

the osteopath

The magazine for osteopaths

Review of the year

p4



> Meet our new Head of Regulation
p7

> Does your advertising fit the bill?
p12

> How is the GOsC funding development?
p6



General Osteopathic Council



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Professional Standards ext 238 / 235 / 240

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

Finance and Administration ext 231

Enquiries about registration fees, VAT, payments.

Public Affairs ext 245 / 247

Enquiries about national healthcare policy, parliamentary and international affairs.

Registration ext 229 / 256

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

Regulation ext 224 / 249 / 236

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

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Enquiries about Council members and meetings, GOSC Committee business.

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GOsC news

- > Review of the year 4
- > Supporting development 6
- > GOsC receives positive performance review 7
- > New Head of Regulation appointed 7
- > GOsC introduces data retention policy 8
- > How long should fitness to practise decisions stay on public record? 8
- > Shaping continuing fitness to practise 8
- > Changing landscape, changing name: the evolution of revalidation 9
- > Can osteopaths countersign passport applications? 10
- > New recruits to ensure continuing standards 10
- > Seeking osteopaths to serve on the GOsC Investigating Committee 10
- > Is the quality of osteopathic education up to scratch? 11
- > Oxford Brookes University to close osteopathy courses 11
- > Does your advertising fit the bill? 12
- > Brushing up our Welsh 12
- > In Council – key decisions 13
- > Look who's talking? 13
- > Did you know? 14
- > Frequently Asked Questions 15

research

- > IJOM Journal summaries 16
- > British School of Osteopathy Research Symposium 17
- > Research hub news 17
- > Conference calendar 17
- > Research ideas 18

in practice

- > New European osteopathy website 21
- > Developing NHS osteopathy in Wales 22
- > O Canada! 23
- > Backchat 24
- > Bookshelf 24
- > Book reviews 25
- > Courses 2013 26

marketplace

- > Classifieds 28



4 Welcome to the new edition of *The Osteopath*

While the weather this summer has certainly picked up, be assured that the GOsC has not been resting on its laurels. So what have we been up to?

On page 4, you can read highlights from our Annual Report which outlines our activities this year and sets out what we have planned for the year ahead.

On page 12 we discuss how you can ensure that your website and publications meet Advertising Standards Authority guidelines. Meanwhile, on page 11 find out how you can give us your feedback on the quality of osteopathic education in the UK.

Also, are you wondering how many osteopaths are now on the Register, where they're based, their age, gender? Well wonder no further; simply turn to page 14 where we have included some statistics for your interest.

Finally, work continues apace as we move closer towards a continuing fitness to practise scheme and we will be asking you for your views again in the coming months.

We hope you enjoy reading this edition!

Suzanne Miller
Editor

the osteopath

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Review of the year

GOSC financial report for 2012-13

The GOSC's Annual Report and Accounts sets out our key activities over the financial year 2012-13. Here we offer a review of what has been achieved, including a breakdown of how your annual registration fee is spent. For full details, the Annual Report and Accounts is available to download from the o zone and from our public website at: www.osteopathy.org.uk

Fee reduction

The GOSC has reduced the registration fee levels. This is the second year in a row that we have done this which has seen the headline registration fee fall from £750 last year to £675 this year. For details of how your registration fee is spent, see the opposite page.

Continuing fitness to practise

In line with government requirements that all regulated health professions must meet, we are developing a continuing fitness to practise scheme to help osteopaths prove that they meet our core standards for registration – the *Osteopathic Practice Standards* – and to contribute to continuous enhancement of patient care.

Our revalidation pilot, which concluded in late 2012, was completed by 263 osteopaths – approximately 1 in 18 registrants. While the exercise was of benefit to patients and practitioners, it was clear that the process would need to be simplified. The pilot findings will be used to help develop the new continuing fitness to practise scheme in 2013-14. However, the new scheme will require further consultation before it can be finalised and implemented.

Alongside this, we consulted on potential improvements to our CPD scheme and received well over 400 responses from osteopaths and others. These findings will also feed into the development of the new continuing fitness to practise scheme.

Developing the profession

In the summer of 2012, the GOSC along with the British Osteopathic Association, the Council of Osteopathic Educational Institutions and the Osteopathic Alliance, held a series of events around the country to discuss further development of the profession and osteopathic practice.

Arising from this, a working group of these four organisations and the National Council for Osteopathic Research, has commenced a programme of work on eight projects to support the development of the profession. These projects are in the areas of:

- > Collecting data on patient reported outcome measures data and adverse events reporting
- > Developing service quality standards.
- > Quality assurance and accreditation of advanced/specialist practice
- > Enhancing regional CPD/support mechanisms
- > Providing high-quality mentoring for recent graduates
- > Career development through the establishment of an 'Osteopathic Fellowship'
- > Leadership development within the profession
- > International collaboration and best practice.

The GOSC will continue to facilitate a partnership/collaborative approach to this work, rather than a directional role.

Facts and figures

The Annual Report also sets out a range of information about other work including:

- > The number of new registrations,

leavers and retirements

- > Activity to protect the title of 'osteopath'
- > The number of complaints about osteopaths received by the GOSC, how they were dealt with and the outcomes
- > Our education quality assurance activity.

Key projects for 2013-14

In December 2012, Council approved a new three-year Corporate Plan for the period 2013-16, based on three high-level strategic objectives:

1. To promote public and patient safety through proportionate, targeted and effective regulatory activity
2. To encourage and facilitate continuous improvement in the quality of osteopathic healthcare
3. To use our resources efficiently and effectively, while adapting and responding to change in the external environment.

The Corporate Plan 2013-16 sets out the goals of the GOSC over the next three years and the supporting activities aimed at meeting those goals. The Corporate Plan can be found on the GOSC website at: www.osteopathy.org.uk

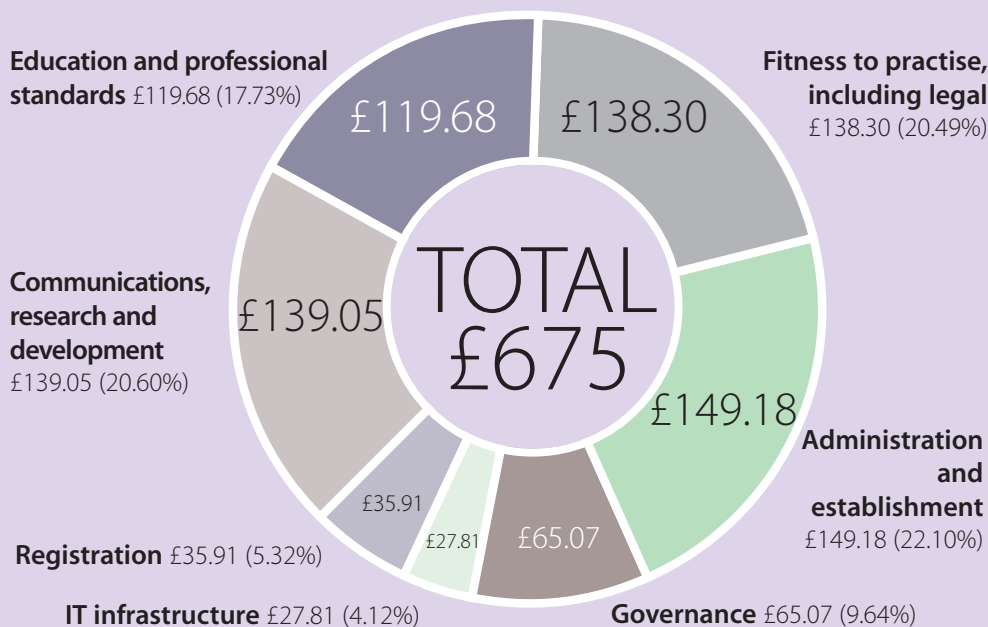
The GOSC's Business Plan for 2013-14, which implements the first year of the Corporate Plan, includes the following activities:

Osteopathic Practice Standards

- > We will continue to develop online CPD resources to ensure that all osteopaths are familiar with and adhere to the *Osteopathic Practice Standards*.

How is your registration fee spent?

The following is a breakdown of how the headline registration fee (£675) is being spent according to function within the GOsC, together with a brief explanation of each function's key activity.



Fitness to practise, including legal:

encompasses fitness to practise processes and illegal practice prosecutions, along with setting and reviewing standards and providing legal advice to the Council and the profession as a whole.

Administration and establishment:

covers the costs of running the organisation, including facilities, service contracts, Audit fees and non-attributable staff costs.

Governance: Council and its Committees.

IT infrastructure: investment in this ensures that the GOsC has up-to-date and robust websites and IT services.

Registration: maintaining the integrity of the Register for the benefit and protection of patients, the public and professionals, processing applications for registration from qualified professionals and aiming to ensure the smooth operation of the renewal of registration process.

Communications, research and development: covers all ways in which the GOsC communicates with osteopaths and the public (including online, print publications and events), and contributes to the development of the profession including through research activities.

Education and professional standards includes ongoing review of standards of education, practice and continuing professional development (CPD).

Income and expenditure

The financial statements report a surplus position of £374,460 after designated spending of £38,444 on specific one-off projects and corporation tax. This surplus was greater than forecast for two reasons: first, a lower than expected volume of cases in our fitness to practise proceedings; second, as a result of continuing efforts to identify and implement cost-savings measures across the organisation.

Continuing fitness to practise

- > We will develop proposals on continuing fitness to practise for consultation, drawing on the findings of the revalidation pilot and our review of CPD.

Registration

- > We will promote public awareness of the Register, including the development of a new certification mark.

Development of the profession

- > We will work with the BOA, COEI, OA and NCOR to support the development of the osteopathic profession.

Francis report

- > We will incorporate relevant recommendations from the Francis Inquiry report into our work.

Research

- > We will continue to support NCOR to develop research and data collection within osteopathy.

Finance and governance

- > We will continue to seek to reduce the costs of regulation and pass on the savings to registrants.
- > We will continue to engage with the Law Commission on proposed changes to legislation and commence a scoping study on the transition to new rules.

Communications and engagement

- > We will undertake research into public and patient perceptions of osteopathic regulation to identify opportunities for improvement in our public communications.
- > We will engage with the osteopathic profession on a new continuing fitness to practise scheme and other changes proposed by the GOsC.

International standards

- > We will continue to work with our European partners and with the European Committee for Standardisation on the development of Europe-wide standards for osteopathy.
- > We will continue to support international regulatory collaboration through the Osteopathic International Alliance.

Supporting development projects

The GOsC Council agreed at its meeting in June that it would be willing to provide financial support for development projects that have been identified by the profession as a priority.

In previous issues of *The Osteopath*, we reported that the GOsC is working with a cross-professional group – including the British Osteopathic Association (BOA), the Council of Osteopathic Educational Institutions (COEI), the National Council for Osteopathic Research (NCOR), and the Osteopathic Alliance (OA) – on a range of projects aimed at supporting the development of the profession. These projects are in eight areas: evidence; service standards; advanced practice; regional support; mentoring; career development; leadership; and international collaboration.

The GOsC Council will provide financial support for projects that meet the following criteria:

- > **Developmental:** the outcome would mean a clear development in osteopathic education, training or practice that aims to deliver a measurable and continuous improvement to the quality or safety of osteopathic healthcare.
- > **Public and patient benefit:** the initiative clearly benefits patients or the public by enhancing the quality and safety of osteopathic care.
- > **Cross-professional applicability:** the project benefits the whole profession and not just a particular group or groups of practitioners.
- > **Collaboration:** initiatives should involve multiple partners rather than a single organisation, and the contribution of those involved (financial or in-kind) should be clearly defined.
- > **Clarity of outcome:** projects will only be considered for support if they include a clear plan for how the project outcomes are to be achieved and

disseminated across the osteopathic profession.

At the moment, funding will only be available for projects that are being taken forward by the organisations listed above. Support for other projects may be possible in the future, but this will depend on the success of the initial projects and the funds available.

We are unable to provide support for initiatives that only promote commercial or sectoral interests of osteopathic service provision. This would be considered promotional activity and this is not allowed under the Osteopaths Act.

It is hoped that by the GOsC providing some funding, these projects will progress more quickly and the benefits to patients and the profession can be realised.

The funding will come from the GOsC's reserves. These are currently at a

healthy level due to cost-saving measures over the past two years.

The individual projects are being taken forward by small working groups, including members drawn from the BOA, COEI, GOsC, NCOR and OA.

If you want to know more about how each organisation is involved, please contact them directly. For more information about the development projects and their funding, please contact the GOsC.



You can share your views directly with any of the organisations involved:

British Osteopathic Association Email: boa@osteopathy.org



Council of Osteopathic Educational Institutions
Email: adrianbarnes@eso.ac.uk



General Osteopathic Council
Email: future@osteopathy.org.uk



National Council for Osteopathic Research
www.ncor.org.uk/contact-us



Osteopathic Alliance Email: enquiries@osteopathicalliance.org



GOSC receives positive performance review

The GOSC has received another positive review of its work from the Professional Standards Authority for Health and Social Care (PSA), the body responsible for monitoring the performance of all UK healthcare professional regulators.

