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mindfulness**

It could help you
and your patients

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Frontline

THE PHYSIOTHERAPY MAGAZINE FOR CSP MEMBERS

3 February 2016
Volume 22
Issue 3



**Follow
the leader**

Award-winner Claire Madsen

Inside: Jobs • Networks • Courses • In review

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A Paradigm Shift In Conservative Spine Care

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Taking the lead

What does it take to be a leader? This issue of *Frontline* offers some examples of CSP members who have taken on that role – not least our feature on page 24 about award-winner Claire Madsen, who is also pictured on the cover.

Many books have been written on – and careers made by people who develop theories about – leadership. You don't have to be head of your department or service to lead those in your team, though it does, of course, help. You may be a support worker or student who sees an unmet need, garners support for a response, and brings about change from the bottom up.

And if you work outside the NHS, the skills for running a successful business may not necessarily give you the listening skills that are part of a leader's toolkit.

'You may feel it's inappropriate to put your head above the parapet. But plenty of people in healthcare have done just that in the past'

Those of you working in the NHS will know that it adopted a 'command and control' approach to management at its inception. This was adopted from the military. But, as anyone in the forces could tell you, managing and leading are very different skills.

The CSP offers members some of the resources they need to become leaders of the profession through its Physiotherapy Works campaign. Many of you took the chance to take part in seminars, and more resources are planned (see page 20).

You may feel it's inappropriate to put your head above the parapet (and I wonder if that's something women have tended to do less frequently than men). But plenty of people in the healthcare field have done just that in the past. Now it's your turn!

Lynn Eaton

managing editor *Frontline* and head of CSP member communications
eatonl@csp.org.uk



Good news on rotations

I wanted to tell you about the new band 5 physiotherapy role in the cancer therapies team at University College London Hospitals NHS Trust. The position, which started last October, is part of the band 5 rotations. I am currently undertaking this rotation and am keen to inform other therapists about it.

My caseload includes adult, teenage and paediatric oncology patients.

I offer advice and education on exercise through their treatment process, therapeutic exercise sessions, provide independent exercise programmes and assist with running an outpatient groups at the Macmillan Cancer Centre. I believe we are one of the only hospitals in the country to offer an exercise-specific service for this patient group. The position is funded from the inpatient therapies team's budget and came about as a result of growing research findings.

■ Breanna Smith, University College Hospital, London

Learning curve

We read with interest the articles titled Removing the blocks and Prime movers in the 6 January issue of *Frontline* (pages 16 and 22) about advanced practitioners moving into roles in primary care. We have just started a 12-month pilot project working within a GP team in Edinburgh.

Our role involves complex case management, anticipatory care plans and social prescribing. So far it has been a steep learning curve, which has been mostly exciting and sometimes daunting, within a very supportive team. We have been made to feel a valued part of the team and we are all working hard to make this project a success and improve the care

of complex patients in the community.

■ Pamela Anderson and Catriona Walker, advanced physiotherapy practitioners, NHS Lothian

Title aspirations

As the husband of a physiotherapist, and a regular *Frontline* reader, I am contacting you regarding extended scope practitioners (ESPs). My wife has been working in an ESP role for a number of years now. Her skill set and knowledge base (and that of her colleagues) constantly amazes me, but I have become frustrated at the title of ESP.

Discussing her role with friends, family, and patients, there seems to be a constant

You've added...

Several members commented on the news item on the CSP site titled *Physios resuscitate collapsed woman on station platform*. rah09 wrote:

■ Outstanding work!
Difficult to imagine how

we would individually react. We all hope to be as composed and calm as the article implies you both were but in reality it must have been a very stressful situation. Fantastic skills and comprehensive training enabled the auto-pilot to

kick in. Congratulations to you both!

And the article by Liz Cowan on moving from the NHS to private practice triggered responses from a number of members, including Esther Turner:



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join the debate online at
www.csp.org.uk



Alice S/BSIP/Science Photo Library

Top Tweets

Members have been as busy tweeting as ever!

■ **@Yoga_Physio** says well done on covering #mindfulness in frontline magazine looking forward to reading more #yoga #yogaphysio

■ **@swildmanphysio** who's leading the way on ultrasound, tweeted a question asking whether all MSK physios would have access to it in 10 years' time. Thanks to all voters, RT's so far! Fantastic response! Keep those votes coming!

■ **@nhsconfed** tweeted Stephen Dorrell talks to @theHouse_mag on the influencing role of the NHS Confederation bit.ly/1ZN2i1zng **Dis_Sport**

■ **CSP chief exec @KMiddletonCSP** said #NHSwhereIstarted A very earnest Karen Smith (me) on the day I qualified as a Chartered Physiotherapist @thecsp



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need to explain what an ESP is; most people assume that she will be producing some kind of scope which she will be extending and using to assess them!

I believe that this common misconception does not allow the general public to understand the highly specialised role of an ESP, and does not help promote the profession to the level it truly deserves. When the general public are told that they have an appointment with a medical professional with the title of consultant, they immediately understand this language and

associate a level of expertise with it. The title ESP is ambiguous to most people. I would be interested to know if any of your readers/members have similar experiences.

■ **Jason Jarvill**

The CSP responds:

Thanks for your letter. It supports the CSP's position on the need for clarity on the use of terminology and the meaning of advanced practice in physiotherapy.

Since 2008, the CSP has moved away from using the terms 'extended scope of practice' and 'extended scope practitioner' in

order to reduce any confusion. Physiotherapists working at an advanced level undertake a range of roles which draw on their professional skills and knowledge. To reflect this, the CSP now advises that where a role has been developed to reflect advanced level practice the term advanced practice physiotherapist should be adopted. The society is developing a resource, Advanced Practice in Physiotherapy, which will present the CSP's position on this topic.

■ **Ceri Sedgley, CSP professional adviser**
Email sedgleyc@csp.org.uk

■ Thank you for the article from this month's *Frontline* titled *Is the grass really greener?* As a clinician currently juggling an NHS role and a private role it did several things for me. It voiced my similar feelings about the differences, echoing similar experiences of private practice that I've had over the

last year. But most importantly, it concurred with so many of my feelings of newly found enthusiasm for my role and identity as a clinician. I have to admit, I was losing my way ... since merging both NHS and private work I have found a whole new drive and perspective.'

Got something to say?

Write to us or comment on articles from the latest issue of *Frontline* online. Log in at: www.csp.org.uk/frontline and then go to the current issue section. You will also find icons to like on Facebook or tweet articles. Comments posted online may be edited for print.

icsptalk

Interested in recent topical discussion? If so, read our selection below.

iCSP is our peer led knowledge sharing area of the website – view all our popular discussions www.csp.org.uk/popular

Changes to the working day

A large hospital trust is putting increasing pressures on staff to deliver services more efficiently. A proposed solution is to change the pattern of the working day: has anyone else had experienced this?

Comments: 9

Network: Recruitment, retention and return to work

www.csp.org.uk/node/946082

Physios as part of a team

Members are being asked to consider covering ward nurse shortages by being appointed to a nurse post and being trained to deliver nursing tasks alongside their physio role. Has anyone else been asked to do this?

Comments: 13

Network: Profession wide

www.csp.org.uk/node/934152

Best article of all time

A lecturer aims to enthuse undergraduates by soliciting opinions on the most seminal or best physiotherapy article they have read.

Comments: 10

Network: Students

www.csp.org.uk/node/897404

Correction

The introduction to the article titled *Is the grass really greener?* (page 31, 20 January) contained an error. It should have read *Moving into the private sector after years in the NHS has been a real eye-opener for physio Liz Cowan. Her employer's service is based in Bury, not Bolton.*

News in Pictures



We showcase some of the best health-related photos in the news

For the stories behind the images just follow the shortcut codes

1 Burnout is a big problem in the UK these days. According to a YouGov survey, commissioned by Virgin, just over half (51 per cent) of full-time UK employees said they had experienced anxiety or burnout in their current job. Source: Guardian

<http://bit.ly/1PkNtBW>

2 Hip implants that left thousands of British people in pain were manufactured incorrectly at a factory in Yorkshire. Source: Daily Telegraph

<http://bit.ly/1PH7I4e>

3 Laughing out loud can improve cardiovascular health, increase heart rate and help weight loss, according to a report from the Comedy Research Project. Source: Daily Express

<http://bit.ly/1PUiAfr>

4 The higher up people live in a tower block, the less likely they are to survive having a heart attack, according to a new study.

Source: Times
Published 19 January 2016

5 The Foreign Office has warned expectant mothers to seek advice before visiting 22 countries affected with the Zika virus, linked to brain deformities in babies. This includes Brazil, host to the Olympic Games in August. Source: Daily Mail

<http://dailym.ai/20uJ7fo>

6 Scotland is considering whether to add folic acid to flour, as concern mounts that there could be an increase in birth defects. Source: BBC

<http://bbc.in/1ZUWYcz>



Frontline

Got a news story or idea for Frontline?

See www.csp.org.uk/ideasforfrontline for details of how to contribute, email frontline@csp.org.uk with a short summary and your phone number or call the news desk on **020 7306 6665**

Want to send us a photo?

Use our datasend photo service. For details see 'photographs' at: www.csp.org.uk/ideasforfrontline

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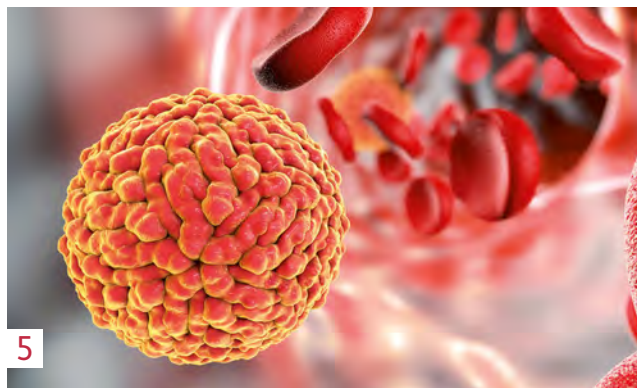
enquiries@csp.org.uk
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Members have access to the CSP's journal, *Physiotherapy*.
www.csp.org.uk/journal

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Kateryna KoryScience Photo Library



NewsDigest

Commissioners lift threat to physio

NHS commissioners in Mid Essex have put on hold proposals to stop or severely restrict access to physiotherapy while they look at alternative cost-saving measures.

The Mid Essex Clinical Commissioning Group (CCG) board on 28 January agreed to postpone cuts to the MSK outpatient service in that area to allow further discussions between the commissioner and local physios to take place.

Rachel Newton, head of policy at the CSP, commented: 'This is a real turnaround. It shows what can be achieved by CSP members organising, getting their voices heard and making the case locally about

'Given the strength of public feeling and support shown by professional bodies, we have decided to delay a decision of changing policy for GP-accessed physiotherapy'

Dr Donald McGeachy

the potentially devastating impact on the community.'

Mid Essex CCG spends approximately £1 million a year on referrals to physiotherapy by GPs.

Under severe financial pressure, it had been considering three options to save some of this money. First, stopping all referrals for physio; second, providing only telephone advice; and, third, offering just one assessment and one follow up.

Its decision to look at alternatives follows extensive lobbying by the CSP.

Steve Tolan, head of practice at the CSP, said: 'This is a sensible decision by the CCG. I really appreciate them taking into account the views of the broad coalition

Physio kept up her exercise regime while rowing across the Pacific



Physio Laura Penhaul, second from right, led the heroic rowers

A British physio managed to find space in a cabin the size of a two-person tent to do muscle-strengthening exercises while rowing across the Pacific.

Laura Penhaul was leading the Coxless Crew, the first all-woman team to complete the 8,446-mile voyage across the Pacific Ocean. Their boat arrived in Cairns on the north east coast of Australia on 24 January after more than nine months at sea.

