, 7 Downing Place, Downing Street, Cambridge CB2 3DY cog@oakingtons.com

7-8 Spinal and peripheral manipulation

Speakers: Ben Calvert-Painter and Danny Church Venue: London School of Osteopathy (LSO), 12 Grange Rd, London SE1 3BE info@cpd-today.co.uk cpd-today.co.uk

Bump to baby: part 1 – treating the pregnant patient

Speaker: Miranda Clayton Venue: Northallerton Osteopaths, Hale House, 62 Thirsk Rd, Northallerton, North Yorkshire DL6 1PL Tel: 07792 384 592 mumandbabyCPD@gmail. com mumandbaby-at-home.com/ cpd-courses

10

8

Advanced spinal manipulation masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

11

The vital shoulder complex masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex

11

Dorset Osteopathic Group CPD event: the gut-bone connection Venue: Dorford Centre, Bridport Road, Dorchester, Dorset DT11RP

Dorset, DT1 1RR dorsetosteogroup@gmail.com

14-15

Paediatric osteopathy for under 1s

Speaker: Samantha Fennell Venue: University College of Osteopathy (UCO), 275 Borough High Street, London, SE1 1JE Tel: 020 7089 5333 bit.ly/UCO-paed-Sept19

14-15

Applied biomechanics of the spine Course tutor: Francesco Contiero Venue: UCO bit.ly/UCO-spine-Sept19

15

Paediatric sensory integration and GI dysfunction in autistic children Course tutor: Dr Bramati Venue: UCO bit.ly/UCO-autistic-Sept19

16

Cambridge Osteopathic Group: lower extremity Venue: Spire Hospital, Impington Cambridge CB24 3BB cog@oakingtons.com

17

Cambridge Osteopathic Group: gender identity Venue: Dry Drayton Village Hall, High Street, Dry Drayton, Cambridge CB23 8DD cog@oakingtons.com

20-22

The pelvis, sacroiliac joint and lumbar spine masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

21

The miserable baby: part 1 – treating feeding and digestive disorders in babies Speaker: Miranda Clayton Venue: LSO Tel: 07792 384 592 mumandbabyCPD@gmail. com mumandbaby-at-home.com/ cpd-courses

28

Differential Diagnosis of Pain

Speaker: Trevor Campbell Venue: European School of Osteopathy, Maidstone, Kent Tel: 01622 671 558 cpd@eso.ac.uk eso.ac.uk/postgraduate

28-29

Hartman's masterclass in manipulative techniques: lower body

Speaker: Prof Laurie Hartman Venue: Whittington Education Centre

28-29

Development and refinement of assessment and treatment to the lumbo-pelvic girdle Speaker: Sam Jarman Venue: City North Hotel, Dublin cpd@qhealthcareni.com facebook.com/ groups/2370921523185876/ about

30

The vital knee joint masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex

October

1

The vital hip and groin masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

2 The vital cervical spine masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex

3

Muscle energy techniques masterclass Speaker: John Gibbons Venue: Oxford University

Sports Complex

The vital glutes and psoas masterclass Speaker: John Gibbons

Venue: Oxford University Sports Complex

5

From paleo to vegan: how to make sense of special diets and their impact on human health and wellbeing Holding back the years: diet and exercise strategies to increase health-span Speaker: Prof Adam Cunliffe Venue: Whittington Education Centre

5-6

Hartman's masterclass in manipulative techniques: lower body

Speaker: Prof Laurie Hartman Venue: Whittington Education Centre

5-6

Complete taping course Speakers: Ben Calvert-Painter and Danny Church Venue: LSO info@cpd-today.co.uk cpd-today.co.uk

5-6

An osteopathic journey Speaker: Peter Cockhill Venue: House for an Art Lover, Bellahouston Park, 10 Drumbreck Road, Glasgow, G41 5BW admin@osteopathic-collective. com

7 Spinal manipulation and mobilisation technique masterclass Speaker: John Gibbons

Venue: Oxford University Sports Complex

8 The vital shoulder complex masterclass

Speaker: John Gibbons Venue: Oxford University Sports Complex

9

Kinesiology taping for the athlete masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

10

Advanced spinal manipulation masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