The PSA's annual Performance Review report 2012/13 was published in June this year and concluded that the GOSC continues to maintain its effectiveness as a regulator and is meeting all the Standards of Good Regulation across its regulatory functions.

Key achievements noted by the PSA over the last year include:

- > GOSC activity to raise and test awareness of the new *Osteopathic Practice Standards*;
- > Establishment of a Patient and Public Partnership Group to provide patient and public perspectives about standards and guidance, and assist in the development of communication materials;
- > Creation of a steering group (with professional, educational and osteopathic research bodies in the UK) to promote the development of the profession;
- > Collaboration with NCOR and the BOA to establish a repository of information about risks in osteopathic care, to help inform the development of additional standards and guidance.

The full performance review report is available on the PSA's website at: <http://tinyurl.com/okeu94b>
The GOSC's review can be found in section 14 on pages 61-66.

New Head of Regulation appointed



We are pleased to welcome David Gomez as our new Head of Regulation. As well as advising and leading on all issues related to the management of the GOSC's regulatory functions (including fitness to practise processes) and legal affairs, David will play an important role in preparing new rules for the GOSC once proposals by the

Law Commission to streamline health and social care regulation have been approved by Parliament. He has previous experience of drafting statutory instruments and procedural rules for a number of regulatory bodies, including the Human Fertilisation and Embryology Authority, the Nursing and Midwifery Council, the General Social Care Council, and the Chartered Institute of Management Accountants.

David said: "Currently, all regulators – including the GOSC – have their own set of rules and procedures for overseeing health and social care in the UK. Now, the Law Commission recommends the introduction of a single overarching Act of Parliament in order to promote consistency and the same high standards across the different professions.

"This will be an opportunity to refresh our regulatory procedures and to

incorporate emerging good practice from across the regulatory spectrum, and sometimes having the power to make quite simple changes can make a big difference. The development of more sophisticated case management tools and procedures, for example, could help reduce the length and costs of hearings, and this is something that would benefit the GOSC and registrants alike.

"I welcome suggestions from the profession about fine-tuning our regulatory procedures, and we will of course consult fully with stakeholders on any potential changes.

"I am very pleased to be joining the GOSC at this exciting time."

You can contact David at: dgomez@osteopathy.org.uk

GOSc introduces data retention policy

As a result of your feedback at the end of last year, we have made amendments to our proposed data retention policy about what information we should keep and for how long.

The final policy will be in place from now on and also apply retrospectively to all information we hold.

Up until now, we have acquired and been keeping permanently a large amount of information about registrants. This is in line with our statutory obligations and functions, but going forward we want to only store information for as long as we need it.

Views on our draft data retention policy were gathered from registrants and other key stakeholders including the British Osteopathic Association, osteopathic educational institutions and other healthcare regulators, and these helped to shape the final policy.

Amendments included the following:

- > Registrants' registration information will never be completely destroyed. Rather, a summary of this will be kept permanently to help safeguard against fraudulent re-applications
- > Criminal records bureau checks will be destroyed after six months
- > Information relating to informal complaints will be kept for eight rather than 10 years as it was felt that 10 years was too long.

For more information, please contact the Regulation Team on 020 7357 6655 x224 or email regulation@osteopathy.org.uk

How long should fitness to practise decisions stay on public record?

We will be asking osteopaths, the public and other interested parties how long fitness to practise decisions should remain on an osteopath's record.

Currently, the length of time varies depending on the seriousness of the sanction. We want to strike the right balance between patients' right to know about a historical finding for a reasonable period of time, and the osteopath's right to privacy once they have made improvements and returned to unrestricted practice.

The consultation will open soon. For further information and to take part, see www.osteopathy.org.uk/about/our-work/consultations-events

Shaping continuing fitness to practise

Leading organisations in the osteopathic profession have been helping to shape and influence a new continuing fitness to practise (revalidation and CPD) scheme designed to support osteopaths to continue to meet the GOSc's standards.

A seminar hosted by the GOSc last month brought together representatives of the osteopathic training institutions, special interest groups, British Osteopathic Association and GOSc Council members, post-graduate osteopathic education providers, the National Council for Osteopathic Research, and patient representation.

Findings from last year's revalidation pilot and review of the current CPD scheme were considered in the context of hardening

public and political expectations around standards of healthcare and the onus on health professionals to demonstrate that they are keeping their skills up to date throughout their career.

Building on the experience of the revalidation pilot – some aspects of which worked well and others, less well – the GOSc is exploring with osteopathic organisations what mechanisms could have potential to both satisfy public expectations of health professionals and support individual

osteopaths to grow and develop in practice. Out of these and further discussions over coming months, the GOSc is honing a revised framework for a continuing fitness to practise scheme for osteopaths, proposals that will be tested through a formal consultation with osteopaths and others next year.

For more information, contact the Professional Standards team on 020 7357 6655 x235 or email psadmin@osteopathy.org.uk

Changing landscape, changing name: the evolution of revalidation

How should health professionals demonstrate that they are up to date and meet current standards? This question has been posed by different governments over the past few years. So how has the GOSc responded?

Shifting expectations

In 2009, the GOSc developed its revalidation scheme in response to increased public and Government expectations that healthcare professionals should be checked periodically rather than simply re-register each year. Two years later, the Government suggested that employers, rather than healthcare regulators, should be responsible for revalidation, since they are closer to the point of care and best placed to address problems. Later that same year (2011), the Parliamentary Health Committee suggested that the Nursing and Midwifery Council's system for re-registration – based on CPD – offered patients and the public no assurance about the standards and quality of care provided by nurses and midwives.

In November 2012, the Professional Standards Authority (PSA) which oversees the healthcare professional regulators in the UK, published *An approach to continuing fitness to practise*, confirming that an input-based CPD scheme would not be sufficient for registrants or regulators to demonstrate that registrants continue to be safe and fit to practise.

Our initial approach

Last year's GOSc revalidation pilot was designed to help osteopaths reflect on their performance through a range of measures, including patient and peer feedback, clinical audit and case-based discussion. Osteopaths received bespoke feedback on their strengths and the areas where they needed further development.

Alongside the revalidation pilot, the GOSc explored in a CPD Discussion Document how the existing CPD scheme could be enhanced.

The findings of our revalidation pilot and CPD consultation were published in early 2013 (see the April/May edition of *The Osteopath* here: <http://tinyurl.com/np4uhev>).

From revalidation and CPD to continuing fitness to practise

Following our pilot, we are continuing to work with osteopaths, patients and others, to develop proposals that are simpler for osteopaths while clearly showing patients and the public that osteopaths meet our standards. Rather than a pass/fail scheme, we are considering a more developmental approach that feeds into CPD while still

giving patients and the public the reassurance they need.

Next steps

We have not made any pre-determined decisions about how a continuing fitness to practise scheme for osteopaths might work. Proposals for consultation will be considered by the GOSc Council later in the autumn, and in 2014 we plan to hold a formal consultation when there will be further opportunities for all osteopaths to share views and help shape the future scheme.

We are keen to meet with groups of osteopaths later this year ahead of the consultation in spring 2014. Your views are important to us – so please get in touch and invite us to come to your local meetings. Contact Sarah Eldred, Communications Manager on 020 7357 6655 x245 or email seldred@osteopathy.org.uk

Alternative approaches to continuing fitness to practise

The GOSc is not the only healthcare regulator that is developing a continuing fitness to practise scheme. Here are just a few examples of the work of other UK regulators:

The General Optical Council (GOC) launched a continuing fitness to practise scheme in January 2013 which combines core CPD in specific areas with peer review. The GOC has been working with CPD providers to ensure registrants are supported.

The General Chiropractic Council (GCC) is working on a staged process, involving a self-assessment informed by both objective and subjective evidence, and testing the performance of a sample of registrants. The GCC is planning to work with some of the professional chiropractic organisations to develop the scheme further.

The General Medical Council's (GMC) continuing fitness to practise system is based on local systems of appraisal influenced by CPD, quality improvement activity (such as clinical audit), analysis of significant events, feedback from colleagues, feedback from patients and a review of complaints and compliments.

Can osteopaths countersign passport applications?

Home Office rules require application forms for passports to be countersigned by 'a person of good standing in their community'. Osteopaths are often asked whether they qualify as countersignatories, and the GOSC has sought clarification from the UK Passport Agency (UKPA).

The basic qualification for a countersignatory is to work in a recognised profession or be 'a person of good standing in their community'. The UKPA website provides an example list of professions which includes chiropodists but not osteopaths or physiotherapists. However, the UKPA has confirmed that osteopaths are eligible to be countersignatories, the main requirement being that if the countersignatory has a degree-level qualification related to their job and meets the other countersignatory criteria, then they may countersign.

If you are asked to countersign a passport application, the following criteria apply:

- > The person countersigning the application form must live in the UK, hold a current British, Isle of Man, Channel Islands or Irish passport and have known the applicant for minimum of two years. They must write their valid passport number in section 10 of the application form. If the application is for a child under 16, the countersignature must confirm that they have known the adult who signed the application

form at section 9 for at least two years, and certify the photograph stating the child's full name.

- > A countersignature must be a person who has a good reputation in the community, possesses a current British passport and has credentials that can be checked (providing your GOSC registration number and the link to the GOSC website will help here).
- > Anyone who lives at the same address as you or relatives (including step-parents) are not allowed to sign.

For more information, see the UKPA website <https://www.gov.uk/countersigning-passport-applications>



New recruits to ensure continuing standards

International applicants

The GOSC is recruiting individuals to assess internationally-qualified applicants for registration. These assessors help to ensure that osteopaths trained outside the UK meet the *Osteopathic Practice Standards*.

Different types of assessors are needed for each of the three stages of the registration process as follows:

- > Comparing non-UK qualifications with those provided in the UK
- > Assessing further evidence (e.g. written case studies) to ensure that this demonstrates the range of practice required, and knowing when to and when not to treat a patient
- > Assessing clinical performance in a real life clinic setting involving the management of two new patients.

Returning to practice

We have also been recruiting reviewers for our Return to Practice process for osteopaths who have been non-practising or off the Register for a period of at least 24 months. This process involves close liaison between the osteopath and two reviewers. These trained reviewers help the osteopath plan their return to practice, giving advice on CPD needs and other support mechanisms that will facilitate a smooth transition into practice.

Appointments will be published on our website at: www.osteopathy.org.uk/practice/How-to-register-with-the-GOSC

Seeking osteopaths to serve on the GOSC Investigating Committee

We are looking for new members to appoint in early 2014 to our Investigating Committee which initially investigates complaints against osteopaths.

If you are interested, please email your name and registration number to councilrecruit@osteopathy.org.uk.

Once we have made the appointments, we will publish details on our main website. In the meantime, information about the posts can be found at <http://tinyurl.com/mg4jypp>

Is the quality of osteopathic education up to scratch?

The GOsC is responsible for ensuring that osteopathic education in the UK meets the *Osteopathic Practice Standards*, and it carries out periodic reviews of every osteopathic educational institution in the UK to ensure that these standards are maintained.

These reviews consist of a paper-based evaluation and a formal visit to the institution, and is managed on behalf of the GOsC by the Quality Assurance Agency for Higher Education (QAA). Further details of the process can be found here www.qaa.ac.uk/InstitutionReports/types-of-review/Pages/GOsC-review.aspx

As part of the review process, information is collected from students, staff and patients or can be sent directly to the QAA.

We currently have reviews planned for the following institutions:

- > European School of Osteopathy – 5-7 November 2013
- > London School of Osteopathy – 29 November-1 December 2013
- > London College of Osteopathic Medicine – Spring 2014
- > Oxford Brookes University – Spring 2014
- > Swansea University – Spring 2014

If you wish to provide any feedback on the education and standards at these institutions, please feel free to contact the QAA by email bea.edwards@qaa.ac.uk or post to:

Barbara Edwards
QAA
Southgate House
Southgate Street
Gloucester GL1 1UB

Please note that the GOsC review is only concerned with the standards of education at an institution. We cannot intervene in contractual disputes between individuals and an institution, unless there is an issue that affects the delivery of quality education.

If you have a complaint about an individual osteopath, you should contact our Regulation Department on 020 7357 6655 x224, or email regulation@osteopathy.org.uk



Oxford Brookes University to close osteopathy courses

As of the end of 2016, Oxford Brookes University (OBU) will no longer be teaching the following courses:

- Bachelor of Osteopathy
- Master of Osteopathy
- BSc (Hons) Osteopathy

OBU has informed us that this decision is due to changes in the higher education sector and, specifically, changes to funding streams. OBU will continue to run the above courses to allow students recruited in September 2012 to graduate.