She and her three fellow rowers set off from San Francisco on the west coast of the US in a 29-foot boat, named Doris, last April.

Ms Penhaul, previously lead physiotherapist with Team GB Paralympic Athletics, revealed she was severely seasick on

the first leg of the trip and had to exercise to avoid long-term muscle atrophy. Speaking exclusively to *Frontline* in Cairns as she recovered from her arduous journey, Ms Penhaul said she carried on exercising despite the cramped conditions.

'You don't actually need that much space to do too much stuff,' she said. 'Hip flexors and quads were the worst thing. You can't really lie out flat or open up your hips very easily, so that was a bit of a problem.'

The Coxless Crew, who are also the only four-person team of any gender composition ever to row across the Pacific, hopes to raise £250,000 for charities Walking with the Wounded and Breast Cancer Care.

■ Lucy Middleton



Something to add?
email *Frontline* at
frontline@csp.org.uk

services in Mid Essex

that was formed against the initial proposals.

'We hope talks between the CCG and the physios providing the service can now proceed constructively and reach a solution that delivers much-needed quality care for

More than **1,200** people responded via an online survey; **130** people attended six meetings aimed at encouraging people to share their views; and around **60** letters were sent from the CSP, other professional bodies and members of the public

patients in Mid-Essex in a cost-effective way.'

Dr Donald McGeachy, medical director of Mid Essex CCG, said: 'Given the strength of public feeling expressed during the consultation and the support shown by professional bodies to working with local providers, we have decided to delay a decision on changing policy for GP-accessed physiotherapy. We want to explore other ways that we can make savings.

'However, we are still in a position where we have to save £15.7m this year, and still need to take some very tough decisions.'

■ *Gill Hitchcock*

Fracture clinic wins prestigious NHS award

A physiotherapy-led 'virtual' clinic that speeds up fracture treatment has won an NHS Innovation Challenge Prize.

The virtual fracture clinic (VFC) at Brighton and Sussex University Hospitals NHS Trust triumphed in the Best Practice Adoption Challenge category of the 2015-16 awards, held in London last month.

Since its launch in 2013 the VFC has treated about 8,700 people and is estimated to have saved the trust more than £600,000.

The service has replaced face-to-face reviews with phone calls from

Virtual fracture clinic physio and extended scope practitioner Lucy Arnott at work



physiotherapists, which are provided from 12 to 72 hours after a person attends A&E.

The clinic's innovation

prize consists of a package of support, including a dedicated mentor to coach and support the project

■ *Robert Millett*

Strategy aims to raise autism awareness

Physiotherapy staff should be trained to identify patients with autism and adjust the treatment or care provided.

That is the message in an updated strategy for adults with autism in England, published by the Department of Health last month.

Think Autism outlines a number of reforms that aim to help people with autism live as full and independent lives as possible.

These include plans to

- provide general autism awareness training to all frontline NHS staff who might come in contact with adults with autism
- enable the Health and Care Professions Council to determine the level of autism awareness training that professionals should receive in education and training programmes

Jenny Tinkler, chair of the Association of Chartered Physiotherapists for People with Learning Disabilities, told *Frontline*: 'We welcome any initiative that raises awareness of learning disabilities and autism.

'Healthcare staff working in mainstream services should have an understanding of autism, be aware of the impact it can have on somebody attending appointments and realise the importance of making reasonable adjustments.'

■ *Robert Millett*

More information
Progress report on Think Autism strategy <http://bit.ly/1PtH57o>

NewsDigest

NICE sets standards for CO

Official standards to ensure people with acute chronic obstructive pulmonary disease (COPD) receive timely rehabilitation could help physios to secure funding for their services, the CSP has said.

The National Institute for Health and Care Excellence (NICE) COPD quality standards, published on 4 February, say programmes of pulmonary rehabilitation should start four weeks after people are discharged from hospital.

They say the programmes must deliver a minimum of twice-weekly supervised exercise sessions over six weeks, 'individually tailored' to optimise each person's physical performance and autonomy.

CSP professional adviser Carley King welcomed the new standards and said: 'We hear of many pulmonary rehab services only being funded on a temporary basis.

'But this quality standard embeds pulmonary rehab services as a core component of care for people with COPD.

'Physios can use it to help make the case for

permanent funding of pulmonary rehab services that meet the NICE requirements.'

The document says that people with stable chronic COPD, who find it difficult to exercise because of breathlessness, should also be referred for pulmonary rehabilitation.

It should be standard practice that, if there is no improvement after an hour of optimal medical therapy, people with an acute exacerbation of COPD and persistent acidotic hypercapnic ventilatory failure have non-invasive ventilation.

Ms King added: 'To see other guidelines relevant to patients with COPD, take a look at Inspire.' This new CSP resource about what NICE guidance means for physios is available online at <http://bit.ly/1SdNFp7>

■ Gill Hitchcock

More information
www.nice.org.uk



CSP urges members to su

 **UNIONS**
...especially
the CSP

Members are urged to join in activities promoting the positive role of trade unions in the week starting 8 February.

Flanking TUC-led lobbying over the trade union bill in the House of Lords, unions will be taking the Heart Union Week campaign out on the streets by reaching out to the public in town centres and employees at workplaces.

The bill further restricts peaceful protest, lifts the ban on employing agency workers during strikes, clamps down on how unions use their

resources and on the 'facility time' reps use to support members, and adds lots more unnecessary red tape.

Melissa Jackson, a CSP workplace steward in London, will be among dozens of workers handing in a mass petition to prime minister David Cameron on 10 February calling for the bill to be dropped.

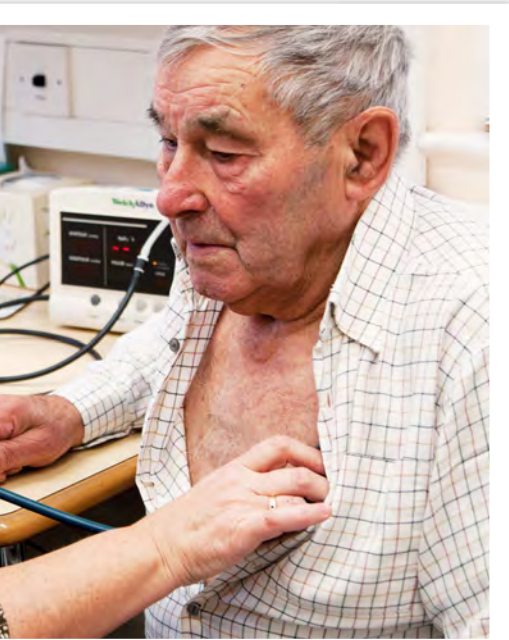
'I'm passionate about my patients and I'm proud to be a trade unionist and a member of the CSP,' she says.

'The trade union bill is an



Something to add?
email *Frontline* at
frontline@csp.org.uk

PD rehab TB guidelines overlook role of physiotherapists



Life in View/Science Photo Library

Physiotherapy is virtually ignored in the latest guidelines on managing tuberculosis (TB) in England, said Helen Ricketts, principal respiratory physiotherapist at St George's Hospital, London.

Commenting on the update from the National Institute for Health and Care Excellence (NICE), she told *Frontline*: 'It's disappointing that once again the role of physiotherapy in this multi-system disease has been overlooked in national guidance.'

The NICE guidelines, published on 13 January, say that the management of TB depends on close working between hospital, community and voluntary organisations.

They recommend that multidisciplinary TB teams 'identify and support an ongoing TB education programme for local

professionals who are in contact with the general public, and at-risk groups in particular'.

NICE says these programmes would apply to staff in emergency departments, GPs and wider primary care teams – including physiotherapists.

But the guidelines do not include details about the role played by physiotherapists in treating people with TB and helping them to recover.

■ *Robert Millett*

More information

On the role of physiotherapy in treating TB, see www.csp.org.uk/node/949044
NICE guidelines on tuberculosis (NG33) www.nice.org.uk/guidance/NG33

Support Heart Unions Week

unnecessary, undemocratic and potentially unsafe piece of legislation.

'Trade unions like the CSP work in partnership with employers to help ensure a highly skilled and motivated workforce delivering quality NHS services that patients need.

'Unions should be supported in this crucial role. I hope the prime minister will listen.'

Paul Win, a recently-elected CSP steward in Merseyside, adds: 'A workforce fit for the challenges facing the NHS

needs a strong voice at work.

'That's what union reps like me do. I want to see government backing us in this.'

John Nixon, a new CSP steward in Lanarkshire, comments: 'In the NHS unions have a proud record of good partnership working.

'The government should show it recognises the positive role of unions by dropping the trade union bill.'

■ *Tom Gill*

3 things you can do:

Sign the petition against the trade union bill

Download the CSP Heart Unions poster and tweet a selfie using the hashtag #heartunions

Check with your steward if there are any activities you can join in your workplace or local area

To take any of these actions, go to: www.csp.org.uk/heartunions

NewsDigest

HCPC highlights patient safety

Physios have a duty to put patient safety before professional or other loyalties



Mark Thomas/Science Photo Library

Physios have a new professional duty to report concerns about patient safety and be open and honest if something goes wrong with the treatment they provide.

Revised standards of conduct, performance and ethics were published by the Health and Care Professions Council (HCPC) last month, following a consultation.

It is now a formal requirement for physios to put the safety and wellbeing of their patients before any professional or other loyalties.

The regulator expects its registrants in 16 health and social care professions to report their concerns about the safety of service users, and to encourage others to do the same.

The new HCPC standards are being introduced in response to recommendations in the Francis report on Mid-Staffordshire.

It says that physios must tell service users or carers if something goes wrong with care or treatment.

This duty of openness is backed up by requirements to apologise, put matters right and provide a full and prompt explanation.

If patients or their families want to raise concerns about the care they receive, physios are now duty bound to help them.

HCPC chair Elaine Buckley said: 'If you are in a position of authority there is a responsibility to engender a culture to allow that to happen.'

■ Gill Hitchcock and Lucy Middleton

More information

To view the standards visit:
<http://bit.ly/1KczSMA>

Physios gain £500,000 to expand services in Cornwall

Physiotherapists in Cornwall have secured funding of more than £500,000 to expand therapy services at their trust.

Physio and occupational therapy (OT) staff at Royal Cornwall Hospitals NHS Trust made a bid for the investment after completing three successful pilot schemes and presenting the results to the trust board.

Therapy services at the trust will be enhanced by

- including a dedicated musculoskeletal (MSK) physiotherapist in the trust's emergency department team
- investing £105,000 in the elective orthopaedic pathway, to provide extended day working and enhance the weekend service for physiotherapy and OT
- an extra £120,000 to support enhanced physiotherapy and OT seven-day services, specifically focused on early discharge
- £256,000 funding to set up an early support discharge service that focuses on the elective and trauma orthopaedic pathway, and provides care for frail orthopaedic patients at hospital or home

Clare Rotman, a respiratory physio and inpatient therapy manager at the trust, told *Frontline*: 'This is a huge achievement for our team in what is a very challenging financial climate.'

'We are now in the process of recruiting staff for the early supported discharge service, including two band 6 physios.'

The new early supported discharge service physios, plus the emergency department's MSK physio, will be based at the Royal Cornwall Hospital in Triliske, while new therapy staff recruited to the elective orthopaedic pathway will be at St Michael's Hospital, Hayle.

■ Robert Millett



Something to add?
email *Frontline* at
frontline@csp.org.uk

Dementia exercise class makes BBC news

A physiotherapist-led exercise class for patients with dementia at Kingston Hospital NHS Trust was featured on the BBC news last month.

Olivia Frimpong, the trust's service improvement lead for dementia, said the broadcaster filmed the class on the day the Alzheimer's Society launched its Fix Dementia Care campaign.