12

Dorset Osteopathic Group CPD event: foot forum

Venue: Safewise, Weymouth dorsetosteogroup@gmail. com

12

The five Cs of the Osteopathic Practice Standards Speaker: Deborah Smith Venue: UCO bit.ly/UCO-OPS-Oct19

12-13

The abdomen: visceral osteopathy Speaker: Valeria Ferreira Venue: UCO bit.ly/UCO-abdomen-Oct19

20

Bump to baby: part 2 – treating the pregnant patient Speaker: Miranda Clayton Venue: LSO Tel: 07792 384 592 mumandbabyCPD@gm.com mumandbaby-at-home.com/ cpd-courses

26

Osteopathic concept of spiritual fulcrum

Speaker: Richard Holding Venue: The Old School Hall, Mill Rd, Cambridge CB1 2BD Tel: 07508 113 439 averille001@gmail.com

26-27

Functional stretching Speaker: Dr Eyal Lederman Venue: Whittington Education Centre

November

2-3

Advanced dry needling/ medical acupuncture Speaker: Aaron Shewring and Ben Calvert-Painter Venue: LSO

4

Muscle energy techniques masterclass Speaker: John Gibbons

Venue: Oxford University Sports Complex

a

Demystifying the female pelvic floor

Course tutor: Sandie Ennis Venue: UCO bit.ly/UCO-pelvic-Nov19

9-10

Hartman's masterclass in manipulative techniques: upper body

Speaker: Prof Laurie Hartman Venue: Whittington Education Centre

10

Still technique part 1: introduction to still technique Speaker: Jonathan Edis Venue: UCO bit.ly/UCO-still-Nov19

11-12

Advanced soft tissue techniques masterclass Speaker: John Gibbons Venue: Oxford University Sports Complex

Classifieds

Osteopath required: Cheltenham

Busy practice in the centre of Cheltenham requires structurally orientated practitioner to join our multi-discipline team. Great opportunity with principal retiring in a few years. Experienced colleague, or recent graduates all welcome to apply. CVs to <u>swdavies@</u> <u>vineyardpractice.com</u> or call: 07952 541 919.

Osteopath required: Newmarket, Suffolk

Our great team requires another great team player. Excellent remuneration and fully equipped new rooms. A range of hours available. Structural plus a specialisation preferred. Apply to: info@ derbycottageclinic.com or call 01638 577 121.

Osteopath required: Limerick, Ireland

An osteopath with mainly

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Contact: Celia Davey Tel: 0117 300 8862 Email: theosteopathadvertise@ immediate.co.uk structural skills is required for our very busy clinic in Limerick. A patient list is available immediately. We are offering excellent terms. Experience preferred but not essential. Enquiries to: info@ efosteopathic.com

Associate osteopath required: Bourne and Stamford, South Lincolnshire

Wanted for two busy practices. Immediate start option. Part week or full week available with job share. Flexible up to 2.5 days per clinic. Good structural skills required and others very welcome. CPD and mentoring offered. CV and questions to: <u>philip@</u> thewellheadpractice.co.uk

Associate osteopath required: Carshalton and/ or Woking, Surrey

To work for The Surrey Osteopaths, runner up Practice of the Year in Institute of Osteopathy awards. We are seeking a talented osteopath with excellent structural and massage skills to work 2/3 days in each clinic. Both settings are in large leisure centres where the successful applicant will benefit from a complimentary gym membership. Please send CV and cover letter to: <u>ricky@</u> <u>thesurreyosteopaths.com</u>

Associate osteopath required, South Gloucestershire

Enthusiastic associate required in busy, wellestablished practice in South Gloucestershire. Initially 2 days per week with some evening work. Please email CV to the Clinic Manager at: heathcliff@btopenworld.com

Associate/locum osteopath required: Hereford

For Hereford Osteopathic Practice: kvrlehouse.co.uk. We are looking for an osteopath to cover maternity leave (9-12 months), leading on to an associate position, from August/September. This is a great opportunity for an enthusiastic colleague, with a broad interest in treatment approach, to join our multidisciplinary team; comprising osteopaths, physiotherapists, an MSK doctor, acupuncturists and other Allied Health Professionals, supported by excellent front desk staff. The position is likely to be a busy one from the start and represents a rare opportunity to build a fulfilling, wide ranging patient list, while living in an affordable and beautiful part of the UK. Would suit a new graduate or colleague wishing to relocate. Please email CV and covering letter to: robertw_blackburn@ icloud.com, or call 01432 273 234, should you wish to discuss.