The GOsC Education and Registration Standards Committee is working closely with OBU to ensure that there are plans in place for students who need to take time out of study to complete their course after September 2016, and that OBU is providing for the needs of patients affected by the closure of the clinic.

It is a high priority for both the GOsC and OBU that as the course gradually winds down, standards of patient care and the quality of the student experience continue to be maintained.

For more information, please contact the GOsC Professional Standards Team on 020 7357 6655 x235 or email psadmin@osteopathy.org.uk

Does your advertising fit the bill?

It is vital that the healthcare information you provide on your practice website and in online directories enables patients and the public to make safe and sensible choices.

Word of mouth and web information are well known to influence heavily the choices patients make when seeking healthcare. Your practice website will often be a first port-of-call for a patient contemplating using your services or someone making a recommendation. For this reason, the GOSc and the British Osteopathic Association regularly remind osteopaths to be vigilant about the information they provide.

The marketing of healthcare services is regulated by the Advertising Standards Authority, and in addition the *Osteopathic Practice Standards* – Standard D14(2) – requires you to ensure that all advertising is legal, decent, honest and truthful, and conforms to the ASA's *UK Code of Non-broadcast Advertising, Sales Promotion and Direct Marketing* ('the code').

The GOSc has recently conducted another review of osteopath websites, as we did in 2011 in response to public concern, and we are encouraged to note that broadly osteopaths are well aware of the ASA code and striving to ensure compliance. Where necessary we have written directly to a number of osteopaths, recommending they review their online information to ensure its compliance with the ASA code.

Tips for easy compliance

In the course of our review, we noted a few 'trouble spots' which osteopaths sometimes overlook when monitoring their advertising.

> **Remember to review not only your own practice website, but also your entry on any other online directory to which you have signed up:** A common example is osteopath entries on Internet directories such as www.findanosteopath.co.uk. You should make reasonable internet searches and contact the controllers of those

directories to rectify your entry/remove any claim that is not ASA compliant.

- > **Be methodical about keeping a record of where you have posted advertising:** As well as online, you are also responsible for posters and leaflets in public places.
- > **Delete remote files:** If you are closing down a website, or deleting pages, you need to ensure that all your remote files (stored on the hosting sites servers) are deleted before you cancel the hosting package.
- > **Do other healthcare providers have correct information about you?** You are responsible for the accuracy of the information about your practice that you provide in the course of contracting your services to any public or private healthcare providers. An example of this would be the information you provide Bupa for their online 'Finder' facility (<http://finder.bupa.co.uk>), used by Bupa policy holders. Be sure your details on this are correct and also ASA compliant.
- > **Ask the ASA:** If you are uncertain about whether your publicity material is ASA compliant, make use of the ASA's free Copy Advice Service to which you can submit your website or marketing materials for review. You can find more information about this at: <http://copyadvice.co.uk>
- > **To find out more:** The ASA code, and specific guidance (published in September 2011) which relates to health therapies and evidence, can be found at: www.cap.org.uk. Osteopaths should pay particular attention to the ASA help note entitled 'Health, Beauty and Slimming Marketing Communications that Refer to Medical Conditions'. You can access this information also via the GOSc registrant website – the **o** zone.

Brushing up our Welsh

The GOSc is providing more information in Welsh as part of the services we provide to the public and patients in Wales.

The Welsh Language Act 1993 says that the Welsh and English languages should be treated equally when conducting business in Wales. The GOSc first introduced a Welsh Language Scheme in August 2011, and we report annually to the Welsh Language Commissioner on what we have done under the scheme.

This year, we introduced Welsh versions of our public information leaflets – *What to expect when you see an osteopath* and *Standards of Osteopathic care* – and the *Osteopathic Practice Standards*. All of these can be downloaded from our website at: <http://tinyurl.com/nwq2lsc> if you would like to share these with your Welsh patients.

Our public website also has a section containing key information in Welsh, along with a bilingual form on the 'Contact us' page (go to: www.osteopathy.org.uk/contact-us). We will be improving the Welsh section during the coming year to make it easier to use.

Full details of our Welsh Language Scheme are available here
<http://tinyurl.com/nwq2lsc>

To read our previous annual reports and the Commissioner's response, go to <http://tinyurl.com/qeu4yne>

In Council – key decisions

20 June 2013 – 80th meeting of the General Osteopathic Council

The agenda and related papers can be found on the GOsC public website at: www.osteopathy.org.uk/about/the-organisation/meetings

Funding for Development projects

It was agreed that the GOsC would make funds available for projects that support the development of osteopathy in the UK but not where these were for the promotion of osteopathy. The grant scheme agreed (see also page 6) makes it clear that GOsC funding is appropriate for projects or initiatives that meet the following criteria:

- Developmental:** to develop or improve osteopathic education, training or practice
- Public and patient benefit:** to enhance the quality and safety of osteopathic care
- Cross-professional applicability:** all practitioners would benefit, not just a particular group
- Collaboration:** many organisations and partners would benefit, rather than a limited number
- Clarity of outcome:** the project plan and expected achievements of the project are clearly set out.

Responding to the Francis Inquiry

The Francis Report, published in February 2013, outlined the failings at the Mid-Staffordshire NHS Foundation Trust and recommended changes based on the lessons learned. While many of the 290 recommendations of the Francis Report related to hospital care and the roles of doctors and nurses, all bodies involved in healthcare regulation are expected to develop an action plan setting out how they will respond to relevant recommendations.

After an initial discussion, Council agreed that it would develop a more detailed response to the Report, in collaboration with osteopaths, patients and other institutions.

Registration appeals process

The guidelines and procedures for appeals against Registration decisions have not been updated since 1999. Council agreed to consult on relevant changes.

Future Council meetings

- > Thursday 17 October 2013
 - > Wednesday 29 January 2014
 - > Thursday 1 May 2014
- Meetings begin at 10am at Osteopathy House. Agendas and papers for the public session are available seven to 10 days before the meeting at: www.osteopathy.org.uk

For further information, contact Marcia Scott on 020 7357 6655 x246 or email mscott@osteopathy.org.uk



Look who's talking?

'Ask the GOsC', our new online forum for osteopaths, has attracted a range of queries with CPD and advertising issues being top of the list.

Questions have included "Can taking part in a webinar be classed as learning with others?"; "How long should patient records be kept for?" and "What can I charge for photocopying and supplying patients with their records?"

These are the sort of questions we regularly receive from osteopaths by email or telephone, but the answers stay with the enquirers. Through the forum we hope to share these questions and answers with all of you.

You don't need to register on the forum to read the questions and answers, but you do if you want to ask or answer a query. You can register under your own name or choose another user name if you prefer.

The forum is searchable, so if you want to see posts about a particular topic, for example patient records, you can search using those keywords.

If you have posted a question or answer, you can sign up for alerts on further responses or posts. Click on 'Forum options' at the top right of the forum, select 'Add to favourites' and then 'Subscribe by email.' Then click on 'Add to favourites' and from then on you will receive an email with details of new postings.

To access the forum log onto the o zone home page or through the 'Get involved' section.

Did you know?

As of July 2013 there were 4,689 osteopaths registered with the GOsC.

And now, for the first time since the Register opened in 1998, the balance between **male and female registrants** has almost closed. There are 2,363 male osteopaths while 2,326 are female. This is a significant change from when the Register opened in 1998 when most osteopaths were men, and reflects a general trend across healthcare professions.

Our pie chart shows the **age breakdown** of current registrants, with the 41 to 50 age group being by far the largest.

Osteopaths are not evenly distributed across the UK.

The largest number of osteopaths are based in the South East (1,430) or Greater London (1,341) with the lowest numbers in Scotland, Wales and Northern Ireland. The GOsC Register also includes registrants based in 48 countries overseas.

Each year up to 300 osteopaths join the GOsC Register with the majority graduating with a 'Recognised Qualification' from a UK osteopathic educational institution.

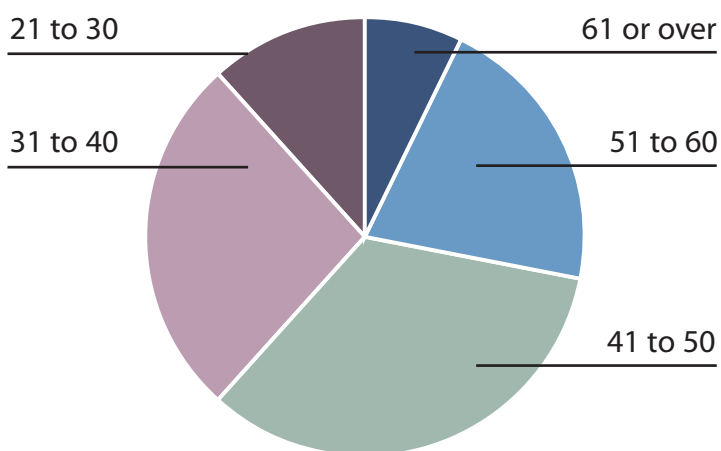
In the year to 31 March 2013 **270 osteopaths joined the Register** and we anticipate that this may be slightly higher this year.

Each year registrants also leave the Register as they retire, move abroad or cease to practice for any other reason. In the year to 31 March 2013, **174 osteopaths left the Register**, a slightly higher number than in previous years but not significantly higher than the 2.5-3% that would be expected to leave in any single year.

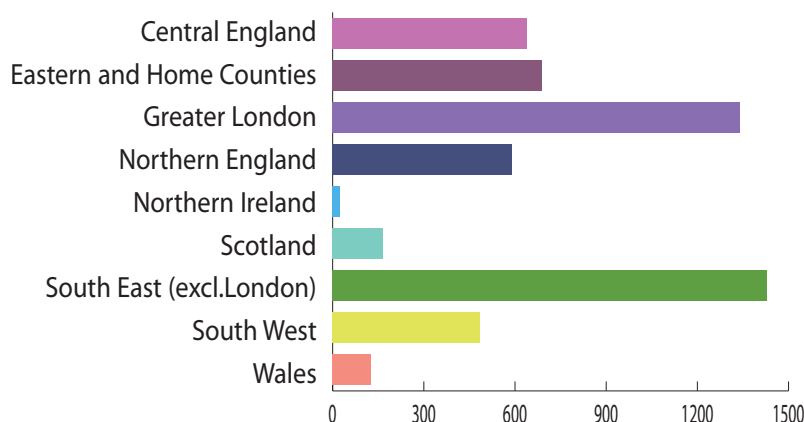
The chart shows the changes over the past four years which indicate an **average growth in the Register of 152 osteopaths each year.**

We will continue to feature statistics like this in future editions of *The Osteopath*. In the meantime, please feel free to contact us on 020 7357 6655 if you have any questions.

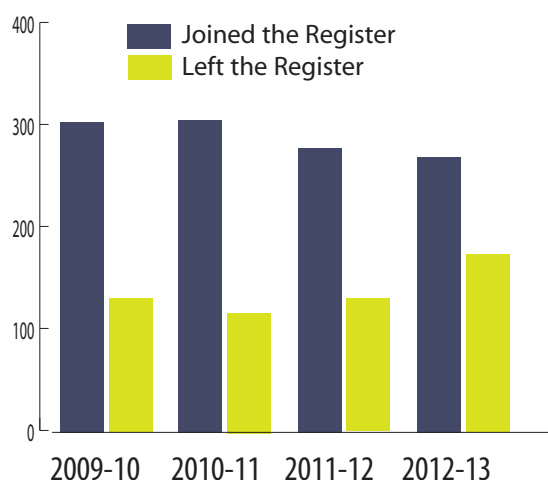
Osteopaths by age



Osteopaths by UK region



Osteopaths joining and leaving the Register



Frequently Asked Questions

We receive queries every day from osteopaths, patients and the public and we are always keen to assist. Here are some recent queries and how we responded.

Q I have a patient that I want to refer for a scan. The hospital said I can only send patient details to them by fax or through the post, not by email. Why is this?

A This is due to principles set out in the Caldicott Report which relates to the handling of patient information in the NHS in England and Wales. The report, named after Dame Fiona Caldicott, was first published in December 1997 amid concerns that patient confidentiality could be compromised with the increasing use of IT in the NHS. For this reason, there are restrictions in place within the NHS regarding the sending and receiving of patient information via email in case this can be intercepted.

The report has recently been updated and you can read more about this at: <http://tinyurl.com/cuye9b2>

Q As an osteopath, can I give Botox injections?

A Osteopaths may administer an injection to a patient where they are doing so in accordance with the directions of an appropriate practitioner (usually a doctor), but this must relate to a specific medicine for a specific patient (this is known as a 'Patient Specific Direction'), and is not a general permission to inject across a number of patients. So, if a doctor or another health practitioner with prescribing rights had authorised you to inject a particular patient with a particular drug (and this includes Botox), then you could do this, but as an osteopath, you would not be allowed to make the decision to inject independently.