The campaign follows the charity's finding that there is an 'unacceptable national variation' in the quality of hospital care across England.

Ms Frimpong said that because life expectancy in the south west London borough of Kingston was high, nearly half the hospital's beds were occupied by people with dementia and the condition is a key priority for the trust.

'So we have a dementia strategy and are unique in providing a comprehensive range of activities,' she said.

'We run a timetable, including lunch clubs, memory cafés and an exercise class led by a physio twice each week.'

The trust's three physios and two support staff who work in its care of the elderly team take it in



Kingston NHS Trust physiotherapist Rachel Gifford leads dementia-friendly exercise sessions

turn to lead the classes. Meanwhile, the activities team sets the classes up and helps patients to and from the sessions.

The Alzheimer's Society report shows what the organisation's chief executive Jeremy Hughes described as a 'Russian roulette' of care, because many are missing out.

■ *Gill Hitchcock*

More information
To download the report, visit
<http://bit.ly/1PeRSYV>



Patient Joan Smith receives early mobilisation rehab from physio student Natasha Spicer (left) and specialist physio Andy Burns at the Royal Cornwall Hospital

Mental health poster makes award-winning physio proud

Prerna Gogia, a senior physiotherapist at North East Essex University NHS Trust, described winning an award for her poster about physiotherapy and mental health as 'a proud moment'. She said her poster was judged to communicate how physiotherapy could aid recovery from mental illness in a way that was easy to understand. The poster competition was part of a mental health event organised by St Andrew's Healthcare in late 2015.

NewsDigest

Physio fights for NICE to include standard on exercise for MS



Wendy Hendrie, who fought for MS patients

A physiotherapist ensured that guidance about physical activity was included in new National Institute for Health and Care Excellence (NICE) quality standards for multiple sclerosis (MS).

Wendy Hendrie, an MS specialist physio for Norfolk Community Health and Care NHS Trust, was part of the guideline development group for the quality standards, published on 14 January.

She told *Frontline*: 'I fought for a standard on physical activity because it is probably one of the

most important and cost effective things that people with MS can do.

'People with long-term neurological conditions such as MS need support to remain active in order to maximise their function. Physiotherapists are ideally placed to help them achieve this,' she added

The NICE guidance contains six quality standard statements, and Dr Hendrie said three were of particular importance to physios.

These statements advise that adults with MS should

- be offered support to remain physically active if they have

- mobility or fatigue problems
- have a single point of contact who coordinates access to care from a multidisciplinary team with expertise in MS
- be offered a comprehensive review at least once a year by healthcare professionals with expertise in MS

■ Robert Millett

More information
Multiple sclerosis NICE quality standard [QS108]: www.nice.org.uk/guidance/qs108

Heart charity warns that most toddlers need to have more exercise

Physiotherapists should start a dialogue with their local nursery schools about how they can help young children to be more physically active.

That is the advice from CSP professional adviser Stuart Palma, whose comments follow the publication of a British Heart Foundation (BHF) document.

This says that a mere nine per cent of children aged from two to four years meet the chief medical officer for England's recommendations on physical activity.

The BHF manifesto for early years physical activity, *The Best Start in Life* is intended as a call to policymakers to ensure that schools and other early years settings are designed to stimulate physical activity.

Mr Palma said evidence pointed to how exercise can increase brain development, attainment, social and emotional wellbeing and reduce obesity. It was time for physio staff to act on this, he noted.

'Equipped with the appropriate skills and expertise, we can have a big impact on the physical activity levels of this "generation inactive".'

'There is a real opportunity to make a difference.'

■ Gill Hitchcock

More information
The Best Start in Life:
www.bhfactive.org.uk/beststart



Physio can make a difference to 'generation inactive'

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NewsFocus

Everyone can play their part in influencing the design of NHS services in their area, prominent physiotherapists tell **Daniel Allen**

At the ready: how can you influence service design in your area?

Leading edge



UK health care is battling challenges that just keep coming: hospital-centric services that don't join up; rising demand; an ageing population; a focus on illness above prevention.

The Five Year Forward View, a vision for the future published in 2014, was NHS England's attempt to steer a way through the tangle. Then in December came planning guidance laying out national priorities and goals for local services <http://bit.ly/1S6GcWV>. This calls on those services to create their own 'ambitious blueprints' for implementing the Forward View. Success, it says, will depend on 'open, engaging and iterative' processes that harness the energies of clinicians, patients, carers and community partners.

But what does that actually mean for physiotherapy staff? How can they engage with service transformation – and what are the risks if they don't?

CSP head of practice Steve Tolan says if clinicians spurn opportunities to shape the changes going on around them the consequences for the profession could be far-reaching. 'Where physiotherapists don't take part, the best decisions about how physiotherapy can be designed and delivered will be made by others,' he says. 'But they may need to put themselves in a position where they can inform change and not necessarily wait to be asked.'

And the best way to do that, he suggests, is to start asking questions (see box).

All round the UK, the buzzword is transformation. Integrated models of care are emerging and in some areas are well advanced. In Wales, for example, Together for Health, which put forward plans

for an integrated 24/7 system, was published in 2011. In Northern Ireland, Transforming Your Care made 99 proposals for change across health and social care. And in England 50 vanguards, born out of the Forward View, are now out of the blocks.

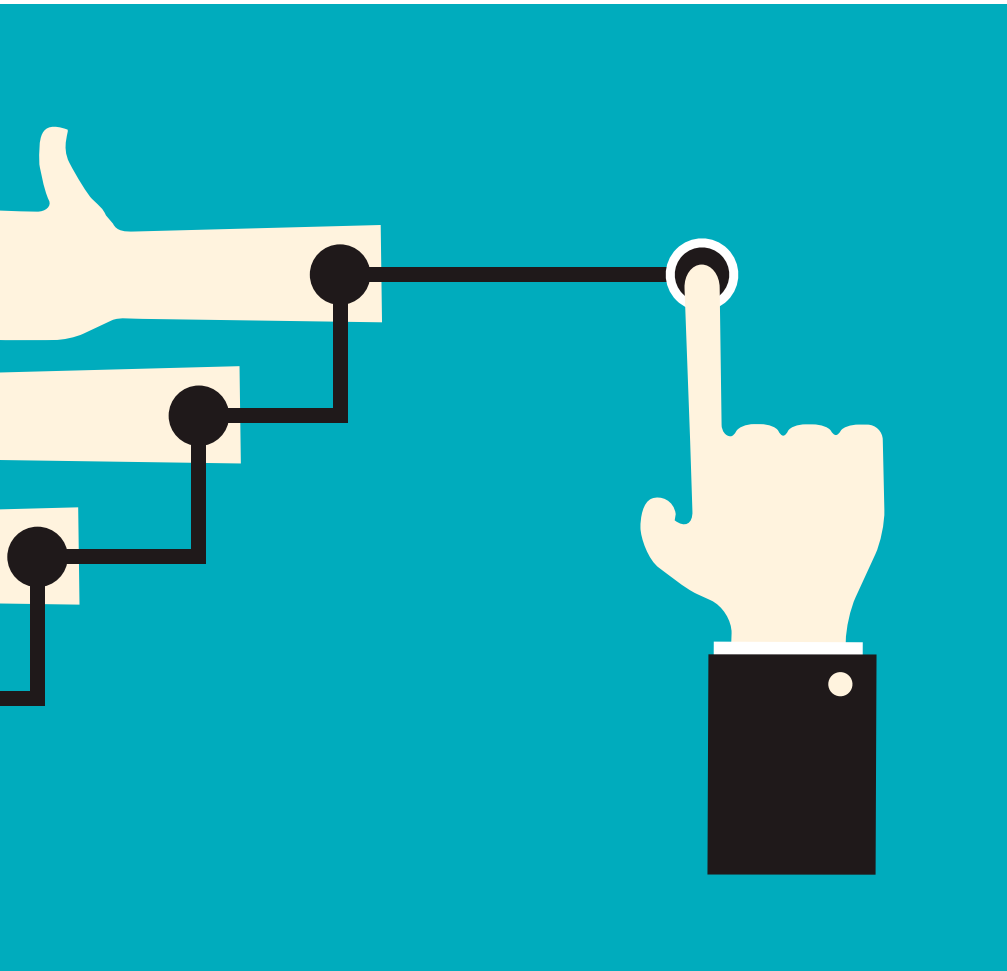
Their aim is to bring together local partners to develop co-ordinated service models.

Physios are actively involved in some, less so in others, but crucially the profession is well represented in NHS England's new models of care team.

'Genius' ideas

Physiotherapist Beverley Harden is associate director of education and quality at Health Education England and, since December, a clinical associate in the care models team. 'Our role is to work alongside clinicians to support

In England
50
vanguards, born out of
the Forward View,
are now up
and running



Leading the way

CSP head of practice Steve Tolan says understanding the way your service works is key to engaging with and influencing change. He says

- talk to your manager about how you can be involved
- consider the context and structure of your service
- find time to learn about key policy drivers
- suggest ideas appropriate to the proposed models of care
- consider who you need to influence. 'Depending on your profile and fit within the service, that can either be you influencing directly, or it could be you feeding into your manager, your team or your team lead,' Mr Tolan adds.

them to deliver the transformation necessary to ensure services keep pace with demand,' Ms Harden says.

It's early days but she already has a sense of what lies ahead. 'A huge part of our work will be helping the whole system move forward as one rather than a chosen few moving faster than the rest.'

Much of the role will be coaching people to overcome barriers to better care, she says. Building networks will also be key. 'A lot of this is getting good practice rolled out.' She does, however, sound a note of caution. 'We're a vocal group normally but the allied health profession (AHP) voice is very quiet. I would like to hear more around what we can offer.'

Helen Baxter, another clinical associate in the new models of care team and a physiotherapist by background, agrees that physio staff must get involved. A measure of success in the drive to develop more effective ways of delivering services will be

physiotherapists becoming key partners in all the vanguards. 'We have so much to offer,' she says.

But is 'getting involved' a role reserved for managers? Not at all, Ms Baxter says. 'It applies wherever you are in the hierarchy.' Ms Harden agrees. 'Everyone, from the therapy assistant upwards, sees life through a different lens. Anybody could have the genius idea that unlocks a care model and turns it into something that really delivers.'

Fighting corners

CSP vice-president Sue Rees, deputy head of physiotherapy services with Cardiff and Vale University Health Board, says routes and channels are in place in Wales for frontline staff to play a part in service transformation. 'It's part of their job to contribute on a national level but sometimes that gets scuppered by having to meet operational targets or challenges. The potential is there, but it remains potential if you don't deliver.'

Sharing good practice is one way in which frontline staff can take a lead. 'That's something in Wales we really have to do,' Ms Rees says. 'The pressures are tough but we still need to share what we do and make sure everybody hears about it.'

Similarly in Scotland, which is driving towards integrated care, the means are there to engage with service change and lead the way by sharing good practice, says Ann Ross, chief AHP at NHS Greater Glasgow and Clyde and chair of the CSP's Leaders and Managers of Physiotherapy Services (LaMPS) CSP professional network.

'But we need to tell staff who are trying to make changes that they have to develop resilience and be prepared to get knocked back but not give up.'

She adds: 'It's not just managers who need to be fighting corners, it's every one of us. You may be the one best placed to lead because you can see things that can be changed without a lot of investment.' **FL**

Constrained finger exercise is safe

Exercises with the knuckle joint constrained are as safe and effective as traditional unconstrained exercises after surgery to mend a broken finger, say researchers.

Lauren Miller, head of the hand therapy unit at Sydney Hospital, and colleagues studied 66 adults who had recently had surgery to mend a proximal phalangeal fracture.

'Constrained exercises have previously been viewed as placing more stress across healing fractures than

More than
90%
had returned to work by the end of the six-week trial

unconstrained exercises,' say the authors. For that reason, they are not usually used in the early stages of healing, although they may be tried later to reduce stiffness if it develops.