Associate/locum osteopath required: Rushden, Beds/Northants borders

We have one osteopath on maternity leave, one backpacking around the world, and one going on paternity leave – so we're bursting with patients! If you're looking for a busy list including new patients (not just over-spill or leftovers), if you want lots of fun, mentoring and case discussions, come and join us. Proper mentoring programme being put in place for new grads. 20 mins north of Bedford. Email: reception@ ashgrovehealth.co.uk

Practice for sale, North Pennines

Practice for sale in the stunning North Pennines, due to retirement. Near Consett, an ever-expanding town and a wonderful centre for the great outdoors. Very reasonable living costs, friendliest people and I will be sad to leave. Currently three osteopaths at the clinic, brilliant reception and admin staff all working from rented premises. A very flexible handover available. Active list in excess of 2,100, turnover 72k increasing annually. Sale to include database, website, phone, some equipment etc. Reasonable offers considered. Please contact: busylizzyb159@gmail.com or call 01432 273 234, should you wish to discuss.

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For further information: . +44(0)20 7882 5015 s.lack@qmul.ac.uk s.tracey@qmul.ac.uk

qmul.ac.uk/sportsmed

The course is based on the philosophy of total care for the athlete and the promotion of physical activity in the general population.

Working in sport is a largely practical discipline and the programme's emphasis lies firmly on regular clinical experience.

Osteopathic Centre for Animals



Duration: Location:

Course Leader:

1 Year part-time **Osteopathic Centre for** Animals (Oxfordshire) Stuart McGregor DO Validating Body: University College of Osteopathy

We are currently accepting applications for September 2019 entry.

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Post-Graduate Diploma in Women's Health – Osteopathy – Starting April 2020

Only a few places left on this popular two-year part-time course. The programme provides a fantastic opportunity for qualified osteopaths to gain an in-depth understanding of Women's Health and to become part of a body of practitioners with a specific expertise in this field. The syllabus will cover all the various stages in a woman's life, puberty, pregnancy, menopause as well as specific gynaecological problems. The course led by Prof Renzo Molinari is supported by a team of renowned international lecturers and complemented by a teaching clinic where the students can develop their expertise. Apply now!

MIH Post-Graduate Programme 2019/20

'From traditional to new approaches in Osteopathic techniques' 30 November and 1 December 2019

An exceptional seminar that revisits osteopathic techniques from the traditional approach to innovative new ways to adjust the articular function. This seminar will change your way of practising. Speakers: Robin Lansmans. Jonathan Daniells and David Lachaize

Speakers: Robin Lansmans, Jonathan Daniells and David Lachaize

'Men's Health'

13 and 14 June 2020

Men often present very specific problems and have difficulty talking about them. Become a practitioner able to understand and develop a treatment strategy. This seminar will address a real need and will give you practical and clinical answers on how to deal with these cases. Speakers: François Allart, Prof Renzo Molinari and Daniel Brogan

'The best kept secret in Osteopathy: the bone' 5 and 6 December 2020

Speaker: Jo Buekens

Fee per seminar: \pounds 340 including refreshments / \pounds 280 including refreshments for MIH Members

Osteopathic Seminars in los

24 - 29 May 2020 Speakers: Jean-Pierre Barral, Prof Renzo Molinari and Jo Buekens

13 - 18 September 2020 Speaker: Claudine Ageron Mar + 1



Dissection courses

In collaboration with the Faculty of Medicine, Nice. 22 - 23 November 2019

Winner

'Abdomen and pelvic area' Dissection with a member of the Faculty of Medicine, Practical Workshop. Speaker:Prof Renzo Molinari Fee: £420

To register please contact: Corinne Jones:

corinnejones.mih@gmail.com or visit our website:

www.molinari-institutehealth.org

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2-year: www.occ.uk.com/Diploma-in-Paediatric-Osteopathy 1-year: www.occ.uk.com/Award-PO