Any osteopath who undertakes injections in accordance with a Patient Specific Direction must make sure that they are complying with the requirements of the *Osteopathic Practice Standards*, e.g. acting within their training and competence, relevant health and safety legislation and in possession of adequate insurance. Osteopaths should also be aware of the risks and requirements around the care and disposal of sharps, safe storage of medicines and risks associated with injecting into the wrong site.

More information about Botox injections is available here <http://tinyurl.com/qhb2d38>

You are always welcome to contact us on 020 7357 6655 if you have a question or would like more information, or post your question on the o zone forum.



Annual BOA Convention – booking now

Extending Healthy Working Life – 8-10 November 2013, Egham Surrey

Programme Features

Friday 8 November – 3 full day workshops

Saturday 9 November – Full programme of lectures from world class speakers

Sunday 10 November – Select two half-day workshops

Complete 6 hours of CPD per day

International speakers include:

Phillip Richter, director of The Institute for Applied Osteopathy, Germany

Jorgen Quaeghebeur, lecturer at the Flanders International College, Belgium

Sue Turner, faculty member, Sutherland Cranial College

Walter McKone, writer and lecturer

Plus many more



Phillip Richter

£120 per day for BOA members, £140 per day for non-members

Visit www.osteopathy.org/convention2013 for more information and to book

IJOM Journal Summaries

Efficacy of osteopathy and other manual treatment approaches for malocclusion. A systematic review of evidence.

Andresen T, Bahr C, Ciranna-Raab C. *International Journal of Osteopathic Medicine* 2013;16(2): 99e113

This systematic review aimed to examine the evidence for the efficacy of osteopathy and other forms of manual intervention in the management of malocclusion. The stages of the review are well described, including all of the databases searched and the search terms employed. A small number of studies were expected so the search terms used were quite expansive. A wide range of databases were searched in addition to non-indexed osteopathic journals. Studies identified from the search were categorised according to Sackett's levels of evidence, and then assessed using Downs and Black's quality checklist designed for healthcare interventions.

Only 30 studies met the stated inclusion criteria but 13 of these were experts' opinions alone and contained little evidence. The remaining 17 studies included various research designs with varying degrees of methodological quality; most of the studies were regarded as poor quality after assessment with Downs and Black's quality assessment tool.

A small number of studies reported some changes in malocclusion associated with therapeutic approaches, but the review highlighted the need for more studies in this area with much greater methodological quality.

Is alcohol intake associated with low back pain? A systematic review of observational studies.

Ferreira PH, Pinheiro MB, Machado GC, et al. *Manual Therapy* 2013;18(3):183-90

A range of risk factors exist for low back pain, and these have been widely described in the literature. Alcohol is known to be a risk factor for a variety of diseases but a growing number of studies have suggested its contribution to low back pain. A range of studies have been published on this topic including one systematic review (Lebouef-Yde, 2000) and some observational studies (Khatun et al, 2004; Hestbaek et al, 2006; Almeida et al, 2008).

This systematic review explored the relationship between alcohol intake and low back pain. A range of studies were examined following an extensive search of the literature; 833 studies were initially identified but only 26 met the inclusion criteria for review and meta-analysis. Among the included studies were 23 retrospective cohorts, two case controls, and one longitudinal study.

The results from the case control and cohort studies

were pooled and showed that alcohol consumption is slightly associated with low back pain (Odds Ratio: 1.3; 95% Confidence Interval: 1.1-1.5). While this association appeared to be present in studies where alcohol had been identified as an abuse dependent substance in chronic low back pain patients, remaining individual studies reported no statistical association.

The reviewers concluded that the findings could be used to design educational information for populations experiencing low back pain associated with alcohol abuse.

Two-stage vertebral column resection for severe and rigid scoliosis in patients with low body weight.

Zhou C, Liu L, Song Y, et al. *The Spine Journal* 2013;13(5):481-486

Many osteopaths treat patients with scoliosis in clinical practice. This paper describes the management for a particular subgroup of patients who have the combination of severe and rigid scoliosis in combination with low body weight. The authors describe current management which involves anterior release with posterior correction and instrumentation; they go on to describe their own case series involving a modified approach involving a two-stage vertebral column resection to try and optimise correction of the spinal curve while minimising the known complications for the procedure.

This study involved sixteen patients (nine women and seven men) referred from the orthopaedics department of a Chinese hospital. Clinical analysis involved a range of considerations including:

- > Rib hump;
- > Lumbar hump;
- > Cobb angle of coronal curves;
- > Apical vertebral translation;
- > Coronal balance;
- > Sagittal balance;
- > Thoracic kyphosis;
- > Lumbar lordosis.

These measures were performed before and after surgery to assess the effectiveness of the procedure. Additional data were collected including patient's weight, the mean operating time, mean blood loss, and postoperative complications including those associated with the procedure, and with the instrumentation.

Data relating to the procedure demonstrated a range of changes. Rib hump and lumbar hump had correction rates of 77% and 85%; coronal plane correction of the major curve averaged 70.7%; apical vertebral translation of the curve was corrected by 73.2%; pre-operative thoracic kyphosis of 50.1° was corrected to 28.9°; and preoperative lumbar lordosis was corrected from -57.9° to -49.0°.

Complications were identified in two patients, one of whom required ventilator support for 12 hours, and malposition of a pedicle screw was found in another patient. The authors concluded that this approach offers a good form of correction to scoliosis in this subgroup of patients without serious complications being encountered.

British School of Osteopathy Multi-disciplinary Research Symposium

On 22 May 2013, the British School of Osteopathy (BOA) hosted its inaugural, multi-disciplinary research symposium for manual therapy and musculoskeletal (MSK) medicine.

Steven Vogel, Vice Principal of the BSO, and Oliver Thomson, Research Officer at the BSO, convened the symposium to explore current issues that are impacting on education and practice in manual therapy and musculoskeletal healthcare. The aim was to provide a forum to disseminate and discuss current research activity and to provide an opportunity to identify key research questions and collaboration possibilities.

The morning focused on clinical expertise, reasoning and decision making. Dr Nicola Petty, programme leader for the Professional Doctorate in Health and Social Care at Brighton University, UK, presented her research on learning transitions of MSK physiotherapists towards clinical expertise. Oliver Thomson then went on to discuss clinical decision making in osteopathy, which he explored in his PhD. Professor Stephen Tyreman, Dean of osteopathic education at the BSO, concluded the morning's theme with an exploration of 'uncertainty in clinical healthcare'. He described the concept of 'aporia' (a pathless path) as a means of dealing with uncertainty in practice, likening clinical decision making to navigating across an unmarked terrain; through navigation there are a number of possible routes to the same destination.

The afternoon's theme was patient-centred care and self-reported outcomes, and it began with Dr Mary Sexton's presentation on her research in constructing a theory for patient-centred care in MSK physiotherapy. Danijela Serbic, researcher at Royal Holloway, University of London, presented work carried out by herself and Professor Tamar Pincus on the role of diagnostic labelling and pain-related guilt in low back pain; Dr Jorge Esteves, researcher at the BSO, discussed emotional processing and its relationship to chronic low back pain. Jonathan Field, a chiropractor in private practice, presented his work with Dr Dave Newell, from the Anglo-European College of chiropractic, on the influence of very early change in catastrophisation on self-reported outcome at three months.

The day concluded with a group discussion, facilitated by Steven Vogel about future symposia, and ideas for future collaboration and research; the overall consensus being that a collaborative approach to research in manual therapy and MSK medicine would be incredibly valuable to both practitioners and patients.

National Council for
NCOR
Osteopathic Research

Hub meetings

Information concerning the hubs and the full text papers being discussed at the meetings can be found at: www.ncor.org.uk/getting-involved/hubs

> BRISTOL

Thursday 19 September, 7-9pm

The meeting will consist of a focus group to gather the views of osteopaths on the use of outcome measures in practice. If you would like to participate, please contact Carol Fawkes (c.fawkes@qmul.ac.uk). The second part of the meeting will look at data collected using the Bournemouth Questionnaire and how to analyse this.

> EXETER

Saturday 28 September

The meeting will be looking at the data collected by the group while using the Bournemouth questionnaire, and will also involve a focus group looking at the use of Patient Reported Outcome Measures in clinical practice.

> HAYWARDS HEATH

Please refer to the NCOR website (www.ncor.org.uk)

> LEEDS

Monday 23 September, 5.30-7.30pm

The group will be looking at the AQP system and the information requirements.

Conference calendar

27-31 October, Dubai

International Federation of Orthopaedic and Manipulative Therapists (IFOMPT). Congress on low back and pelvic pain.

Further information can be found at: www.worldcongressibp.com

8-10 November, Surrey

The Annual Convention of the British Osteopathic Association at the Runnymede-on-Thames Hotel, Windsor Road, Egham, Surrey, TW20 0AG

More information will be available in due course in *Osteopathy Today* and on the BOA website (www.osteopathy.org).

15-17 November, Milan

International Congress of Osteopathy.

Further information can be found at:

<http://www.congressosteopatia.com/en>
Abstract submission information can be found at: <http://www.congressosteopatia.com/en/abstract/regolamento>

The conference section of the NCOR website will be updated regularly as information becomes available. It can be found at: <http://www.ncor.org.uk/getting-involved/conferences>

Research ideas

Carol Fawkes, Research Officer for NCOR

We are frequently contacted by osteopaths who want to develop an idea for a research project, collaborate with others or share their clinical experiences with the profession and the public, and we are pleased that there seems to be an increase in the number of osteopaths interested in research.

Communicating an idea for a research project is not always easy as there is usually far more to consider than first anticipated. However, this should not be a frustrating process provided that you have considered the different elements of your proposed project in a thorough and logical way before presenting your idea.

We have developed a research idea information sheet and checklist to guide you through the various elements of basic research design, so that when you come to sharing your idea with others you can have more confidence in your explanation. A well-thought-out research proposal makes it easier for interested parties to give you advice and help you develop the idea further, and this is essential when applying for funding.

The key areas covered in the information sheet are:

- > Defining your research question and why it is important
- > **Think PICO:**

Population: Describe your population of interest.

Intervention: What is the treatment you want to research?

Comparator group: What can you compare your intervention/treatment with?

Outcomes: How are you going to measure effects or outcomes?

Background and Rationale

Firstly, you need to convey the importance of your research idea with a brief literature review, outlining the problem being addressed by your proposed research and how your project is likely to add to the body of knowledge in this area. You should

detail why the research is important in terms of benefits to patients and, if applicable, the NHS. You should also consider and explain why the research is important at this particular time, and know that this type of work is not being undertaken currently by other researchers.

Your proposed research project

You will need to provide an expert summary of your proposed research project, which outlines the following elements:

Design

A brief statement of the study design you will use, for example, a randomised controlled trial. We have information about some study designs in our learning online section, and we will add more to this: www.ncor.org.uk/learning-online/evidence-based-tutorials

Setting

If you plan to collect primary data, as opposed to researching existing literature (secondary data), you will need to describe the health service setting(s) for your research. For example, patients in a private osteopathy practice, GP practice, or hospital setting.

Strategy for reviewing literature

You will need to conduct a literature review regardless of whether this is the main focus of your study. In primary data collection studies, the literature review serves as a form of modelling for the study. It will inform the development of the research question, as well as various elements of the methodology. For example, the literature can help you to justify the outcome measures that you

choose to use. It may also highlight the availability of existing survey or data collection tools which could be used in your study. The quality of relevant literature must be assessed and you should explain the search method and criteria used for this process.

Target population

Define the population you wish to study using recognised classification or diagnosis criteria. For example, for patients with tension-type headache or chronic low back pain, you could use classifications for headaches published by the International Headache Society (www.ihs-headache.org).

Describe the intervention

The intervention you are assessing in your project must be clear. For example, if you are assessing the effectiveness of osteopathic treatment, you will need to define osteopathy and also each of the techniques that you will use and why. Describing this in detail is important in order to make the study repeatable. If the treatment/intervention is likely to vary, you need to explain how you will deal with this.

Comparator group

If you want to investigate whether a treatment or intervention is useful, you will need to have some confidence that the outcomes occur as a result of the treatment and not due to some other factor(s) e.g. natural recovery, or environmental effects. To achieve this, you can compare those who receive the intervention with a control group(s), as in a randomised controlled trial. Comparisons are normally made with people receiving standard care or another existing intervention; a placebo; no treatment at all or being on a waiting list to receive treatment in the future. Many trials use a number of comparisons, for example, treatment compared with another treatment and no treatment.



For more information about randomised controlled trials, read our evidence-based practice tutorial: www.ncor.org.uk/wp-content/uploads/2012/12/RCTs_intro.pdf

You will need to describe your comparator group(s), justifying your choices, and describe your randomisation method.