Participants in the Australian trial were divided into two groups, doing either constrained or unconstrained exercises for six weeks as part of a full rehabilitation programme.

Researchers tested them on a range of measures including pain and range of movement, when they began

the treatment a few days after surgery. They were tested a second time after the six-week treatment and again six weeks later.

The team found no difference in outcomes between the two groups, whose average age was in the thirties. More than 90 per cent had returned to work by the end of the six-week trial.

'The lack of adverse events suggests that it is safe to introduce constrained exercises within the first week after surgery,' say the authors. Miller L *et al.* No difference between two types of exercise after proximal phalangeal fracture fixation: a randomised trial, *Journal of Physiotherapy* 2016; 62: 12-19, <http://dx.doi.org/10.1016/j.jphys.2015.11.006> - open access.

Exercise take-up blurs long-term results of ME trial

People with myalgic encephalomyelitis (or chronic fatigue syndrome, ME/CFS) whose condition improved after taking part in a trial of four different treatments were still doing well more than 18 months

However, those who had received the less effective treatments during the trial seemed to have caught up by the time of the follow-up study. But, researchers note, many of them had started taking the more successful treatments after the trial ended.

Participants in the PACE trial were randomly allocated into one of four groups, all of which received specialist medical care (SMC). One group had no treatment other than SMC. One group also had adaptive pacing therapy (APT), which aims to keep activity within the patient's current energy levels.

The other two groups used therapies that tackled fear of exercise: either cognitive behaviour therapy (CBT) or graded exercise therapy (GET).

The GET and CBT groups had the best results a year after the trial started, the researchers reported in 2011 (see *Frontline* 2 March 2011; www.csp.org.uk/node/276303).

But 18 months later all four groups showed similar improvements in fatigue and physical function.

'These data should be interpreted in the context of additional therapies having been given according to physician choice and patient preference after the one-year trial final assessment,' say the authors.

After the trial, more than half the participants in the two less successful groups asked for additional treatments, mainly CBT or GET.

'Future research should identify predictors of response to CBT and GET and also develop better treatments for those who respond to neither,' the researchers say.

Sharpe M *et al.* Rehabilitative treatments for chronic fatigue syndrome: long-term follow up from the PACE trial, *Lancet Psychiatry* 2015; 2: 1067-1074, [http://dx.doi.org/10.1016/S2215-0366\(15\)00317-X](http://dx.doi.org/10.1016/S2215-0366(15)00317-X)





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fe soon after surgery



Weight loss may offer hope in incontinence

Researchers are calling for better conducted studies into treatments for urinary incontinence. Two recent reviews from Cochrane – the worldwide independent research network – concluded that they could not find enough high-quality evidence to make recommendations for best practice.

One review covered lifestyle changes, which are often recommended to people with urinary incontinence. Evidence is building in favour of weight loss, so investigators recommend further research into that area. Beyond that, they found too little solid evidence to judge whether any changes are helpful.

‘At present there is not enough evidence to establish whether any lifestyle treatments work,’ say the researchers. ‘Much more well-designed research is needed, so that lifestyle recommendations for the treatment of incontinence can be based on good evidence.’

Another Cochrane team looked into studies adding pelvic-floor muscle training to another

treatment. But a review of 13 studies covering more than 1,000 women failed to find enough evidence one way or the other.

‘None of the trials included in this systematic review were large enough to answer the questions they were designed to answer,’ say the researchers.

‘The main limitations of the evidence were poor reporting of study methods, and lack of precision in the findings for the outcome measures.’

Imamura M *et al.* Lifestyle interventions for the treatment of urinary incontinence in adults, *Cochrane Database of Systematic Reviews* 2015; <http://dx.doi.org/10.1002/14651858.CD003505>. pub5 - open access

Ayeleke RO *et al.* Pelvic floor muscle training added to another active treatment versus the same active treatment alone for urinary incontinence in women, *Cochrane Database of Systematic Reviews* 2015; <http://dx.doi.org/10.1002/14651858.CD010551>. pub3 - open access

Parkinson's care takes time

A short course of physiotherapy isn't effective for people with mild to moderate Parkinson's, researchers at Birmingham University have found.

The team divided 762 patients into two groups. One received both physiotherapy and occupational therapy (OT). The other group had no treatment. Outcomes were measured three times over the next 15 months.

Participants had, on average, a total of four hours' physio and OT combined, over an eight-week period. Physios prescribed them a range of exercise programmes tailored to their mobility and activity levels.

After 15 months' follow up, the researchers found participants had made no meaningful improvements.

‘This evidence does not support the use of low-dose, patient-centered, goal-directed physiotherapy and occupational therapy in patients in the early stages [of Parkinson's],’ the authors conclude.

They call for more structured and intensive therapy programmes to be developed and tested for patients at all stages of the disease. At present people usually start having physiotherapy at a later stage, often after falling.

‘The study highlights how low-intensity physiotherapy – on average, just four sessions – may have a limited impact in isolation,’ says CSP professional adviser Carley King.

‘This emphasises the importance of ensuring people with Parkinson's disease have access to physiotherapy when required, and at an intensity that is shown to have an effect.’

Clarke CE *et al.* Physiotherapy and Occupational Therapy vs No Therapy in Mild to Moderate Parkinson Disease: A Randomized Clinical Trial, *JAMA Neurology* 2016; <http://dx.doi.org/10.1001/jamaneurol.2015.4452>

Views & Opinions

Everyone's a leader



The CSP has a role in both modelling and developing leadership in the fields of physiotherapy practice, research and education. We want the profession to be recognised as having a critical part to play in

delivering and transforming health and care. The society's physiotherapy Works programme aims to support, enable and empower members to achieve this vision. In particular, we want to strengthen members' ability to influence and take up the challenges and opportunities offered by the changing healthcare environment.

Ultimately, the CSP aims to improve the profile and secure the future of our profession. This involves strengthening leadership skills, recognising the value and impact of the profession, and creating opportunities for members to play their part.

The Physiotherapy Works programme is developing a number of leadership projects. We started last year with a series of workshops for members and

a survey of their experiences of and views on leadership. We also commissioned a report on leadership for physiotherapists, which is due to be published next month. The information gathered from the workshops, research and survey will help us shape the leadership resources that we develop for members in the coming months.

Proposals for future work on leadership projects include

- business skills development: a pilot and potential roll-out of the use of the business skills stimulation game to develop business skills
- securing new opportunities: enabling members to identify and secure opportunities that expose them to alternative, or new environments across the health and care sector
- leadership skills development:

Patchy picture on cancer car

Thoracic surgeon Richard Steyn calls for better services for people with lung cancer, with physios playing

The UK Lung Cancer Coalition (UKLCC) recently published a milestone report tracking the progress in lung cancer services and outcomes over the last decade. Titled Ten Years on in Lung Cancer: The changing landscape of the UK's biggest cancer killer, the document reveals that, due to the efforts of governments, policymakers and our own membership lung cancer outcomes have, in general, improved across the four UK

nations. In England, for example, five-year survival rates have almost doubled (from nine per cent in 2004 to 16 per cent predicted in 2013). This is strongly associated with an increase in the number of surgical resections for lung cancer, from an average of 3,220 up to the year 2005 and rising to 6,713 in 2013.

However, despite these improvements, our report highlights that lung cancer still remains the UK's biggest cancer killer. It

accounts for more than one in five (22 per cent) of all UK cancer cases in men and women and there were more than 44,500 cases recorded in the UK in 2012. In addition, significant variations in lung cancer care still exist. In England and Wales, for example, the percentage of patients seen by a nurse specialist varies from 36 to 100 per cent. In Scotland, anecdotal evidence suggests there is variation in access to radiotherapy services

across the nation, and access to new medicines in Northern Ireland is often perceived to be poor among specialists in the field.

Although not specifically mentioned in the report, during the last 10 years UK health services have increasingly recognised the role that physiotherapy can play within enhanced recovery programmes – particularly in supporting patients undergoing lung resections pre-operatively,



Something to add?
email *Frontline* at
frontline@csp.org.uk

There's a leadership theme in this edition of *Frontline* and it's a key topic for the CSP's Physiotherapy Works programme in the coming year, writes Kirsten Bradbury

enabling members to have new, or better access to learning environments for leadership skills development

- mentoring: set up and run mentor schemes for members to give support for personal development with an opportunity to seek advice
- value and recognition for members: develop a means of providing members with a sense of value and recognition for their participation and leadership efforts

We also plan to launch two resources

- resources in leadership: updating CSP leadership resources and bringing them together through a new area of the website. This will be in conjunction with work exploring external resources, to which members will be signposted
- case studies database: we will find

and promote great case studies through an online database. This will have an online submission and search facility so members can find out what is happening in their region or speciality

We believe these initiatives will help physiotherapists to move into leadership positions or use their leadership skills to influence services or organisations, ensuring members and patients benefit from their contribution to care.

We'd love to hear from members interested in leadership.

Contact physioworks@csp.org.uk or visit www.csp.org.uk/physiotherapyworks

Kirsten Bradbury is assistant director of the CSP's Physiotherapy Works programme



Richard Steyn is chair of the UKLCC and a consultant thoracic surgeon and associate medical director, surgery, Heart of England NHS Trust



Adviceline

Léonie Dawson warns that being a professional is a 24/7 activity

Working with members can bring up unexpected issues. While covering the CSP professional advice service recently, I received a couple of queries from CSP members who wanted to ask perfectly standard questions to do with professional practice.

They presented themselves in email and phone as responsible professionals keen to retain their grasp of current evidence and best practice. But their email addresses were along the lines of knowitall@ or foxyfilly@. It made me wonder if either had put much thought into the first impression they might have given, as their emails land in inboxes.

Email addresses are potentially more powerful than many realise, especially if created when still a youthful, fun-loving student. What appears carefree when sending messages to buddies may be viewed in a completely different light by a potential employer, patient or, horrors, the Health and Care Professions Council (HCPC). A barrister will use anything to hand to knock a person's credibility and confidence in court, and a flighty or arrogant email address is fair game to use as a weapon.

Even more public are tweets and other media communications, where people can sign up to follow you. They might not wish to be seen following a dodgy-sounding account, regardless of the content.

A job application, for example, could be severely sabotaged if an email address projects an image that conflicts with the skilled professional approach we wish to present to the public and a potential employer.

So before you send out your next message, consider clicking on 'properties' and reminding yourself what first impression you might be giving.

The HCPC regulations state that we should convey ourselves in a professional manner throughout the day, and you could be doing yourself a great favour by checking that your monikers live up to this.

Léonie Dawson is a CSP professional adviser

More information

Visit www.csp.org.uk/node/823032

e

their part

intra-operatively and post-operatively. Schemes such as early mobility programmes, which encourage patients to take a proactive approach to their own recovery and thus improve outcomes, are becoming increasingly prevalent.

The UKLCC would like to see many more of these initiatives.

We are committed to a multidisciplinary approach to delivering the best possible lung cancer services www.uklcc.org.uk



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Leadership

Bristolian Claire Madsen is happy to have returned to work in her home city



Breaking mould

CSP award winner Claire Madsen's career took some unusual moves before she became a deputy clinical director, as Graham Clews discovered

Claire Madsen has practised physiotherapy in continental Europe, educated the public about HIV and Aids when the diseases dominated headlines, and helped establish successful health services across Bristol. The diverse nature of her career proved to be the perfect preparation for her current role as deputy clinical director of Bristol Community Health Trust.

And her rise to the rare position of being a deputy clinical director with neither a medical nor a nursing background, helped land her the CSP's 2015 demonstrating leadership award. Ms Madsen's route to her current post began when her trust's medical director, Dr Mark Kingston (now retired), decided he wanted non-medical deputies.