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MORE COURSES

Osteopathy in the Cranial Field [M2] with DIANNA HARVEY

Columbia Hotel, LONDON	non-res
11–15 SEP 2019	£990
Rule of the Artery [Part 1] with TIM MARRIS	
Hawkwood, STROUD	non-res/res
29 SEP-1 OCT 2019	£895/£995
Paediatric Diploma Access with HILARY PERCIVAL & MA	-
Hawkwood, STROUD	non-res/res
1 NOV 2019	£200/£289
Obstetrics [P1] with HILARY PERCIVAL & MA	.RK WILSON
Hawkwood, STROUD	non-res/res
2–3 NOV 2019	£549/£599
Living, Breathing Bone [Me with JANE EASTY	5]
Hawkwood, STROUD	non-res/res
8–10 NOV 2019	£895/£995
Integrating Cranial into Pr with JEREMY GILBEY	ractice [M10]
UCO, LONDON	day
16 NOV 2019	£165
Foundation Course [M1] with PENNY PRICE	
Crista Galli, LONDON	non-res
16–17 NOV 2019	£275
Paediatric Neurology I [P2] with HILARY PERCIVAL & MA	.RK WILSON
Hawkwood, STROUD	non-res/res
1–2 FEB 2020	£549/£599

NEW COURSES FROM SCCO

Rollin Becker Memorial Lecture & Workshop

Speaker: SUSAN TURNER

LECTURE £25 / WORKSHOP *£165

LECTURE: Essential Philosophy with the Art and Science of Osteopathy



Exploring the philosophical foundations of our craft and how the inspirational teachings of the early osteopaths continue to guide and enliven our community today. Sutherland, Becker and others saw the need to 'read between the lines' of Still and to forever 'dig on'. When we draw sustenance from the roots of the osteopathic tree, we tend its living shoots with greater surety, even in unstable times.

WORKSHOP: Tuning the Instrument

Introducing the practical application of some 'guiding thoughts' from our osteopathic predecessors and contemporaries in related fields. These thoughts will form a starting place, through cooperative enquiry, to set the stage for wider perception in palpation, diagnosis and treatment.

Praise from previous Rollin Becker Memorial Lectures & Workshops...

"It was an outstanding example of superb quality teaching. Every piece of information thoughtfully, succinctly and astonishingly put together – a superbly crafted piece of teaching, delivery and presentation of information." "Great speaker and highly relevant to our work. Well planned sessions, enjoyed exploring the difference in palpation."

LECTURE:	30 NOV 2019	Regent's Conference Ctr, LONDON
WORKSHOP:	1 DEC 2019	Regent's Conference Ctr, LONDON

Biodynamic Embryology [Part 1]

Leader: JANE EASTY



A two-part exploration of the clinical application of biodynamic embryology for patients of all ages. Growth dynamics and embryo morphogenesis can inform a profound understanding of the tissues under our hands. In Part 1 we explore this from the otic placode to the ventromedial ligament, and from the somites to the urogenital fold and beyond. *Part 2 (24–25 SEP 2020) will be led by Henry Klessen in Göttingen and will include visits to the Blechschmidt and Blubach Collections.*

What students said about the Blechschmidt exhibition in Göttingen... "The Blechschmidt collection – extraordinary, moving, tender." "It was lovely to be able to see Blechschmidt's models of embryos, really amazing." "The models of embryos were fantastic."

7-8 MAR 2020

Hawkwood, STROUD

non-res / res

*£390 / *£490

Some courses have a minimum entry requirement, please call us for further details.

* Discounts available for paid Fellows and Members

University College of Osteopathy

Highlighted courses:

Paediatric osteopathy for under 1's

This course is intended as an introduction to osteopaths who are considering treating paediatric patients or for osteopaths who treat paediatrics and would like a refresher course on safeguarding and common presentations in the under 1's. Case history taking, examination and treatment of paediatric patients, particularly babies under one, requires specific paediatric knowledge and skills, the basics of which will be covered in this two-day course. Common presentations in the under 1's and osteopathic treatment will be introduced together with common pathologies in different paediatric age groups. The course will also cover paediatric emergency first aid. You will learn the specific issues regarding communication and consent when treating paediatrics and learn how to recognise safeguarding concerns.

14-15 September, £270, UCO

Applied biomechanics of the spine

Human spinal biomechanics will be explored in common function and in some sports activities. The integrated nature of the body mechanics and its physiological components will inform an osteopathic approach to the evaluation and treatment of different conditions. The course focuses on the practical applications of this theoretical framework in everyday practice. The biomechanical understanding of human movement is based on the concepts of Applied Functional Science® (Gray Institute, USA).