Outcome measures and costs

To objectively measure how well your intervention works, you will need to use a standardised outcome measure(s). Outcome measures are a way of establishing changes following a treatment/intervention. For example, measuring pain using a visual analogue scale before osteopathic treatment and again after each treatment is a way of measuring changes in pain levels. You can read more about outcome measures here: www.ncor.org.uk/wp-content/uploads/2012/12/outcome_measures.pdf

When presenting the outcome measures you intend to use, you must include a justification for your choice, particularly when there are a number you can choose from. Considering outcomes used in previous studies is extremely important; consistency in the use of outcome measures allows systematic reviewers to combine the results of numerous studies, therefore increasing the statistical power of results (ref – COMET initiative). The COMET Initiative has a database of Core Outcomes for various interventions and patient populations: www.comet-initiative.org

In studies where there is a health economic component, you should state from what perspective costs and benefits will be considered and how you plan to collect this information.

Sample size

Those who are likely to be interested in your project will want to know how many people you intend to include in your study. They will also want to know if the results of your study are likely to be meaningful in a statistical sense and this will depend on your sample size. You should therefore calculate the sample size required for your study and include this in your

proposal, along with the estimated effect size, power and/or precision used in the calculation.

Recruitment of participants

You will need to make it clear how you plan to recruit participants for your study (where applicable). If you are hoping to involve existing patients in some research, they must be made fully aware of the research through receipt of a participant information sheet, and sign a consent form agreeing to be part of the study. If you are planning to recruit participants who are NHS patients, this will involve a different level of consideration and ethical permission.

Recruitment methods can take many forms, and this can include advertisements or referral. The type of recruitment and any inclusion and exclusion criteria must be considered prior to any research.

Ethics and research

Different types of investigation can take place within a practice, and some of these will require ethics approval. If you are unsure whether your work needs ethics approval before it can proceed, you should look at the table produced by the National Research Ethics Service (www.nres.nhs.uk/EasySiteWeb/GatewayLink.aspx?allid=355).

Project timetables including recruitment rate

You will need to justify your estimation of the duration of the entire study and outline the main stages with the expected duration of each. You should also detail the expected recruitment rate i.e. how long it will take to recruit x number of participants. You could use a Gantt chart to present all of the above

information clearly. You can read about Gantt charts here: <http://tinyurl.com/nkaf8u6>

Flow diagram

A flow diagram is useful and is required by funding organisations to provide a visual representation of your study proposal.

Expertise in team

Undertaking a research project requires a number of skills, so a multidisciplinary team is often required. For example, you may need a statistician to help you with sampling. Once you have established which skills will be needed for your project, you can then start to build your team. Once you have agreed a team, you can give interested parties confidence in your combined ability to undertake the project.

You will need to provide personal details of all persons involved in the proposed research, their research experience, and the extent and nature of their contribution. Those with other supporting roles, such as administrative authority, a finance officer, head of department and/or sponsor should also be included.

You must declare any conflicts or potential conflicts of interest relating to any of our team members. This is required to avoid any perception of bias or potential embarrassment to any party involved with the project.

Abstract in plain English

You should provide a summary of your proposed research that can be easily understood by a wider audience so that non-experts in your subject area can understand what your intended project involves. This helps commissioners of research to decide whether or not your proposal is the best one to answer a specific problem or brief. You must explain specialised technical terms and acronyms and avoid using discipline-specific jargon.

If you are responding to an advertised/commissioned call, you should explain how your research proposal is relevant to the research question.

Some guidance on writing in plain English can be found here: www.plainenglish.co.uk/free-guides.html

Once you have thought about and described your project in detail, you need to consider the following:

Patient and public involvement

Patients and the public can be involved at various stages in the research process, not only as participants in a trial. The extent of their involvement is likely to vary depending on the nature and context of your study. Patients and the public may be involved in identifying research topics, prioritising research questions, assisting in the design, or carrying out the research. You should explain if and why you have or have not involved patients and the public

in your proposal. You will then need to explain how they will be involved.

History of application

Submitting proposals to more than one funding body at a time is not acceptable practice. If you have previously submitted the same or a similar proposal for consideration to an organisation, you must disclose any information regarding these. Failure to do so may be viewed as academic misconduct.

Dissemination and outputs

Describe the way(s) in which you plan to disseminate the research you propose, the expected output of the research and the subsequent impact. This information assists the funding organisation in deciding whether or not your research will provide value for money.

The Research idea checklist and information sheet is available online at: <http://tinyurl.com/nmp8jmp>

FINAL CHECKLIST

Background and rationale

Why is your research important? Back this up with relevant literature.

Design

What kind of study is it?

Setting

In what kind of health setting will your study take place?

Strategy for reviewing literature

How will you conduct the literature review that will inform your study design? How will you assess the quality of the literature?

Target population

Describe your study population.

Intervention

Describe, in detail, the intervention.

Comparator group

Describe your comparator group(s).

Outcome measures and costs

How will you measure the outcomes of your intervention? Justify your choice of outcome measures. How will you measure cost, if applicable?

Sample size

What is your sample size? Show your calculations.

Recruitment of participants

How will you recruit participants for your study?

Ethics and research

Does your study require ethics approval?

Project timetable

How long will the study take? What will happen when?

Flow diagram

Present your study using a flow diagram.

The study team

Describe the expertise of your team.

Abstract in plain English

Write an abstract in plain English.

Patient and public involvement

How will patients and the public be involved in your study?

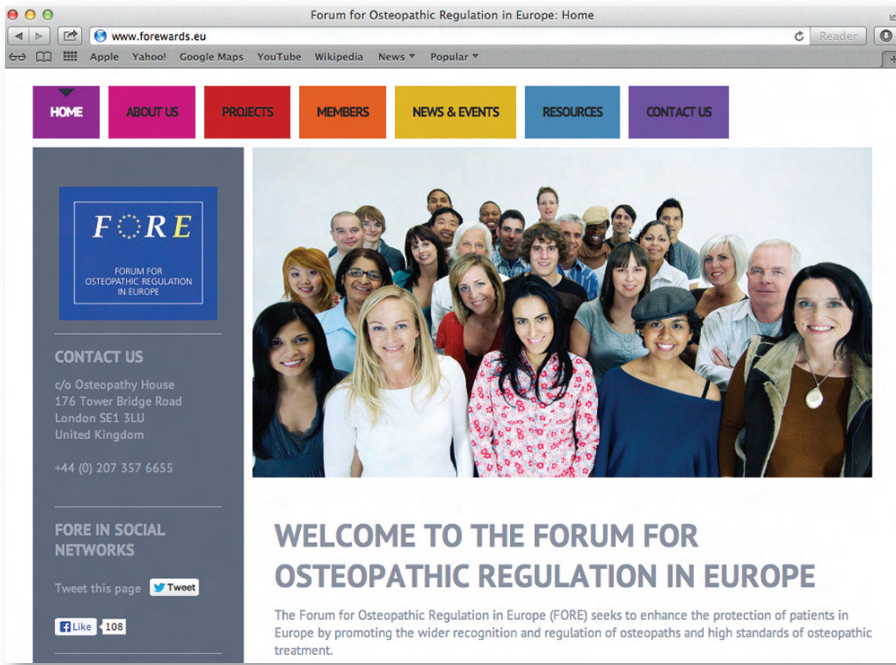
History of application

Have you applied for funding elsewhere?

Dissemination and outputs

How will you disseminate your research findings? What impact will they have?

Launch of new website on European osteopathy



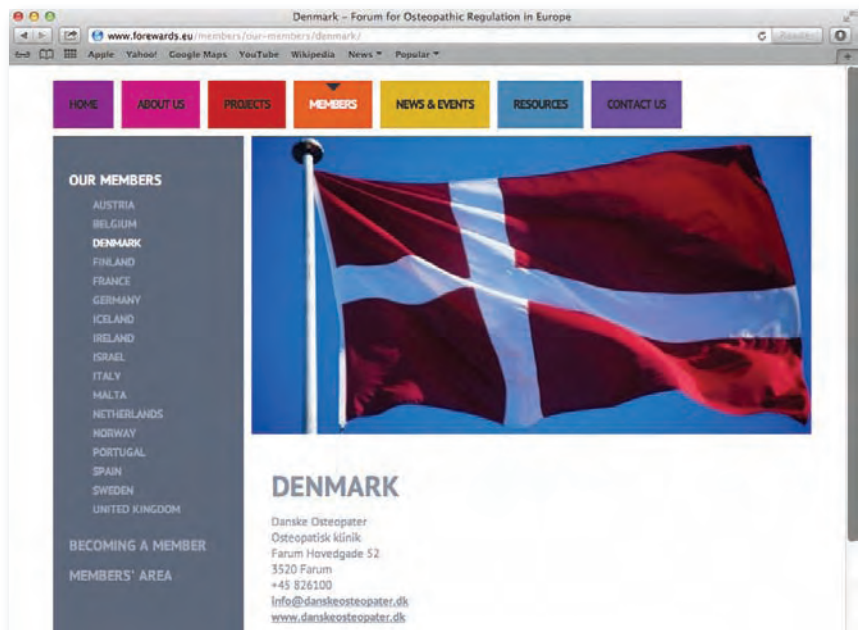
The Forum for Osteopathic Regulation in Europe (FORE) has launched a brand new website www.forewards.eu

FORE brings together osteopathic associations, voluntary registers and regulators, including the GOsC, to improve the protection of patients in Europe by promoting the wider recognition and regulation of osteopaths and high standards of osteopathic patient care.

This new site is packed with information about FORE as an organisation; its members and details of the status of osteopathy in different countries; news and events relevant to osteopathic regulation;

as well as a comprehensive resources section with relevant publications, research and links.

FORE's new website has improved functionality, design and navigation to provide a more accessible and informative reference not only for FORE members, but also for osteopaths, patients and the public interested in information about osteopathy in Europe.



For a closer look at the brand new website, visit www.forewards.eu

For further information and to give your feedback on FORE's new site you can contact the Secretariat at: foresecretariat@osteopathy.org.uk

Developing NHS osteopathy in Wales

Ross Johnston BSc (Hons) Ost Med MSc DO, Senior Lecturer at Swansea University (www.swansea.ac.uk)

The NHS in Wales comes under direct control of the Welsh Government (WG) rather than Westminster. The WG has, at present decided not to utilise the Any Qualified Provider (AQP) scheme which is being implemented in England. While this may present a challenge to accessing osteopathy on the NHS, the MOst Programme at Swansea University has embarked on novel strategies to widen access that simultaneously open further possibilities of multidisciplinary care for patients and inter-professional learning for our students.

Last summer, we met with Cym Taf Health Board (which oversees the Valleys region of South Wales) and the Welsh Institute of Chiropractic, and embarked on a six month pilot of clinical provision for spinal pain which followed a paper-based triage model. This form of triage has a case-based 'around the table' type format, whereby members of the clinical faculty of both institutions engaged in weekly meetings with extended scope physiotherapists, podiatrists and an orthopaedic surgeon to discuss the best clinical route to recommend to patients on an NHS musculoskeletal waiting list.

The bid for this pilot was approved by the National Orthopaedic Innovation and Delivery Board, with the clear aim of reducing waiting list times and improving patient outcomes. The project was evaluated and monitored by the Cym Taf Health Board, the governance of the osteopathic educational institution (OEI) and chiropractic institution, as well as the Delivery and Support Unit (DSU) which functions to drive change within the NHS in Wales. Due to the success of this pilot, the DSU wished to repeat a similar project in another Health Board.

As a result of this, Swansea University, along with the Welsh Institute of Chiropractic and the DSU, have now met with the Musculoskeletal Services Team of Morriston Hospital in Swansea to create a larger project which will run initially for one year, and is due to commence in October. Patients from the NHS waiting list for spinal pain will be triaged using a similar paper-based format. A key difference this time is that they will be able to obtain osteopathy and chiropractic alongside each other, from



Ross Johnston Senior Lecturer at Swansea University

final year students (of both institutions) under the supervision of clinical faculty, as per the standard pedagogical model encountered in most OEIs. The appointments for both osteopathy and chiropractic will take place under one roof in the new Beacon Health Centre in Swansea, which as well as hosting the MOst programme's clinic expansion, is home to the Abertawe Bro Morgannwg University Health Board services and Swansea University College of Medicine. Planned future development of the project includes the provision of a walk-in service as well as

widening access to more diverse NHS waiting lists.

This model of clinical provision represents a strategy which can improve both access to and awareness of osteopathy and chiropractic, while providing previously unexplored inter-disciplinary educational platforms and collaboration between the two professions in the UK.

It is hoped that following the successful implementation of the Swansea project, this model could be rolled out to other NHS Health and Commissioning Boards across the UK.

For more information about osteopathy and the NHS in Wales, contact Ross on 01792 606713 or at: R.G.Johnston@swansea.ac.uk



We receive regular queries from osteopaths who are thinking of practising outside the UK. A popular choice is Canada, so we invited Ed Paget, Secretary of the Canadian Federation of Osteopaths (CFO) to share the following key facts of interest for UK-trained osteopaths.

Ed Paget



O Canada!