Most of the community trust's clinicians are therapists and nurses, not doctors, so the decision seemed logical. 'Mark appointed me as his allied health professional (AHP) lead and then I was appointed as the deputy to the clinical director (who has a nursing background) when Mark left and the structure was changed.'

Ms Madsen's physiotherapy career began after she qualified from what was then Sheffield Polytechnic in 1988, before returning to her home city of Bristol to complete her junior rotations in the NHS.

After specialising in neurological physiotherapy and securing a senior post at Frenchay Hospital in Bristol, Ms Madsen moved to Luxembourg in 1992 due to her

Leadership

husband's job. From there they moved to Belgium, where complications in accrediting qualifications led to her broaden her professional horizons.

Branching out

Ms Madsen's first job in Belgium was working as an education officer for an HIV/Aids charity, just at the time when all aspects of the disease, were hitting the headlines.

Quite apart from working outside physiotherapy for the first time, the experience gained from operating in such a high-profile area was, she says, priceless. After moving back to UK, Ms Madsen worked for a year at a private hospital in Bristol – once again gaining experience of a different sector – before moving into

the community, starting as specialist neuro physio and then being appointed superintendent of her community physio service.

It was in this job that Ms Madsen was given further opportunities to branch out, via two secondments. The first was to establish the Bristol pulmonary rehabilitation service, which has just celebrated its tenth anniversary. It began with 2.2 staff and is now treating more than 600 patients a year and running all oxygen services in Bristol. The second was to set up a musculoskeletal assessment and triage service (MATS) and spinal service for Bristol.

'I learnt from there how important as a physio it is to branch out from physiotherapy and get the opportunity to manage a multidisciplinary team,'



'I learnt how important as a physio it is to branch out from physiotherapy and get the opportunity to manage a multidisciplinary team'
Claire Madsen



Something to add?
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she says. 'These included nurses and therapists in the respiratory team. In the MSK team it was physios, podiatrists and doctors. As physios I think we are really bad at seeing our transferrable skills. Physios are very, very good at respiratory care, but traditionally, respiratory services are staffed by respiratory nurses and I think it is about challenging traditions.'

Breaking boundaries

Ms Madsen sits on the consultants group at CSP, which aims to tackle barriers to healthcare roles and encourage members to move into leadership positions. 'The other thing, which I have done over the years with my staff, is about challenging job descriptions,' she says. 'You should ask why a nurse is doing a particular job. Things like a community matron post: why should they be nurses' posts, because therapists often have the skills to do that job?'

'As physios our character is such that we feel we have to be really, really good at something before we can do it and sometimes you have to put yourself in a position when you probably don't know that much about something, but you are leading it. So it is about thinking that you've got the leadership skills and you've got the knowledge, so you just need to learn a bit more about nursing or the other professions you are managing. It is very normal for a director of nursing to manage therapists, but it is not normal for a therapist to be a director of nursing.'

Once in her deputy clinical director post, Ms Madsen's biggest challenge was convincing her non-therapist colleagues of her ability to do the job. 'I had to be accepted and recognised by nurses because they make up the majority of the workforce in our trust,' she says. 'Our clinical director, Aileen Fraser, is a nurse and she is very supportive. We decided not to work along profession lines, so I don't manage only AHPs and Aileen doesn't manage just nurses. The split is that I manage acute care and she manages long-term condition care so we are not differentiated by profession.'

Now, she has been completely accepted in her role. Ms Madsen's chief executive was her 'hardest win', she admits, but she was one of the nominees for her CSP award.

'I go to commissioning meetings now and I don't think they remember that I am a physiotherapist any more,' Ms Madsen says. 'It's just not an issue any more, it is about proving you can do the job when you get in there and then people forget what your profession is.'

Ms Madsen is Care Quality Commission (CQC) named person or 'nominated individual' for the trust and also works as a CQC inspector. She also sits on

the board of the West of England Academic Health Science Network, enabling her to involve her trust in all innovations led by the network.

Growing confidence

Leadership skills are generic and transferrable, and physios need to have greater belief in their skills. Physiotherapists are well trained and qualified, and physiotherapy as a profession is becoming more confident, Ms Madsen believes. Then it is just a question of putting those abilities to greater use.

For Ms Madsen now, her goal is to become as a clinical director and look at what professional development she needs to make that step up. A chief executive post is not currently in her sights, partly because she still works as a clinician part-time and she would be reluctant to relinquish that. 'At the moment I have a very bizarre portfolio. I line manage patient and public involvement service, complaints, the legal team, the risk manager,' she says. 'It is all really connected to patient care, so it keeps me very close to frontline patient care and I think I would really miss that.'

'I have had traditional operational management roles in the past and I have felt distanced from the patients when I have done that, which is probably one of the reasons why I have come back to this role, because what I really care about is patient care and the quality that we offer and this role allows me to do that.' **FL**

Top tips for aspiring leaders

Ms Madsen's advice for other physiotherapists considering a move into management is to look outside traditional roles.

'There are lots of opportunities but they are not always necessarily in pure physiotherapy roles,' she says.

'The more experience of managing multidisciplinary teams you have, the better, because then you have a much broader understanding of healthcare, so any opportunities that you can take to do that are really important.'

'Challenge traditional roles, and ask: "Could I do that role, and if that is something I want to do then why shouldn't I do it?"'

And Ms Madsen adds: 'Throughout my career I have been lucky to work with people who have inspired me and managers who have encouraged and supported me to take chances and opportunities.'

Clinical Update

Mindfu

Mindfulness is becoming an increasingly popular way to promote resilience and wellbeing in both patients and staff in the NHS. Physiotherapist **Karen Glass**, who helps run mindfulness programmes for NHS staff, investigates the topic

What is 'mindfulness'?

Mindfulness is a way of 'being'. It is a basic human quality of awareness. It can be described as

- paying attention (learning to focus on what you choose)
- in the present moment (rather than the past or future)
- non-reactively (learning to 'respond' rather than 'react')
- non-judgementally (learning to see things as they are)
- open heartedly (bringing qualities of warmth, compassion curiosity and acceptance to your experience).

How might it work?

Mindfulness practices are a form of brain training. Regular practice is linked to changes in areas of the brain responsible for mood regulation and reactions which in turn link to bodily functions like breathing, heart rate and immunity (Campbell collaboration 2012:3).

What is the evidence for stress reduction in healthy individuals?


Most of the published research relates to mindfulness as it is taught in eight sessions held over two months – either in the form of mindfulness-based stress reduction (MBSR) or mindfulness-based cognitive therapy (MBCT).

MBSR is of particular interest in relation to supporting staff resilience and stress management. In a Campbell Systematic Review, de Vibe *et al* evaluated the effect of MBSR on health, quality of life and social functioning in adults.

They concluded: 'There is moderate to high quality evidence for a consistent and moderately large effect of MBSR ... While MBSR clearly alleviated symptoms of stress and distress, it also had effects on measures of personal development and quality of life.' The authors support the use of MBSR for stress management.

How is mindfulness used in the NHS?

MBCT is delivered as a psychological intervention in



Learning to live in the present moment is a key tenet of mindfulness

Our feature gives an accessible overview of a clinical issue of interest to all physio staff

Inness

many mental health services but is not universally available, despite being recommended by NICE. MBSR type-courses and MBCT are available in some sites for staff wellbeing, but, again, provision is patchy.

As well as the recognised eight-week programmes, mindfulness-based approaches have been incorporated into many patient treatment programmes both within mental and physical health arenas.

Why is mindfulness relevant to physiotherapy?

Physiotherapists, like many NHS employees, experience high levels of stress at work. This approach can help us to manage stress and its impact on our wellbeing and clinical effectiveness.

For our patients, mindfulness approaches are asset-based with a focus on self-awareness, working with what is there, managing thoughts, emotions and physical sensations, and making wise choices about how best to take care of yourself. They actively support increased self-efficacy.

In MBSR there is a strong emphasis on movement in the form of yoga-type stretches and walking as forms of meditation practice.

As movement experts, we have a unique understanding of the body and 'embodiment' and how this can be a gateway to improvements in physical and mental functioning.

How do I find a local class or get started by myself?

Selected workbooks, online eight-week courses and a range of resources are listed above in the reference section. As yet, there is no accreditation process but good practice guidance for teachers has been agreed and Bangor and Oxford universities are leading the way in establishing a rigorous competency framework (MBI-TAC: <http://bit.ly/1WtMDnL>)

A list of teachers and training organisations is available at www.mindfulnessteachersuk.org.uk

With the support of her manager Janice Miller and funding from NHS Education for Scotland (NES), the author (Karen Glass) and physiotherapy colleagues Stephanie Wilson and Aileen O'Gorman are leading staff wellbeing developments, including mindfulness.

For more information, see the 'Fresh start' letter in *Frontline*, page 4, 20 January www.csp.org.uk/node/953548 or email karen.glass@ggc.scot.nhs.uk FL

Key reference documents

- The Mindfulness All Party Parliamentary Group's Mindful Nation UK report at <http://bit.ly/1U95Fy7>
- National Institute for Health and Clinical Excellence (NICE) guidelines for the use of mindfulness approaches in various conditions <http://bit.ly/1Rxu0Qo>
- de Vibe M *et al.* Mindfulness

- Based Stress Reduction (MBSR) for improving health, quality of life and social functioning in adults. Campbell Systematic Reviews 2012 doi: [10.4073/csr.2012.3](https://doi.org/10.4073/csr.2012.3)
- Chiesa A and Serretti A 2010; A systematic review of neurobiological and clinical features of mindfulness meditations, *Psychological Medicine*, 40, 1239-252.

Useful websites and resources

- www.wisebrain.org
- www.mindfulnessscotland.org.uk
- www.freemindfulness.org/download
- www.mindful.org

Explore YouTube videos

- Jon Kabat Zinn
- Professor Mark Williams' meditations
- Professor Richard Davidson

Recommended books

- Full Catastrophe Living: How to cope with stress, pain and illness using mindfulness meditation by Jon Kabat-Zinn
- Mindfulness for Dummies by Shamash Alidina
- Mindfulness: A practical guide to finding peace in a frantic world by Mark Williams and Danny Penman
- You are Not your Pain by Vidyamala Burch and Danny Penman
- The Mindful Workplace by Michael Chaskalson

Key training and research centres

- www.umassmed.edu/cfm
- www.bangor.ac.uk/mindfulness
- www.oxfordmindfulness.org
- www.mindandlife.org
- centerhealthyminds.org

Mindfulness at work for staff

- www.mindfulness-works.com

8-week courses: workbooks and online resources

- MBCT: The Mindful Way Workbook by John Teasdale and others
- MBSR: www.palousemindfulness.com/selfguidedMBSR.html (free)
- MBSR: www.umassmed.edu/cfm/stress-reduction/mbsr-online/workbooks
- MBSR: Mindfulness in 8 weeks by Michael Chaskalson
- MBSR: A Mindfulness-Based Stress Reduction Workbook by Bob Stahl and Elisha Goldstein

Karen Glass is a practice development physiotherapist with NHS Greater Glasgow and Clyde and is a member of the charity Mindfulness Scotland

ResearchFellows

Game changer:
the Integrated
Clinical Academic
programme



A foot in



Something to add?

email *Frontline* at
frontline@csp.org.uk

Andrew Cole looks at new opportunities for physios who want to pursue a career that links both the clinical and academic spheres



Physiotherapy practice and research may have been seen as uncomfortable bedfellows in the past. But if that was ever really the case, it certainly isn't now. As Nadine Foster (pictured top right), NIHR

professor of musculoskeletal (MSK) health in primary care at Keele University, notes, research now underpins all aspects of physiotherapy.

'Increasingly, our profession is being expected to provide robust research evidence for the diagnostic procedures and treatment interventions we offer,' she says. 'We need to be able to explain the basis for our practice to patients and colleagues and funders.'