14-15 September, £285, UCO

Paediatric sensory integration and GI dysfunction in autistic children

Drawing on the research and experience of Dr Iona Bramati the course aims to analyse the impact of lack of sensory integration in the general paediatric population and behavioural and gastrointestinal dysfunction affecting autistic children. The course will give an overview of the signs and symptoms of Sensory Processing Disorders and Autism Spectrum Disorders as well as evidence for possible osteopathic interventions in both subjects. The course will explore how osteopathy may potentially improve the functioning of poorly integrated senses and a disrupted gut-brain axis.

15 September, £135, UCO

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For the full list of available courses, visit:

www.uco.ac.uk/cpdto 020 7089 5333

5 C's of Osteopathic Practice Standards

This course identifies 5 key areas of the Osteopathic Practice Standards as Communication, Consent, Conduct, Competence and Complaints. An overview of each of these areas will enable osteopaths to be knowledgeable about the requirements and leave with the practical skills to maintain high clinical standards. Delivered by Deborah Smith of MINT practice this will be an interactive course involving examples and challenges to help osteopaths consider and improve their standards in each of these key areas of practice.

12 October, £135, UCO



Animal CPD Courses

Canine & Equine CPD Courses* - NEW for 2019/20

We are delighted to be working in association with Animal Osteopathy International to provide an exciting NEW programme of ESO-validated short courses - please visit our website for details

Level I CPD Certificate (Canine &/or Equine)

Adapting osteopathic knowledge & techniques for the canine/equine model

Open to osteopaths and final year osteopathic students who are looking to expand their practice to include animal patients^{*}. Each course is delivered over a 3 month period, with 8 contact days:-

Canine - October 10, 11, 31, November 1, 28, 29, December 19, 20 (2019) Equine - April 18, 19, May 9, 10, June 13, 14, July 11, 12 (2020)

Level II CPD Short Courses (Canine &/or Equine) General health screening & functional neurology

These 2-day courses are designed to extend/refresh the knowledge base of animal practitioners. Suitable for ALL canine/equine manual and veterinary practitioners and for those who have successfully completed an ESO/AOI Foundation or Level I animal course.

Canine - Part I: October 3, 4 | Part II: November 7, 8 (2019) Equine - Part I: October 5, 6 | Part II: November 23, 24 (2019)

Level II Certificate - (Canine only - condensed format)

This follow-on course is designed for those who have successfully completed an ESO/AOI Foundation or Level I Canine course. Osteopaths with alternative qualifications may also be considered please contact the AOI programme team to discuss the suitability of existing qualifications and their course content.

March 26, 27, 28, April 23, 24, May 14, 15, 16, June 11, 12 (2020)

Level II CPD Short Courses (Canine &/or Equine)

Adapting existing knowledge base for the canine/equine model A wide selection of 1 and 2-day courses that can be taken as standalone CPD or as part of a pathway of study. Suitable for ALL canine/equine manual and veterinary practitioners and for those who have successfully completed an ESO/AOI animal programme. Courses start in September 2019 and run through to December 2020.

COMING SOON ... Level III CPD courses

In association with

ANIMAL OSTEOPATHY INTERNATIONAL

*All animal treatment requires prior consent from the animal's vet and practitioners must work within their scope of practice - for further information please refer to the ESO website. Due to higher running costs, all animal courses are subject to sufficient delegate bookings, as such we recommend that no flights or hotels are booked before final confirmation has been received.

www.eso.ac.uk/postgraduate

European School of Osteopathy, Boxley, Maidstone, Kent, ME14 3DZ Tel: +44 (0)1622 760816 or Email: animalosteopathy@eso.ac.uk

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DATES FOR YOUR DIARY

2019 September 28th & 29th

Topic:	Lumbo-Pelvic Mechanics, Assessment &
	Treatment. Theory & practical.
Speaker:	Sam Jarman M.OMSc (Canada)
Location:	CityNorth Hotel & Conference Centre, Dublin.
Price:	£300.00 (Lunch & refreshments included)
	14 CPD hours.

2020 February 22nd & 23rd

Topic:	Rib Cage Masterclass. Theory & practical.
Speaker:	Professor Laurie Hartman
Location:	Clayton Silver Spring Hotel, Cork.
Price:	£300.00 (Lunch & refreshments included)
	14 CPD hours.