1 Healthcare laws are not the same across Canada.

Canada consists of 10 provinces and three territories, all of which have their own healthcare systems. The laws governing osteopathy vary from province to province.

In the provinces of British Columbia, Alberta and Ontario, only Osteopathic Physicians can use the title "osteopath". Therefore, British trained osteopaths must refer to themselves as follows:

British Columbia: Osteopathic Practitioner
Alberta: Osteopathic Manual Therapist
Ontario: Osteopathic Manual Practitioner

2 There is no National Regulator for Osteopathy in Canada.

You do not need to take an entrance exam to work in Canada. As osteopathy becomes more established, provinces may introduce entry exams but at the time of writing there are none.

3 Find out who is setting the standards of practice in the province you want to work in.

As there is currently no regulation, anyone can set up a practice in osteopathy.

There are five provinces in Canada with not-for-profit, voluntary, professional membership organisations, which have created standards for membership similar to those found in regulated countries, e.g.

UK, Australia, New Zealand. They are all members of the Canadian Federation of Osteopaths (CFO) and set standards in their respective provinces. The CFO is also a member of the Osteopathic International Alliance (www.oialliance.org). The five provincial organisations are:

British Columbia – Society for the Promotion of Manual Practice Osteopathy
<http://osteopathybc.ca>

Alberta – Alberta Association of Osteopathic Manual Therapists
<http://osteopathyalberta.com>

Ontario – Ontario Association of Osteopathic Manual Practitioners
<http://osteopathyontario.org>

Quebec – Osteopathy Quebec
www.osteopathiequebec.ca

Nova Scotia – Nova Scotia Association of Osteopaths
<http://novascotiaosteopaths.ca>

4 Joining an association is important.

Most private insurance plans will reimburse for your services if you are a member of a provincial association which they recognise, like the ones mentioned above.

5 Some Provinces have more than one association.

Check for ones that have high educational requirements similar to those you are used to in the UK.

6 In some provinces, HVTs are a restricted act.

Be prepared to adapt your treatment style as necessary to ensure you do not fall foul of the legislation.

7 How to get into Canada.

Here are three common ways:

- i. **You get a job offer from an existing business**
 You will be issued with a work visa and work for one employer.
- ii. **Temporary work visa (Internal Experience Canada, IEC)**
 Those younger than 30 can apply for an open IEC visa. See www.bunac.org for more details.
- iii. **Enrol in the Provincial Nominee Program**
 As well as being employed, you would be working towards becoming a Permanent Resident of Canada.

For more information visit the website of Citizenship and Immigration Canada (www.cic.gc.ca).

8 Help with immigration

Help should come from a prospective employer, other osteopaths and perhaps a lawyer. Currently, neither the provincial associations nor the CFO are equipped to advise you on immigration matters.

Backchat

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

New graduates

Dear Editor,

I am writing in response to the 'Starting out in practice' article in the June/July 2013 issue.

We often hear that starting out as an osteopath, having spent the past four or five years under the university umbrella, can be a daunting prospect. Katherine's positive approach to building a community of osteopaths working together to promote the profession and create CPD opportunities is a quality that the Osteopathic Sports Care Association (OSCA) has advocated since its establishment by Jonathan Betser in 1995.

Graduate osteopaths wishing to build a career working in sport will appreciate that it is a highly competitive arena. One of the best ways to gain experience of working in sport is to shadow experienced osteopaths and physiotherapists. However, internship opportunities can be hard to secure due to the high level of demand for places.

In continuing with this approach of building a community network, new graduates and final year osteopathic students are now able to apply for a place on the OSCA Internship programme. Successful candidates will have the invaluable opportunity to shadow experienced osteopaths and physiotherapists and gain experience working in a variety of sports.

For more information on the OSCA Internship programme and how to apply, please visit www.osca.org.uk

Simeon Milton

Editor's response:

Thank you for bringing this to our attention. We look forward to hearing more about the programme.

We continue to welcome your views and if you have a question to ask or views to share, please feel free to contact *The Osteopath* editor on 020 7357 6655 x222 or email editor@osteopathy.org.uk.

Bookshelf

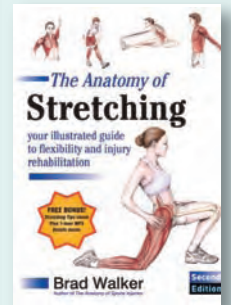
A selection of illustrated reference books for osteopaths

The Anatomy of Stretching Second Edition

Brad Walker

Lotus Publishing
ISBN 978-1-905367-29-0
192 pages

The Anatomy of Stretching looks at stretching from every angle, including: physiology and flexibility; the benefits of stretching; the different types of stretching; rules for safe stretching; and how to stretch properly. Geared towards fitness enthusiasts of any level as well as fitness professionals, this book also focuses on which stretches are useful for the alleviation or rehabilitation of specific sports injuries.

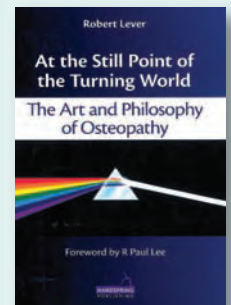


At the Still Point of the Turning World: The Art and Philosophy of Osteopathy

Robert Lever

Handspring Publishing
ISBN 978-1-9091410-5-6
185 pages

In this book, the author examines and explores both the art and the science of osteopathy through the eyes and experience of a devoted teacher and practitioner. This is a book about principles, ideas and reflections that have shaped a dedicated approach to practice throughout a professional life of undimmed enthusiasm over 40 years.

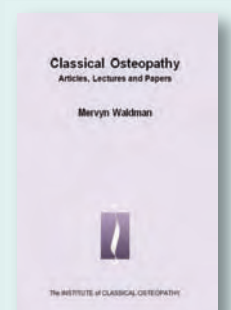


Classical Osteopathy: Articles, Lectures and Papers

Mervyn Waldman

The Institute of Classical Osteopathy
ISBN 978-0-9560865-7-0
303 pages

Most students and graduates of osteopathy have had little or no instruction in the breadth and application of classical osteopathy. This book attempts to outline its principles, physiological basis and practice, and the revolutionary contribution it can make to the practice of 21st century medicine.



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

Book reviews

The Soft Tissue Release Handbook: Reducing Pain and Improving Performance

Mary Sanderson & Jim Odell, Lotus Publishing (2012)
ISBN 978-1-905367-22-1, 192 pages

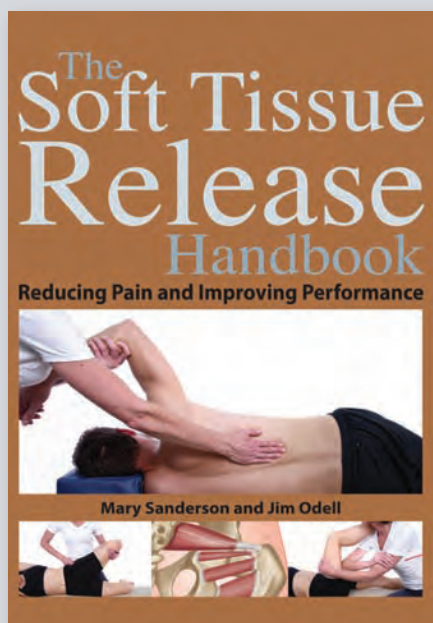
Reviewed by Susan Feetham BSc (Hons) Ost

This book is very similar in content and layout to Mary Sanderson's first book - *Soft Tissue Release: A Practical Handbook for Therapists*. It starts with a good introduction and explanation of what Soft Tissue Release is, how to do it and when to use it.

Each section has good pictures of the anatomy of the area, tables showing what the muscles do and the effects of the restrictions to these muscles. The section then uses words and photographs to explain how to do the techniques for each area of muscle/ligament/tendon.

The final section is case studies but these are brief and superficial, e.g. a lady had this, we did some work (no details), she got better. More depth would have been useful.

Having read both of Mary Sanderson's books, I can say that they are both a very good introduction to Soft Tissue Release, but I think that having one or the other on your bookshelf would be enough. This book I think, overall, is better but it does not have a section on self-treatment. I'm also not sure about the subheading of reducing pain and improving performance (this hopefully happens when the treatment is given), and there was not much emphasis on sports injuries and problems.



My Neck Hurts! Non surgical Treatments for Neck and Upper Back Pain

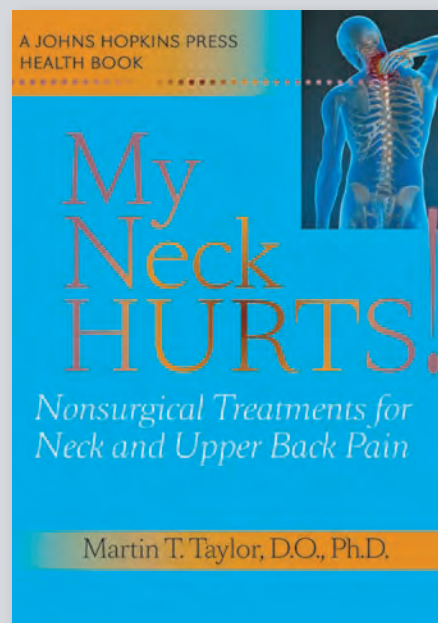
Martin T. Taylor, D.O., Ph.D., John Hopkins University Press (2010)
ISBN 978-0-8018-9666-8, 171 pages

Reviewed by Hannah Del Ponte

This is a consolidated guide to neck pain and the plethora of treatments available. There are useful pictures, along with explanations of possible causes and anatomy. The exercises suggested are explained well, with illustrations and photographs to support the text. The many possible treatments are explained in simple language, with the potential benefits and complications outlined. Alternative therapies are included and the author gives his opinion on how useful he believes these to be and the scientific evidence that supports these therapies.

Sadly, despite being written by an osteopathic physician, osteopathy is covered in three pages and rarely mentioned in the rest of the text. Craniosacral therapy is listed as 'a non-traditional osteopathic technique' in the alternatives that the author does not recommend.

It is also worth noting that the book discusses treatment availability, licensing and regulation of practitioners in the USA only.



Courses 2013

Courses are listed for general information. This does not imply approval or accreditation by the GOsC. For a more comprehensive list of courses, visit the 'CPD resources' section of the o zone website – www.osteopathy.org.uk/ozone

All dates

Treating the Complex Shoulder: The Niel-Asher Technique

Course Director:
Simeon Niel-Asher
Venue: Available online
tel: 0808 189 0447
www.frozenshoulder.com

September

>3 Spinal Manipulation and Mobilisation Technique Master class

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbonsbodymaster.co.uk

>4 Management of Asthma: Unlocking the Thoracic Cage and how to improve the Breath of Life. Using osteopathic and dry needling techniques

Speakers: David Lintonbon & Jean Barnard-Hadley
Venue: London School of Osteopathy 12 Grange Road, London SE1 3BE
tel: 07958 488 784
email: dlintonbon@hotmail.com
www.theartofhvt.com

>5-6 Spine Course for Osteopaths

Venue: The Nottingham Conference Centre, Nottingham
tel: 0800 0 43 20 60
email: info@nspine.co.uk
www.nspine.co.uk/spine-course-for-osteopaths/spinal-course-osteopaths.php

>6 An introduction to treating the performing artist

Course Leader: Jennie Morton
Venue: University of London, International Hall, London, WC1N 1AS
tel: 07771 993565
email: info@healthyperformers.com
www.healthyperformers.com

>7 Acupuncture in the management of tendinopathies

Speaker: Brad Neal
Venue: London, N19
tel: 020 7263 8551
email: cpd@cpdo.net
www.cpdo.net

>7-8 Functional Stretching

Speaker: Prof. Eyal Lederman
Venue: London, N19
tel: 020 7263 8551
email: cpd@cpdo.net
www.cpdo.net

>8 Complete Clinical Competence Series – Total Abdomen Examination

Speaker: Dr Graham Downing
Venue: Warwick Hilton, Warwickshire
tel: 020 8504 1462
email: taoseminars@gmail.com

>8 Management of Low back pain and associated dysfunction using osteopathic and dry needling techniques

Speakers: David Lintonbon & Jean Barnard-Hadley
Venue: London School of Osteopathy, 12 Grange Road, London SE1 3BE

tel: 07958 488 784
email: dlintonbon@hotmail.com
www.theartofhvt.com

>8 Treating The Professional Dancer

Course Leader: Jennie Morton
Venue: Jacksons Lane, 269a Archway Road, London, N6 5AA
tel: 07771 993565
email: info@healthyperformers.com
www.healthyperformers.com

>10 Knee Joint Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbonsbodymaster.co.uk

>11 Hip Joint Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbonsbodymaster.co.uk

>12 Kinesiology Taping for the Athlete Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbonsbodymaster.co.uk

>14 Functional pain disorders: The same but different?