And that is why the Health Education England (HEE) and National Institute for Health Research (NIHR) Integrated Clinical Academic (ICA) programme for non-medics – including physiotherapists – could be such a game changer.

The ICA programme, which replaced

NIHR's clinical academic training scheme last year, offers a range of opportunities to undertake fully funded clinical research, research training and professional development while maintaining clinical practice and salary.

'It made me realise it was OK not to know the answers and it also opened my eyes to the world of research and science'

Caroline Alexander

The five rungs on this career ladder are internships, masters in clinical research studentships, clinical doctoral research fellowships, clinical lectureships and senior clinical lectureships.

The overall aim is to encourage applied research that makes a real difference to patients' lives.

So the opportunities are finally there for physiotherapists. For Professor Foster, the programme's lead physiotherapist advocate, the big challenge is to increase significantly the number of NIHR-supported physios,

currently 51 out of a total of 4,000 trainees.

'All physiotherapists should at least be aware of the research that informs their practice,' she says. But it is increasingly

both camps

Research Fellows

important some step up to the plate and take on this role themselves. 'Traditionally, research was led by our medical colleagues but we need as a profession to position ourselves so we can answer our own questions about our clinical practice. This is a case of future-proofing our profession.'

When Professor Foster became an advocate she was the only physiotherapist in a team of eight but she has now been joined by four colleagues – Caroline Alexander, clinical specialist physiotherapist at Imperial College; Sally Singh, head of cardiac and pulmonary rehabilitation at University Hospitals of Leicester NHS Trust; Ann Forster, head of stroke rehabilitation at Bradford Teaching Hospitals and Lisa Roberts, consultant physiotherapist at University Hospital Southampton <http://bit.ly/10AotCQ>

The team covers a wide area of expertise as well as being based in different parts of the country and Professor Foster is excited about future prospects.

She says more physiotherapists applied to become advocates than any other profession. In addition the team can call on a number of experts to provide support on an ad hoc basis.

The new team's main role will be to encourage more physiotherapists to apply and to help them navigate their way through the funding process – as well as signposting people to other funding streams where appropriate.

They can also act as role models. 'They have a wealth of experience to share in terms of advice and tips as well as exhibiting the tenacity that folks need to succeed in research,' says Professor Foster.

Professor Foster is particularly keen to encourage more physios to apply for the higher end research grants such as clinical and senior clinical lectureships. Quite a number do clinically-based PhDs but then choose full-time clinical or academic work because joint career opportunities are so limited.

One of the key barriers here is the lack of managerial support. The NIHR is planning to publish a guide for managers on the value of clinical academic careers in the near future. **FL**

The deadline for this year's applications is approaching. Details of all the ICA awards and how to apply for them will be on the NIHR website shortly <http://bit.ly/1ntgpgg>. See also <https://youtu.be/RVkszxLn8Ag>

Role models

Neil Smith

It's fair to say that physiotherapist Neil Smith has got the research bug. He is currently half way through a Masters in Research at Coventry University looking at which patients are best suited to receive nerve block injections for shoulder pain.

That, in turn, resulted from an ICA programme internship that provided a practical and theoretical grounding in research. And his next step will be to apply to do a PhD in physiotherapy.

But for Neil it is important always to retain a foot in clinical practice – even while doing his full-time MRes he has continued to practise half a day a week.

'Maintaining a clinical case load keeps me focused on trying to ask the right questions,' he explains. 'And besides that I enjoy my clinical work!'

Working in research has influenced his practice. 'It makes me more critical about care and start to question the evidence and why we don't contribute more to the evidence rather than just using it.'



the surgical spinal team at Sheffield University where he still works. 'It was made explicit that part of our work involved delivering audits and doing research and this would be supported by the whole team.'

That has, in turn, led to two NIHR-funded awards to examine the impact of early physiotherapy interventions on patients with sciatica awaiting surgery. He is currently one year into the second, a four-year doctoral fellowship, with preliminary results expected in 2017.

There is already evidence that delaying physiotherapy interventions can have negative effects on patients with lower back pain but more needs to be done, says Mr Reddington. 'As physiotherapists we don't have strong influence at trust or board level, so the more evidence, the stronger our arm becomes to influence patient care.'

Caroline Alexander

Working in MSK outpatients, Caroline Alexander first became involved in research when she began

asking questions about her practice 'and the answers just didn't feel logical, so I started looking for a way to find out better answers'. That led to an MSc in MSK. But she says it was not because she had any affinity for research. 'I just wanted to be a better clinician'.

But doing the MSc changed her mind-set. 'It made me realise it was OK not to know the answers and it also opened my eyes to the world of research and science.'

Since then Caroline has held several joint clinical-academic posts and is now a senior clinical lecturer at Imperial College London, as well as being an NIHR physiotherapy advocate.

Her advice to anyone thinking of pursuing a similar career path? Don't take no for an answer. 'You have to overcome a lot of barriers. But if you find a barrier interesting rather than a reason to give up, this is definitely for you!'



Michael Reddington

Spinal extended scope practitioner Michael Reddington has been aware of the umbilical connection between research and practice since his undergraduate days in the 1990s.

Unusually for the time, his physiotherapy degree placed great emphasis on the importance of research.

That philosophy stayed with him while he was cutting his teeth as a qualified physiotherapist and informed his Masters degree, focusing on the relationship between a patient's disability and their experience of pain.

But the big change came when he joined



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"I work as the onsite physiotherapist at Gatwick Airport alongside a team of four occupational health advisors, delivering advice and treatment to over 3000 airport staff. I have been attending this event for the past three years with my colleagues. I enjoy networking with fellow occupational health physicians, updating my knowledge and skills. This event will continue to remain a regular fixture in my diary for the foreseeable future."

Garry Mitchell, Occupational Health Physiotherapist, Gatwick Airport

Register at www.healthatwork2016.co.uk

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CSP Charitable Trust Funding for Qualified, Student and Associate Members *Spring 2016*

Academically Accredited Courses Award

This award contributes towards course fees with up to **£300** available for a 20 credit course, **£1200** for a 180 credit course (MSc) and **£1500** for a PhD

Courses supported in previous years include:

- Advanced Theory CYQ Level 3 Anatomy and Physiology for Exercise and Health
- Independent and Supplementary Prescribing for Nurses, Midwives and AHP
- PG Certificate in Ergonomics
- MSc Global Health and Development
- MSc Advancing Practice
- MPhil/PhD in Asthma, Allergy and Lung Biology.

Education and Development Placements Award

This award scheme covers:

- 1) International study visits/research projects to overseas centres of excellence – awards of up to **£3,500** available
- 2) International education and development projects – awards of up to **£3,500** available
- 3) Student Elective Placements (UK and overseas) – awards of up to **£750** available

Successful applications to this award have included:

- Research visits to Brisbane and Perth to explore international collaborations examining ways to improve recovery after critical illness
- Development projects in: Zambia, Tanzania, Thailand and Gambia
- Student elective placements within the UK and to: Nepal, Cambodia and Romania.

All applications are submitted via the CSP ePortfolio and are assessed by the CSP Educational Awards Panel. The next deadline is **22 March 2016**. For more information including details of how to apply please visit: <http://www.csp.org.uk/charitabletrust>

The CSP Charitable Trust

Registered Charity No. 279882

Supporting the advancement of

physiotherapy education and research



InReview

Featured book

The Health Gap: The challenge of an unequal world *Michael Marmot*

This book highlights the movement of the NHS's focus from treatment to prevention. By prevention, I mean getting out of the hospital, making a difference at a societal level to stop people getting sick in the first place. Marmot describes this as a 'moral absolute', and the current situation as a 'social injustice'.

The Health Gap takes you on a chronological journey through life. Marmot outlines, for example, the shocking differences in life expectancy on two sides of Glasgow and discusses the impact of high rates of maternal depression among poorer populations. Children from

poorer families are less likely to be exposed to reading, social interaction, encouragement and general stimulation – the key ingredients for a healthy and happy infancy.

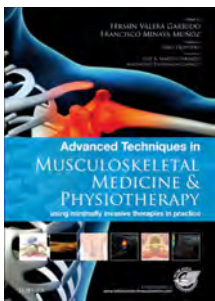
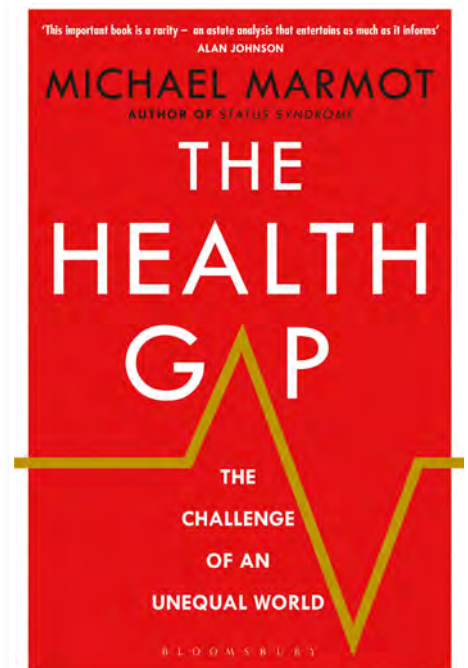
Next, Marmot tackles education. In Mozambique, for example, infant mortality rates are halved in mothers with a secondary school education. The need to provide support at the beginning of life is paramount. We can no longer let society down by waiting for 'something to go wrong', Marmot says.

Turning to work, he says stress, little reward and a lack of incentive are all linked to early deaths and heart disease. Turn the societal pyramid on its head, and it gets even worse. Unemployment is directly linked to impaired mental health and the risk of early death.

If all this seems too bleak, do not fear. Marmot offers some hope, showing that change can happen – and, more importantly, how. Marmot says money spent on supporting parents and providing comprehensive education is a sound investment. There should be incentives to work and work should be available to all, he suggests. As a last resort, a social security and welfare safety net should be ready to catch us.

As a physiotherapist, I have a duty of care to my patients and also have a duty of care to society in general. We know the impact of physical activity on children's education and achievement levels. Why is this not a basic ingredient of every conversation we have with patients?

Stuart Palma, CSP professional adviser



Advanced Techniques in Musculoskeletal Medicine & Physiotherapy: Using minimally invasive therapies in practice

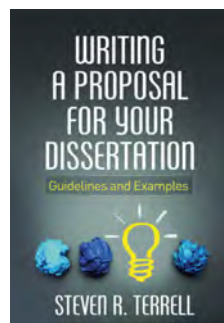
Fermín Valera Garrido and Francisco Minaya Muñoz

This is a new illustrated guide to the diagnosis and treatment of musculoskeletal disorders. It demonstrates how to use minimally invasive therapies in a safe and effective way.

www.alivecor.com

The AliveCor Mobile electrocardiogram (ECG) records accurate ECGs and heart rate anywhere, anytime at an affordable cost. Patients can rest it on their fingers or chest to record an ECG in 30 seconds. 'Know right away when your ECG is normal and if atrial fibrillation is detected', a note marketing the item on the website notes.

Stuart Palma, CSP professional adviser



Writing a Proposal for Your Dissertation: Guidelines and examples

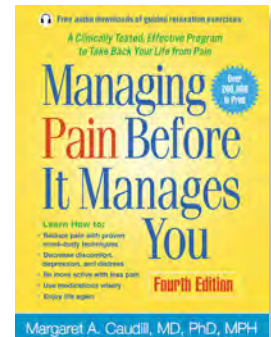
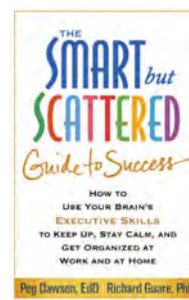
Steven R Terrell

This 'user-friendly' guide helps students get started on – and complete – a successful doctoral dissertation proposal by explaining the process and breaking it down into manageable steps. Topics include writing the research questions and hypotheses.