2019 October 26th & 27th

- Topic: Osteopathy & Retained Primitive Reflexes. An absolute must for anyone interested in developing their skills in paediatric & young adult osteopathy.
- Speaker: Dr. Charlie Beck D.O; FAAO.
- Location: European School of Osteopathy, Maidstone, Kent. Price: £300.00 14 CPD hours.

Continuing Professional Development (CPD) Each participant will receive a Certificate of Attendance which they can use towards their CPD requirement.

2020 May 2nd - 4th

Topic: The first Osteopaths of Ireland Spring Symposium. Speakers: Confirmed speakers include: Jason Haxton, Museum Director ATSU speaking on "The Littlejohns in the USA and Bringing Osteopathy Back to the UK." Dr Charlie Beck D.O, FAAO will present "Dr Still's Approach to Foot and Ankle Injuries" and Sam Jarman M.OMSc. will be taking a philosophical look at Osteopathic Treatment "From a United Whole to Broken Identities."

Location: CityNorth Hotel & Conference Centre, Dublin. Price: £500.00 (Lunch & refreshments included) 21 CPD hours.

Early booking advisable Spaces for all events are limited and booking will be on a first come first served basis

October 2020

Organised trip to A. T. Still University (ATSU), Kirksville, Missouri. Spend Founders Week at the Home of Osteopathy with an actionpacked itinerary including a tour of the museum, a cadaver lab and an ATSU certified 3-day Osteopathic Manipulative Medicine course with osteopathic physicians. *Numbers very limited! Price: TBC 35 CPD hours.*



Osteopaths of Ireland Learn - Network - Evolve

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Date	Торіс	Lecturer	Cost	Deposit	CPD points
28 Sept	How to use placebos to help patients: an evidence-based approach	Dr. Jeremy Howick	£135		7
28-29 Sept	Hartman's master class in manipulative techniques: lower body By popular demand: ADDITIONAL LOWER BODY COURS	Prof. Laurie Hartman E	£385		14
5 Oct	From Paleo to Vegan - special diets' impact & Diet & exercise strategies to increase health-span	Prof. Adam Cunliffe	£135		7
5-6 Oct	Hartman's master class in manipulative techniques: lower body	Prof. Laurie Hartman	FULLY E	BOOKED	14
26-27 Oct	Functional Stretching	Dr. Eyal Lederman	£285	£150	14



Functional Stretching has been developed over 10 years by Dr. Lederman to provide a solution to the limitations of traditional stretching approaches. It focuses on active restoration of ROM, using task-specific, functional movement patterns. This approach is informed by research in the areas of tissue adaptation, motor control, pain and cognitive-behavioural sciences. Functional stretching can be used to recover ROM losses in various musculoskeletal conditions including stiffness in chronic low back and neck complaints, post-injury rehabilitation, immobilisation, surgery, frozen shoulder and central nervous system damage. Part of the course will also examine the potential use of functional stretching in pain and stiffness alleviation and ROM-desensitisation.

9-10 Nov	Hartman's master class in manipulative techniques: upper body	Prof. Laurie Hartman	£385		14
22-24 Nov (Start Friday 17:00)	Harmonic Technique	Dr. Eyal Lederman	£385	£200	18
23 Nov	Brain foods - Food and Mood & Human biome in health and disease	Prof. Adam Cunliffe	£135		7
4-6 Dec	Viscero-osteo articular connections: cervical spine in focus NEW COURSE - ONLY FEW PLACES LEFT	Jean-Pierre Barral	£725	£395	18
22-23 Feb 2020	Management of headaches: evidence-based manual therapy approach	Dr. César Fernández- de-las-Peñas	£345		15

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

CPDO Ltd. 15 Harberton Road, London N19 3JS, UK / 0044 (0) 207 263 8551 email: cpd@cpdo.net For more information and booking visit WWW.cpdo.net 50% discount available to students on most courses (see www.cpdo.net for further details)

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Updated OPS in force from September

The updated Osteopathic Practice Standards (OPS) officially come into effect on **1 September 2019**.

- If you need any guidance, check what the OPS has to say.
- Remember to link your CPD to the four OPS themes.
- Read the online version of the OPS at standards.osteopathy.org.uk.
- Don't let your print copy get dusty on your shelf.
- Look out for the next edition of The Osteopath magazine, which will be an OPS special.



Get in touch if there is an article about the OPS you would like to see: editor@osteopathy.org.uk