Speaker: Phil Austin
Venue: European School of Osteopathy, Maidstone, Kent
tel: 01622 671558
email: corinnejones@eso.ac.uk
www.eso.ac.uk/cpd-calendar.html

>14-19 Cranio-Sacral Therapy - Introductory Course - Start of full 1 year professional training

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

>16-20 SCC Osteopathy in the Cranial Field

Speaker: Ana Bennett
Venue: London
email: info@sutherlandcranialcollege.co.uk
www.sutherlandcranialcollege.co.uk

>17-18 Advanced Soft Tissue Techniques Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbonsbodymaster.co.uk

>21 Managing shoulder conditions using a process approach

Speaker: Prof. Eyal Lederman
Venue: London, N19
tel: 020 7263 8551
email: cpd@cpdo.net
www.cpdo.net

> 21-22
Craniosacral Therapy Introductory Weekend

Speaker: Michael Kern DO BCST ND
Venue: Skylight Centre, 49 Corsica Street, London N5 1JT
tel: 07000-785778
email: info@cranio.co.uk
www.cranio.co.uk

> 21-22, 28-29, 9-10
November Foundation course in acupuncture (3 weekend course)

Speaker: Jennie Longbottom
Venue: London, N19
tel: 020 7263 8551
email: cpd@cpdo.net
www.cpdo.net

> 22
Spinal Manipulation: Day 7 of 9 Complete Manipulation Course

Speaker: Dr Eedy
Venue: Warwick Hilton, Warwickshire
tel: 020 8504 1462
email: taoseminars@gmail.com

> 22
Integrated Body Work: Day 6 of 8 Complete Body Work Course

Speaker: Karen Harding
Venue: Warwick Hilton, Warwickshire
tel: 020 8504 1462
email: taoseminars@gmail.com

> 22
Disc Diagnosis and Management

Speaker: Dr Graham Downing
Venue: Warwick Hilton, Warwickshire
tel: 020 8504 1462
email: taoseminars@gmail.com

> 25
Cervical Spine Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbons
bodymaster.co.uk

> 26
Shoulder Joint Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbons
bodymaster.co.uk

> 28
'E.N.T a Practical Approach' – treating ear, nose & throat disorders in children & teenagers

Speaker: Miranda Clayton
Venue: London School of Osteopathy, London SE1 3BE
tel: 07792 384592
email: osteokids@aol.com
www.mumandbaby-at-home.com/CPD

> 28
SCC BLT Refresher day – Module 4

Speaker: Zenna Zwierzchowska
Venue: London
email: info@sutherlandcranialcollege.co.uk
www.sutherlandcranialcollege.co.uk

> 28
Rule of the Artery (Refresher day)

Speaker: Liz Hayden and Clive Hayden
Venue: London
email: info@sutherlandcranialcollege.co.uk
www.sutherlandcranialcollege.co.uk

> 28
Headaches and Migraines

Speakers: Richard Katesmark and Cliff Lomas
Venue: British School of Osteopathy
tel: 07801 617 370
email: cliffordlomas@hotmail.co.uk

October

> 3-6
Sensory Awareness - Beyond the Five Senses

Speaker: Michael Kern DO BCST ND
Venue: Skylight Centre, 49 Corsica Street, London N5 1JT
tel: 07000-785778
email: info@cranio.co.uk
website: www.cranio.co.uk

> 4
Working with scoliosis from a fascia-oriented perspective

Speaker: Dr Robert Schleip
Venue: London, N19
tel: 020 7263 8551
email: cpd@cpdo.net
website: www.cpdo.net

> 5
Cranio-Sacral Therapy – 2 Year Course (weekend format) – start of full professional training

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

> 5
Cranio-Sacral Therapy – 2 Year Course (Weekend Format) - Start of full professional training

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

> 5
Chronic Hidden Hyperventilation – the 21st Century epidemic

Speaker: Michael Lingard
Venue: European School of Osteopathy, Maidstone, Kent
tel: 01622 671558
email: corinnejones@eso.ac.uk
www.eso.ac.uk/cpd-calendar.html

> 5-6
Basic visceral: the thorax
Speaker: Joanna Crill Dawson
Venue: London, N19
tel: 020 7263 8551
email: cpd@cpdo.net
www.cpdo.net

> 5-6
Positional release techniques in management of cervical, thoracic pelvic pain & dysfunction

Speaker: Leon Chaitow
Venue: London, N19
tel: 020 7263 8551
email: cpd@cpdo.net
www.cpdo.net

> 8
Spinal Manipulation and Mobilisation Technique Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbons
bodymaster.co.uk

> 9
Kinesiology Taping for the Athlete Masterclass

Speaker: John Gibbons
Venue: Oxford University Sport, Jackdaw Lane, Oxford, OX4 1EQ
tel: 07850 176600
www.johngibbons
bodymaster.co.uk

> 12
'The Miserable Baby' – Treating Feeding and Digestive Disorders in Babies

Speaker: Miranda Clayton
Venue: London School of Osteopathy, London SE1 3BE
tel: 07792 384592
email: osteokids@aol.com
www.mumandbaby-at-home.com/CPD

CLASSIFIEDS

RECRUITMENT

Associate osteopath required in Suffolk.

Part time with ability to develop a clinical list further. Working in an enjoyable and supportive environment with osteopaths, physios and doctors. Please send CV to Andrew Gilmour at Parry and Gilmour by email agilmour@parryandgilmour.co.uk 01394 387818.

A highly motivated associate is required

for an established practice in Surrey. Exceptional patient management and a drive to grow our client base is essential. Please send CVs through to info@addlestontherapycentre.co.uk tel: 01932 831 616.

Full time associate osteopath required

to join a highly motivated team within a very busy, expanding and well-established multi-therapy practice situated in the rural town of Nantwich, Cheshire. Full supporting administration staff is provided and there are excellent opportunities for professional development. There is also a large equine database and therefore opportunities for anyone interested in veterinary osteopathy. For further information call Andrew Antoniou, Practice Manager – tel 01270 629933 or visit our website: www.weaverhouse.com.

Associate wanted for very busy practice in Westport, Co. Mayo, Ireland. Initially 2-3 days leading to full time. Osteopath should be looking for long term position. Largely structural based practice. Mentoring provided by principal. All enquiries and CVs to bdrummclinic@gmail.com.

COMMERCIAL

Osteopathic practice for sale in Buxton, Derbyshire. Town centre conservation area; shop front reception with consulting room to rear and two-storey flat above. Established 24 yrs mostly with involuntary mechanism but scope for wider practice. Freehold £149,950. gscarr3@ntlworld.com.

LONDON, Regent Street W1 clinic, equidistant Oxford Circus and Piccadilly Circus underground stations. Available on Mondays, Wednesdays and Fridays (including evenings and weekends). Meet-and-greet reception, light and quiet small clinic with aircon and WiFi. Please phone 020 8815 0979.

Goodwill of osteopathic practice available: Nottinghamshire. Practice established 30 years. Located in centre of busy market town, on main road with excellent transport links. Half an hour from beautiful Peak District. Ground floor accommodation within multidisciplinary private clinic comprising osteopathy, physiotherapy, chiropody, beauty therapy, dental technician, hypnotherapy. Accommodation includes fully equipped consulting room with Atlas manipulation couch, traction couch and ultrasound, reception area, office, toilets and waiting room. Disabled access. On-site parking. This osteopathic clinic generates a gross income of £70,000 based on a 3½ day week. The practice must be disposed of quickly. I will give the goodwill away for free provided the incoming osteopath pays three years' rent (£500 pcm plus services) in advance. No time wasters. This is an unbelievable

opportunity for a serious practitioner. For further details contact Lisa on 07845 873074, or email osteopathpractice@gmail.com.

PRACTICE FOR SALE, South East London, ideal quiet location, well established, huge potential, one room, 50/50 structural/cranial. Good transport links. Includes fixtures and fittings. For more information please contact Julie on M: 07766 740171 and E: julie600@hotmail.co.uk.

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COURSES

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JEMS Movement ART (Analysis, Treatment and Rehabilitation) Part 1: Understanding and Interpreting Functional Movement in Clinical Practice. September 7-8, 2013 (Burton-upon-Trent) OR October 12-13, 2013 (London). "This has been a game changer for me in how I treat, observe and advise patients." Registered Osteopath. Contact: info@jemsmovement.com, www.jemsmovement.com.

Biodynamic Craniosacral Therapy Training - two-year part time course in London commences in October 2013. Probably the most comprehensive cranial training available worldwide, taught by highly experienced teachers. Course director: Michael Kern D.O. B.C.S.T. N.D. - author of "Wisdom In The Body: The Craniosacral Approach To Essential Health". Introductory Weekend with Michael Kern on September 21st/22nd. For further details please contact Craniosacral Therapy Educational Trust 07000 785778, Email: info@cranio.co.uk, Website: www.cranio.co.uk.

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CPDO

2013

Date	Title	Lecturer	Cost	Deposit	CPD hrs
Weekend courses 10.00-17.00					
4-6 Sept	Advanced thorax and abdomen	Jean Pierre Barral	<i>Prilly booked</i>		
7-8 Sept	Functional stretching	Prof. Eyal Lederman	£235	£150	14
21 Sept	Managing shoulder conditions using a process approach	Prof. Eyal Lederman	£125	£125	7
21-22 Sept, 28-29 Sept, 9-10 Nov	Foundation course in dry needling (3 weekend certificate courses)	Jennie Longbottom	£885	£350	42
5-6 Oct	Basic visceral: the thorax	Joanna Crill Dawson	£235	£150	14
5-6 Oct	Positional release techniques in management of cervical, thoracic & pelvic pain & dysfunction	Leon Chaitow	£285	£150	14
1-2-3 Nov	Harmonic technique	Prof. Eyal Lederman	£385	£200	21
Evening courses and workshops 18.30-20.30					
4 Oct	Working with scoliosis from a fascia-oriented perspective	Dr. Robert Schiep	£55	-	2
24 Oct	Introduction to auricular acupuncture	Jennie Longbottom	£45	-	2
24 Oct	How to treat: Whiplash injuries	Prof. Eyal Lederman	£35	-	2
21 Nov	Incorporating electro-acupuncture in manual and physical therapies	Jennie Longbottom	£45	-	2
21 Nov	How to treat: Impingement syndrome of the shoulder	Prof. Eyal Lederman	£35	-	2
21 Nov	Introduction to integrated Myofascial Release	Rachel Fairweather & Meghan Wari	£35	-	2

Functional stretching Towards a functional approach

Prof. Eyal Lederman

Traditional stretching techniques, such as passive stretching and MET have limited contribution to recovery of movement range in many musculoskeletal conditions - immediate: 3°, short-term: 1°, long-term: 0° (Cochrane Database, CD007455)

Find out why and how it can be resolved

Functional stretching is a new osteopathic approach that focuses on active restoration of range of movement (ROM), using task-specific, functional movement patterns. This approach is useful for recovering movement losses due to post-injury changes, immobilisation, surgery, frozen shoulder and central nervous system damage. Functional stretching has been developed over 10 years. It is informed by research in areas of tissue adaptation, motor control and cognitive-behavioural sciences.

Outcome of course:

- Understanding the biomechanical, biological, neurological and psychological-behavioural processes associated with loss of movement range
- Understanding the processes associated with long-term length adaptation and recovery of movement range
- Ability to identify the indications for therapeutic stretching
- Understand the role of pain and sensitization in ROM loss and recovery
- Understanding the differences between therapeutic and recreational stretching
- Review of various stretching approaches
- Learning new functional stretching techniques to optimise therapeutic outcome in various musculoskeletal conditions.

7-8 Sept 13, 14 hr CPD / For more information and booking see www.cpdo.net

Venue:

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

For more information, updates and booking: www.cpdo.net

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

* (Except for Barral's courses which are held at the Skylight Centre, 49 Corsica Street, London N5 1JT)

Osteopathy in the Cranial Field

16-20 September 2013

MODULE 2/8



Course Director
Ana Bennett DO MScC

This course presents Sutherland's 'Cranial Osteopathy' hypothesis, exploring all five parts of its model and then integrating them clinically. Aspects of diagnosis and treatment are explored so that you leave the course with a solid grounding of this approach, which can be included in your Osteopathy from the next day in practice.

The lecturers and tutors selected for September 2013 have between them hundreds of hours experience teaching this module, with students giving the highest grades for course feedback, quality of content, supportive learning environment and tutor skills.

If you like learning in a relaxed environment, this non-residential five day course is taught at the highest level you will find in Europe. Come and join us with our 1:4 teaching ratio and we will explore Osteopathy in a supportive and subtle way.

CPD 40 hours | London | non-residential £1225*

The Dynamic Basicranium

1-3 November 2013

MODULE 6



Course Director
Liz Hayden DO MScC

Bones are an essential component of the dynamic tension support system of the body and when considered as specialised connective tissue bones come alive under our hands.

What are bones but a different form of skin? W O Sutherland

This course will help you treat complex physical trauma patterns in the whole body more effectively. It will explore the anatomy, physiology, function and clinical relevance of bones of the neuro-cranium and the sacrum and pelvis.