The Smart but Scattered Guide to Success: How to use your brain's executive skills to keep up, stay calm, and get organized at work and at home

Peg Dawson and Richard Guare

The authors offer guidance on boosting executive skills – the core brain-based abilities needed to get more done with less stress.



Managing Pain Before it Manages You (4th Edition)

Margaret A Caudill-Slosberg

The author, a pain specialist and physician, sets out 10 steps that can change how people with pain feel – both physically and emotionally. Topics include treatments to cope with flare-ups, solving everyday problems, and harnessing the power of relaxation techniques.

Evidence into practice

ACPIN-INPA INTERNATIONAL NEUROPHYSIOTHERAPY CONFERENCE

Evidence into **practice** aims to inspire and motivate you with a programme of eminent speakers who are at the forefront of neurorehabilitation related research that contributes to the evidence base of *your* everyday practice.

There will also be opportunities to view posters on clinical and service related research, and to network with colleagues both nationally and internationally.

TICKETS

ACPIN MEMBERS Two day ticket: £200
One-day ticket: £150

NON-MEMBERS Two day ticket: £300
One-day ticket: £200

Conference programme*

DAY 1

KEYNOTE Prof Derick Wade

How to use evidence, follow guidelines, and be patient-centred all at the same time

Prof Sheila Lennon

Group circuit training for balance, mobility and falls prevention in MS: implications for practice

Prof Gert Kwakkel

Understanding upper limb recovery early post stroke: Some lessons of the EXPLICIT-stroke programme

Prof Louise Ada

"One size does not fit all" concept in mobility intervention for stroke

Prof Monica Busse

"Should we be exercising for brain health?" Specific focus on Huntington's Disease

Prof Fiona Jones

"It's all about the small steps" – sharing and creating solutions for successful self-management after traumatic brain injury

Dr Elisa Pelosin

Falls, gait and balance in neurorehabilitation

Dr Stephen Ashford

Evidence for goal setting, attainment and integration of physical and pharmacological intervention for spasticity management

Prof Baroness Finlay of Llandaff

Lunch time speaker

Prof Steve Wolf

Collaborative decision making and development of best evidence apps

Dr Rhoda Allison

Consultant and advanced practice roles in neurology including bed based responsibilities, injection therapy and prescribing

Prof Sarah Tyson

Patient-led therapy during in-patient stroke rehabilitation

DAY 2

Dr Emma Stokes (President of WCPT)

The importance of international neurophysiotherapy collaboration – a view point from WCPT

Prof Jon Marsden

Hereditary spastic paraparesis: pathophysiology and rehabilitation

Prof Lisa Harvey

Spinal cord injuries: recent trials and their relevance to other areas of neurology

Prof Robert van Deursen

Exploration of clinical-academic collaboration to achieve evidence based practice

Prof Birgitta Langhammer

Post stroke rehabilitation, challenges to maintain abilities

Prof Jan Mehrholz

Electromechanical assisted training for upper and lower limbs after stroke

Prof Valery Pomeroy

Generating the evidence base for personalised stroke rehabilitation

Prof Janice Eng

Wearable sensors to challenge arm and hand use after stroke

Mr Peter Skelton

Handicap International training programme for physiotherapists on humanitarian missions

Prof Dario Farina

Closing the loop in neurorehabilitation – how to induce plasticity by closed-loop interaction

Dr Olumede Dada

Neurophysiotherapy in Nigeria: an overview of neurophysiotherapy service models, how current evidence is used in supporting treatment models and challenges therein

Prof Mindy Levin

Virtual reality technologies for upper limb motor learning and recovery in rehabilitation

Mr Alex Massey (Neurological Alliance England)

Service users view

Prof Helen Dawes

Walking and simulated walking control

* provisional 8 January 2016



To register go to www.acpin.net



17th-18th March 2016 • QE2 Centre, London UK

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Networks & networking

Catch up with news and announcements regarding the CSP's work at region and country level and also courses and events from CSP recognised professional networks. All recognised networks may list their events free of charge in this section to a limit of 180 words. Reach out to members, previous colleagues and classmates through the info exchange, retirement groups, or reunions sections. Send the information you wish to include to: networkads@csp.org.uk

Frontline schedule

Issue date	Booking deadline
Feb 17	Feb 1
Mar 2	Feb 15
Mar 16	Feb 29

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Courses & conferences

Advertise your course or conference by contacting our advertising agents, Media Shed on tel: **0845 600 1394** or email: cspads@media-shed.co.uk Send your text and have your lineage advertisement typeset by Media Shed to our magazine house style. Add a box or shading to make your advert stand out on the page. Alternatively you can choose to send your completed display artwork to Media Shed. Call to discuss rates.

Online

Create your course advert online by using our easy to use website. Go to: www.csp.org.uk/courseadverts

Please note The courses and conferences advertised in this section have not been subject to the CSP's formal recognition processes unless explicitly stated. *Frontline* accepts advertisements in good faith and is not responsible for the content of advertised events (except those delivered by the CSP itself). In the event of queries or comments relating to a specific course or conference, please contact the relevant organiser directly. Please see additional *Guidance for Members* in this section on broader issues relating to CPD, competence and scope of practice.

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Recruitment

Advertise your vacancy, agency or service in *Frontline*, or online at www.jobscalator.com by contacting our advertising agents, Media Shed, on tel: **0845 600 1394** or email: cspads@media-shed.co.uk

Send your completed display artwork or contact Media Shed to discuss typesetting options. Alternatively submit your text for our lineage section. Call Media Shed to discuss rates.



Networks & networking

English networks news



English regional networks

News from the CSP English regional networks, branches and country boards.

Find out more at www.csp.org.uk/nations-regions



The 10 English regional networks organise forums, events or conferences four times a year. These are:

- usually free to all CSP members including associates, students and retired
- great CPD for HCPC re-registration, your development, and developing your services
- a networking and sharing opportunity
- an opportunity to debate and find out what's going on.

Up to date information at: www.csp.org.uk/nations-regions

East of England

Information at: www.csp.org.uk/eastengland

Twitter: @Physioeast

Contact: Chair, Carl Hancock, at: eastofenglandchair@csp.org.uk

East Midlands

Information at: www.csp.org.uk/eastmidlands

Twitter: @CSPEastMidlands

Contact: Chair, Lucy Cocker, at: eastmidlandschair@csp.org.uk

Next regional forum

Date: Monday 7 March

Time: 5pm-7.30pm

Place: Training Room 1, London Road Community Hospital, London Road, Derby DE1 2QY

London

Information at: www.csp.org.uk/london

Twitter: @CSPLondon

Contact: Chair, Carole McCarthy, at: londonchair@csp.org.uk

Next regional forum

Date: Monday 21 March 2016

Time: 4pm-7pm

Place: To be confirmed.

Regional network evening event – Population data tool and business school for physiotherapists

Date: Monday 15 February

Time: 5.15pm-8.15pm

Place: Citadines, 94-99 High Holborn London WC1V 6LF GB

This is the first in our series of evening events for all qualified and associate CSP members working or living in and around London.

This session hopes to attract London based members to participate, but more positively we are aiming to attract those who are interested in service development and show them how the tools gained from these talks can help them.

We start with a presentation on the CSP population tool and how members can use this to support their own services, led by Kate Bennett of the CSP. This will be followed by Stuart Paterson who will give a talk on business acumen for physiotherapists. Stuart is a very successful private physiotherapist with his company in the Sunday Times top 100 companies to work for.

The intended outcome of this event will be to use the population data tool for your local population and be more business savvy.

Please register via the link:

<http://bit.ly/1KslKcY>

North East

Information at: www.csp.org.uk/northeast

Twitter: @CSPNorthEast

Contact: Chair, Robert Goddard, at: northeastchair@csp.org.uk

North West

Information at: www.csp.org.uk/northwest

Twitter: @northwestcsp

Contact: Chair, Jo Lishman, at: northwestchair@csp.org.uk

Next regional forum

Date: Monday 7 March

Time: 6pm-8pm (5.30pm for refreshments)

Place: Brooks Building, Manchester Metropolitan University, Manchester M15 5JH

South Central

Information at: www.csp.org.uk/southcentral

Twitter: @CSPSouthcentral

Contact: Chair, Amanda Pike, at: southcentralchair@csp.org.uk

South East Coast

Information at: www.csp.org.uk/southeastcoast

Twitter: @CSPSouthEast

Contact: Chair, Helen Balcombe, at: southeastcoastchair@csp.org.uk

Next regional forum (includes AGM)

Topic: Social media in healthcare – CPD theme

Date: Thursday 17th March 2016

Time: 10am-1pm

Place: University of Brighton, Room D216, Robert Dodd Building, 49 Darley Road, Eastbourne BN20 7UR

South West

Information at: www.csp.org.uk/southwest

Twitter: @CSPsouthwest

Contact: Chair, Adam Zawadzki, at: southwestchair@csp.org.uk

Next regional forum

Date: Wednesday 16 March

Time: 1pm-5pm (lunch 1pm-1.30pm)

Place: The Oaktree Arena, Bristol Road, Edithmead, Highbridge, Somerset TA9 4HA

West Midlands**Information at:** www.csp.org.uk/westmidlands**Twitter:** @WestMidlandsCSP**Contact:** Chairs, Sheila Stringer and Sam Townsend, at: westmidlandschair@csp.org.uk**Next regional forum (starts with AGM)****Date:** Monday 21 March**Time:** 10am-1pm (sandwich lunch 1pm-1.30pm)**Place:** Room G86, School of Sport Exercise and Rehabilitation Sciences, Birmingham University, Edgbaston, Birmingham B15 2TT**Yorkshire and the Humber****Information at:** www.csp.org.uk/yorksandhumber**Twitter:** @CSPYorksHumber**Contact:** Chairs, Angela Clough and Jean Heseltine, at: yorksandhumberchair@csp.org.uk**Next regional event (includes AGM)****Topic:** Physiotherapy in primary care: 'Making the business case'**Date:** Saturday 5 March**Time:** 10am-3pm**Place:** York St John University, Lord Mayor's Walk, York YO31 7EX**Future dates:**

- Wednesday 23 March, (time TBC) – **CSP council meeting**
- (from 5 March to 21 March – **quarterly English regional network forums**)
- Tuesday 22 March, 10.30am – **Regional development event**
- Tuesday 22 March, 4pm-5.15pm – **English network forum.**



English regional networks

Find out more at

www.csp.org.uk/nations-regions

Professional networks news



Professional networks

Courses and events from CSP recognised professional networks. Share your events here free of charge.

Send an email to networkads@csp.org.uk

Association of Chartered Physiotherapists in Neurology (ACPIN) - Surrey and Borders Evening lecture – AGM and use of Warrington stroke category

Speaker: Marriane Gayton**Date:** Wednesday 10 February 7pm for 7.15pm start**Place:** Physiotherapy Dept, Frimley Park Hospital, Frimley**Cost:** Free members, £4 non members
No booking required. Also on iCSP**Contact:** surrey@acpin.net**Physio First**

Physio First conference 2016: Championing sport in private practice

Place: East Midlands Conference Centre, Nottingham NG7 2RJ**Date:** 16-17 April

Physio First are pleased to announce the 2016 conference, entitled 'Championing sport in private practice'. Conference continues to be the 'not to be missed' Physio First event of the year and 2016 promises not to disappoint! We will be bringing you an impressive line-up of both international and home-grown lecturers. This conference will undoubtedly raise your physio knowledge.

Speakers include: Professor Karim Khan (Canada), Professor Bill Vicenzino (Australia), Dr Catherine Spencer-Smith (UK), Joanne Elphinston (UK), Lynn Booth (UK), Dr Kieran O'Sullivan (Ireland), Seth O'Neill (UK), Celia Champion (UK).