Our experienced tutors are experts at meeting individual needs and gently opening up awareness to new concepts and experiences. A highly clinically relevant course.

CPD 24 hours | Stend | residential £858

Rollin Becker Memorial Lecture



Michael Burmano
DO USA

The Heart of (the) Matter

Michael Burmano DO USA

Regents College, London

5pm on Saturday, 30 November 2013

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Osteopathy in the Cranial Field (6-day)



Osteopathy in the Cranial Field courses have been held annually at the BSO since 1974, in association with the Sutherland Cranial Teaching Foundation Inc. (USA), the organisation originally established by Dr. Sutherland to develop and promote high quality teaching in the Involuntary Mechanism approach. Approximately half of the contact time is devoted to practical instruction in groups of four participants to one tutor giving intensive, participant-centred tuition in practical skills.

Date: Saturday 7 - Monday 9 September and Sat 14 - Sun 15 September
Course fee: £975 with discounts for 2013 graduates & ex-BSO students

Paediatric Osteopathy

Working with children and babies is an increasing part of osteopathic clinical work. This course will give a firm grounding in eliciting a thorough case history, relevant examination and evaluation. This will give delegates confidence in their diagnosis and management plans for infants. The course will include red flags and examination procedures. There will be case-based discussions about treatment approaches rather than practical training in specific techniques. Day one of the course will focus on babies up to a year, while day two discusses infants up to five years.



Saturday & Sunday 12 & 13 October
Course fee: £125 per day CPD: 7 hours per day

Cervico Thoracic Junction



The course will revise structural and fascial/visceral approaches to the cervico thoracic junctional area, and will involve techniques to address upper ribs, thoracic inlet and cervical restrictions/imbalance.

Delegates will have the opportunity to explore the application and effectiveness of structural and fascial/visceral techniques while revising the viscerosomatic relationships of this important transitional junction.

Saturday 12 October
Course fee: £125 CPD: 7 hours

Osteopathic Refresher

This new course at the BSO offers osteopaths a range of 'refresher' sessions designed to update and explore different aspects of osteopathic practice. The weekend has been designed to support the new *Osteopathic Practice Standards*, and invited speakers represent a wide range of experience and expertise. Final speakers and subject areas will be confirmed soon, but register your interest now for this popular course.



Saturday & Sunday 9 & 10 November
Course fee: £200 CPD: 15 hours

Functional Active Release



Functional Active Release combined with 'Active Palpation' skills - This treatment technique uses a 'Patient controlled' multi-planar form of myo-fascial release. Different sports with their specific injuries are discussed, as well as certain patient groups; Pregnancy, 60 plus, Dancers, Cyclists, One-sided, or Upper & Lower body dominant Sports, Scoliosis. This Robin Lansman course forms one day of a 3 day course which includes Sports Biomechanics and Prescription Stretching.

Saturday 7 December
Course fee: £125 CPD: 7 hours

Contact

To register your interest or for further information on any of the CPD courses, please contact: Sarah McLaughlin on 020 7089 5352 or cpd@bso.ac.uk.

Courses Coming Up

September
Osteopathy in the Cranial Field
Sat & Sun 12 & 13 October
Paediatric Osteopathy 1 & 2
Sat 12 October
Cervico Thoracic Junction
Pain & Pharmacology
Sat & Sun 9 & 10
November
Osteopathic Refresher
Sat 7 December
Paediatric Refresher Day
Functional Active Release
Sat 11 January 2014
Prescription Stretching
Ergonomics
Sun 12 January 2014
Whiplash
Sat 25 January 2014
First Aid

Discounts

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

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The BSO also offers room hire. Whether you need a board room for your meeting, a lecture room for your talk or a technique room for a course, the BSO can help. Call 020 7089 5352 or visit www.bso.ac.uk/about-the-bso/room-hire-rates-and-information/



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MSc Osteopathy *Achieving the next level*



This flexible programme is designed to develop your professional capability in clinical practice, education and research. It gives you the opportunity to develop and critically apply your knowledge and skills in the areas of business, practice management and professional leadership.

The course is structured to allow you to complete specific units of learning as CPD or undertake the full course of

study.

Each module will run one Saturday a month over four months and will utilise a variety of teaching approaches including lectures, seminars and practical workshops, supported by assignments.

Start date: September 2013

Course Leader: Shireen Ismail

Duration: 3 years (2 units per year)

Course fee: £1,160 per 30 credit unit

Still accepting applications for September 2013

Post Graduate Certificate In Academic and Clinical Education

This unique programme is designed to equip you with the knowledge and skills to effectively support students in classroom and clinic-based settings.

The two modules: Education for Academic Teaching and, Education for Clinical Supervision and Teaching Technical Skills have a strong clinical and practical skills focus.

Each module involves a four-day course of lectures, seminars and practical workshops which are supported by assignments.

Start date: September 2013

Course Leader: Dr Jorge Esteves

Course fee: £2,300

**Still accepting applications for
September 2013**



Professional Doctorate In Osteopathy *A new level of osteopathic scholarship*



This programme, the first of its kind, blends teaching and self-motivated investigation that will allow you to make use of a range of specialists who are experts in a variety of disciplines.

You will be introduced to highly relevant, but not normally associated, subjects and will have the opportunity to work at the cutting edge of osteopathic theory and practice. The emphasis will be not just on understanding a theoretical body of knowledge, but on the nature of practice itself.

The course gives you the opportunity to investigate some of the key challenges facing the osteopathic profession today and develop the skills and knowledge to pursue the best interpretation, enhancing osteopathy's body of knowledge and skill.

Start date: February 2014

Course Leader: Professor Stephen Tyreman

Course fee: £3,300

Still accepting applications for February 2014



To register your interest or for further information on any of the Postgraduate courses, please contact:

Shanaz Rahman on 020 7089 6367 or s.rahman@bso.ac.uk

Or visit our website:

<http://www.bso.ac.uk/cpd-postgraduates/postgraduate-courses/>

Looking for a course?

Functional pain disorders – the same but different?

Saturday 14 September 2013

Presented by Phil Austin

Cost: £135 (inclusive of lunch and refreshments) - 7hrs CPD

This course introduces the basic neuroscience of musculoskeletal and visceral pain, and the inter-relationship between psychological, physiological and environmental processes in pain.

General aims:

- Develop your understanding about the basic neuroscience of pain and the inter-relationship between psychological, physiological and environmental processes in pain;
- Explore current understanding of the biological processes involved in the perception of pain;
- Explore current understanding of the psychological processes in the perception and expression of pain.



Chronic Hidden Hyperventilation – the 21st Century epidemic

Saturday 6 October 2013

Presented by Kitchell Lingard

Cost: £135 (inclusive of lunch and refreshments) - 7hrs CPD

Chronic Hidden Hyperventilation (CHH) affects up to 90% of the population in the West and is associated with, or the underlying cause of, over 100 diseases. However, it is rarely diagnosed by doctors and even when diagnosed rarely treated. CHH will be met by every osteopath every day and this workshop will give participants diagnostic tools and basic advice for patients as to how they may help themselves improve their breathing.



Psycho-emotional aspects of osteopathic practice – helping you establish and maintain a healthy work-life balance

Saturday 10 to Sunday 17 November 2013

Presented by Robert Straw PhD

Cost: £270 (inclusive of lunch and refreshments) - 14hrs CPD

Have you ever felt challenged by the demands of difficult patients, or exhausted after a day of dealing with patients' emotional needs? This course will help practitioners better understand the psychological aspects of osteopathic practice and some of the difficult interactions that can sometimes occur. It will provide some psychological tools that will help practitioners protect themselves emotionally, and aid the management of therapeutic relationships, helping to establish and maintain a healthy work-life balance.



10% off when you book a second course*

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Visit our website for further details

* Book courses on the website through the ESO's 2013-14 Postgraduate Events Programme.

For further information please contact:

Carinne Jones, European School of Osteopathy,

Boxley House, Maidstone, Kent, ME14 3DZ

Tel: +44 (0)1922 871558 or Email: carinnejones@eso.ac.uk

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- Intrinsic Biomechanics for Rehabilitation of the whole body - Martin Haines
- How Kinesiology Taping can enhance your practice - Paul Coler
- Recognising and Treating the stiff shoulder - Adam Meakins
- Understanding Trigger Points - Richard Johnson
- Encouraging a returning and referring culture in your practice - Cella Champion
- 3 Inspirational Approaches to Marketing your Business - Susan Findlay
- Is Forefoot running flawed? - Martin Haines
- Active Isolated Stretching - Stan Mavridis
- An overview of Dry Needling & Treatment options - Craig Smith

- Treatment of Acute Low Back Pain - Cameron Reid
- Grow your Practice with Social Media - Hugh Griffiths
- Fascia, how its 3D matrix creates system wide pain & dysfunction - Ruth Duncan

Workshop Sessions include

- Myofascial Release: Turning Dysfunction into Function, a hands on workshop - Ruth Duncan
- Effective Transverse Soft Tissue Release Techniques - Susan Findlay
- Treatment of General Health Problems for Manual Therapists - Cameron Reid
- Anatomy Trains and Movement Assessment - James Earls
- Unlocking the Psoas - Paula Clayton
- Kinesiology Taping in Sport - Rob Madden

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Balanced Ligamentous Tension

Date: 15th October 2013
Venue: London School of Osteopathy - Cost £95
Course Leader: Carol Meredith DO

This one day workshop led by Carol Meredith is aimed at undergraduates who wish to develop primary skills in this area. The aim of this practical-based day is to improve palpation skills, and help participants to understand palpatory findings.

Balanced Ligamentous Tension (BLT) principles will be introduced to ensure that the fundamentals are understood, before exploring tools and techniques which can be integrated immediately into the treatment of peripheral joints.

As always, senior tutors from our team will maintain a student to tutor ratio of 4:1.

Cranial Osteopathy for Dogs

Date: 2nd - 3rd November
Venue: Merton Mansell College, Warwickshire - Cost £275
Course Leader: Jenny Cudlish DO

This two day, non-residential course is designed to provide a theoretical and practical introduction to the treatment of dogs using Osteopathy in the Cranial Field (OCF).

It is aimed at Registered Osteopaths currently working with and confident in the OCF approach in practice who have completed at least one SCTF-recognised five-day/forty-hour course. The course is being run in collaboration with the Society of Osteopaths in Animal Practice (SOAP).

Delegates with little or no experience of treating animals will be given the opportunity to explore how to apply existing OCF skills to dogs. Those already treating animals to develop their skills working with tutors experienced in both the OCF approach and animal treatment. The course should provide an enjoyable weekend for both human and canine participants, and delegates are welcome to bring their own dogs by advance arrangement.

The Rollin E. Becker Institute is a **Sutherland Cranial Teaching Foundation-approved** organisation providing education, practical skills and development with osteopathy in the cranial field (OCF).

Established by an existing team of highly educated, motivated and experienced teacher-practitioners in OCF, the Rollin E. Becker Institute blends philosophical traditions with developments in knowledge in the cranial concept. We aim to inspire newcomers to OCF, as well as those already practising, by delivering essential and expert knowledge, invigorating the way you work.

The Rollin E. Becker Institute is committed to delivering a high quality programme of courses, masterclasses and seminars relevant to the challenges facing osteopaths in the 21st century.

Eye Examination for Osteopaths

Date: 15th October 2013
Venue: London School of Osteopathy - Cost £150
Course Leader: Mick Woodhead DO

A surprising number of conditions seen by osteopaths can have effects on the eye, yet we can often overlook this in our busy practice lives. This course will combine a review of the anatomy of the eye and orbit with exploration by Lynne Waddell, expert ophthalmic guest lecturer.

The ophthalmic features of common clinical presentations encountered in osteopathic practice will be reviewed, such as multisystem disorders as well as cardiovascular, neurological and metabolic conditions. This will serve as useful revision of a range of non-musculoskeletal conditions, thereby enhancing diagnostic competence.

Eye conditions requiring referral will also be discussed, and there will be ample time allocated to tutored use of ophthalmoscopes.

For participants who have previously completed an SCTF-approved five-day/forty-hour basic course, the course will conclude with a tutored treatment skills workshop on the viscerocranium, led by Mick Woodhead, including refinement of intra-oral techniques and treatment appropriate to eye conditions.

Rollin E Becker Institute
Inspiration in practice

Later in 2013...

Please check website for full details

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04th December 2013 £150

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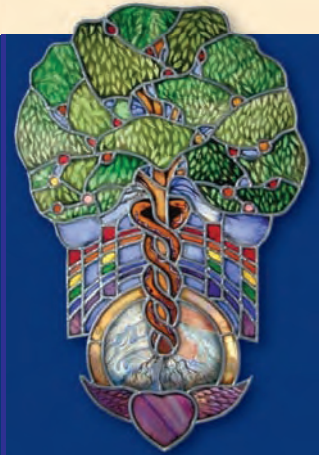
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