Other events over the weekend:

Large trade exhibition – opens Friday 15 April

4.30pm. Friday night drinks reception and supper – only £19! Saturday night buffet – only £25. AGM – Join the business of your organisation. Bookings close 11 March 2016.

Cost: Delegate prices from £220 per day. Book online and receive £10 discount at: www.physiofirst.org.uk**Contact:** For queries or further information, please email: alice.kettle@physiofirst.org.uk

Medico-legal Association of Chartered Physiotherapists (MLACP)

Paediatric and adult neurology – the role of the physiotherapist as an expert witness

Date: Wednesday 27 April and Thursday 28 April 2016

This two-day course is for experienced physiotherapists working in paediatric or adult neurology who are interested in, or have some experience of, preparing physiotherapy reports for medico-legal purposes.

Place: CSP, 14 Bedford Row, London WC1R 4ED**Course leaders:** Eileen Kinley and Will Winterbotham**Cost:** £300 MLACP members, £340 non-members**Contact:** For more information, contact Eileen Kinley (paediatrics) at: eileen@83waterloo.co.uk or Will Winterbotham (adult) at:willwinterbotham@btinternet.com

Download an application form from:

www.mlacp.org.uk

Acupuncture Association of Chartered Physiotherapists (AACP)

Upcoming CPD courses

Upper refresher**Date:** 6 March**Place:** Newcastle**Auricular acupuncture****Date:** 5 March**Place:** Peterborough**Electroacupuncture, Gua Sha and cupping****Date:** 5 April**Place:** Peterborough**Women's health****Date:** 23-24 April**Place:** London**AACP Basic acupuncture foundation courses**

Expand your skillset and increase patient choice by training in acupuncture with the AACP.

Our foundation courses have been designed to offer you a level of knowledge, skill and understanding that will allow you to practise acupuncture in a safe and appropriate manner, in a clinical setting.

Dates: 20, 21, 27, 28 February and 9, 10 April**Place:** Derby >

Dates: 27, 28 February, 12, 13 March and 7, 8 May

Place: Reading

Cost: £495 – Including one year's full membership of the AACCP with many benefits!

To book: Visit www.aacp.org.uk > Find a Training Course > Foundation Courses or CPD Courses
Tel: 01733 390007 Email: sec@aacp.org.uk

AACP Grants

AACP have a number of grants available for AACCP members. For more information please contact Mindy Cairns, AACCP research advisor, at: research@aacp.org.uk or see the AACCP website: www.aacp.org.uk

Association of Chartered Physiotherapists in Sports and Exercise Medicine (ACPSEM)

For just £55 per annum full members enjoy the benefits of a strong network of sports physios, three sports journals online, a structured CPD pathway supported by a suite of evidence-based training courses in taping, soft tissue and rehabilitation and discounts with more than 20 companies. Student membership costs £21.

Spring study day – Soft tissues techniques; priming for performance

Date: 23 April

Place: St George's Park, Burton-Upon-Trent

Soft tissue release techniques with hands, tools, belts and bands. Mobilisation of the peripheral nervous system, dry needling and sports taping techniques (rigid and flexible).

Speakers: Chris McNicholl, Lesley McBride, Colin Paterson, Donna Strachan, Chris Norris, Ben Rosenblatt, Leigh Halfteck

Cost: Fees from £80

Clinical reasoning in exercise and performance rehabilitation

Place: Bisham Abbey

Dates: P2 12-13 March

Cost: Fees from £200/weekend

Three days of anatomy prosection for sports physios courses

Place: Vesalius Clinical Skills Centre, University of Bristol

Dates: 14 March – Shoulder and brachial plexus

15 March – Knee and ankle

16 March – Hip and groin

Cost: £150 per day, three days for £400

Autumn study day – Technology in sport and rehabilitation

Place: Cardiff

Date: November date tbc

Contact: Email: info@physiosinsport.org

Web: www.physiosinsport.org

Musculoskeletal Association of Chartered Physiotherapists (MACP)

Know pain: A practical guide for therapeutic neuroscience education

The challenge of successfully managing persistent pain can be one of the most daunting for both clinicians and sufferers. Patients are often frustrated after failed short-term interventions. It is often difficult to understand and explain high and prolonged levels of pain where a traditional tissue based cause is lacking. This course explores a cutting-edge, patient-centred approach using a variety of practical learning methods to help your patients understand their pain. It provides a range of practical applications and methods to take into your clinic and immediately apply with your patients. The course content blends a wide range of contemporary evidence from both educational and healthcare literature.

Date: 21 and 22 May 2016

Place: Royal London Hospital

Cost: £255 MACP members, £275 non-members

Contact: <https://macpweb.org/home/index.php?p=402>

Association of Chartered Physiotherapists in Reflex Therapy (ACPIRT)

ACPIRT Reflex therapy foundation course 2016

Four weekends over nine months. Learn to treat the body through reflex points on the feet. Akin to reflexology but with health professional rationale and reasoning to be used in wide variety of patients and health care settings. Endorsed by CSP quality mark, the course is led by experienced teachers and assistants.

Dates: 30-31 January, 20-21 February, 19-20 March and 17-18 September

Place: Village Hall, School Lane, South Cerney, nr Cirencester, Gloucestershire GL7 5TU

Cost: £300 per weekend. 10 per cent off total price when paying in full in advance.

Contact: Gunnel Berry, course coordinator, email: info.acpirtfoundationcourse@gmail.com

Association of Chartered Physiotherapists in Occupational Health and Ergonomics (ACPOHE)

ACPOHE is the CSP professional network for physiotherapists working in occupational health and ergonomics. Registered members of ACPOHE are physiotherapists who have demonstrated specialist competency in the

fields of occupational health or ergonomics.

Upper limb disorders in the workplace – Risk assessment and management

Date: 1 October 2016

Place: Guildford

Cost: £140 (member), £200 (non-member)

Introduction to occupational health

Date: 9/10/11 March

Place: Peterborough

Cost: £455 (member) £515 (non-member)

Date: 21/22/23 September

Place: Edinburgh TBC

Booking available on the ACPOHE website soon once venues have been confirmed.

ACPOHE courses being hosted by Central Health:

Office ergonomics (DSE) level 1

Date: 5/6 March 2016

Place: Central Health Network, Spondon, Derby

Contact: Jane Fearn on tel: 01332 281411 or email: jane.fearn@centralhealth.org.uk

ACPOHE contact: Information and booking at: <http://www.acpohe.org.uk/events>

ACPOHE administrator, Tracy Long, tel: 01284 748202 email: acpohe@buryphysio.co.uk

Physiotherapy Pain Association (PPA)

Sleep and pain: Managing the interactions

Date: Saturday 19 March 2016

Place: Harrogate District Hospital

One-day course introducing physiotherapists to theory and practice of the cognitive behavioural approach of sleep and pain problems

Tutors: Andrew Green and Alex Westcombe

Cost: PPA members £90 and non-members £100

Contact: ptecourses@gmail.com

Website: <http://ppa.csp.org.uk>

Association of Chartered Physiotherapists in Temporomandibular Disorders (ACPTMD)

Physiotherapy management of temporomandibular disorders (TMD)

Tutor: Phil Bateman

Date: Saturday 27 February

Place: Huddersfield Royal Infirmary

Cost: £149

One-day course reviews:

- relevant clinical anatomy
- physiotherapy assessment of the masticatory system
- classification of common TMD's
- theoretical and practical aspects of physiotherapy management

- case studies and clinical reasoning.

Contact: Belinda Smith at: action_therapy@yahoo.co.uk for further information and an application form.

Physiotherapy management of temporomandibular disorders (TMD)

Tutor: Phil Bateman

Date: Saturday 30 April

Place: Stepping Hill Hospital, Stockport

Cost: £149 (early bird discount of £129 if booked by 29 February)

One-day course reviews:

- relevant clinical anatomy
- physiotherapy assessment of the masticatory system
- classification of common TMD's
- theoretical and practical aspects of physiotherapy management
- case studies and clinical reasoning.

Contact: Cathy Gordon at: info@romilephysio.com for further information and an application form.

Pelvic, Obstetric, Gynaecological Physiotherapy (POGP)

Physiotherapy assessment and management of pregnancy-related lumbo-pelvic conditions

Date: 11-13 March 2016

Place: London

Cost: £275 POGP member/affiliate, £345 non-member

Introduction to physiotherapy in the child-bearing year

Date: 16 April 2016

Place: London

Cost: £100 POGP member/affiliate/student, £130 non-member

Physiotherapy assessment and management of lower bowel dysfunction – a practical skills-based workshop

Date: 24-26 June 2016

Place: Winchester, Hampshire

Cost: £325 POGP member/affiliate, £395 non-member

For further details of the POGP short course programme or to download an information pack for any of the above courses, please visit the POGP website at: <http://pogp.csp.org.uk/courses-events>

Contact: Email our course administrator via pogpcourses@yahoo.com

Follow us on Twitter: @ThePOGP

Check out the pogp.csp.org.uk website for information on bursaries and funding opportunities.

Electrophysical Agents and Diagnostic Ultrasound (EPADU)

EPADU study day, for physiotherapists working in neurology

Place: The Council Room, Chartered Society of Physiotherapy, 14 Bedford Row, London WC1R 4ED

Date: Wednesday, 13 April 2016.

Registration 9.30am-10am (close 4pm)

Speakers: Leaders in the field, including Professor Dr Jane Burridge, Dr Stephen Ashford, Jon Graham, Christine Singleton, Gary Morris and Peter Harding, will be presenting sessions on the latest FES research, case studies and workshop, independent prescribing in botoxin spasticity and within community neuro services, plus EMG and E-atom guided Botox Injections.

Cost: £40 for members of EPADU professional network/£50 for CSP members/£55 for non-CSP members /£35 for students, to include refreshments.

Contact: To express your interest in attending this day, and for further information please contact Sue Finley at: susan.finley45@yahoo.co.uk

British Association of Chartered Physiotherapists in Amputee Rehabilitation (BACPAR)

BACPAR needs reviewers for their updated clinical guidelines – Potential for NICE accreditation

Do you want to get involved?

The British Association of Chartered Physiotherapists in Amputee Rehabilitation (BACPAR) are currently undertaking an update of the clinical guidelines for the pre- and post-operative physiotherapy management of adults with lower limb amputation.

The guidelines update group are at the stage of seeking reviewers of the update, and would like to invite interested Band 5 and Band 6 physiotherapists to volunteer for this. Experience with amputees is not necessary, as the update group wish to find out if these guidelines will support staff working with limited access to expert advice.

The process of updating the guidelines is an evolving process and included in this is now the potential to obtain accreditation from NICE for the guidelines. The update group are working hard to meet all the criteria to facilitate accreditation and as part of this the importance of obtaining reviews from all the identified stakeholders is crucial.

- Would you be a reviewer? If you are interested please contact Sara Smith, BACPAR guidelines co-ordinator, at: sarah.smith2@stgeorges.nhs.uk

Another important question to answer is whether physiotherapists want to be able to purchase a printed version of the whole guideline or is access to a free version via the CSP/BACPAR websites sufficient? To see what the online version would look like, you can use the link below which shows the prosthetic guideline documents. <http://bit.ly/1ZeJTja>

BACPAR will be printing a quick reference guide and an audit tool for the guidelines, but need to ascertain if a printed version of the full document is required. The update group would value your feedback by following the link to a quick survey monkey questionnaire, please contact us for the link.

Please get involved and help shape, what to date could potentially be, the first physiotherapy guidelines to apply for accreditation from NICE.

Extended Scope Practitioners (ESP)

ESPPN Upper limb study day

Date: Thursday 11 February

Place: The National Hospital for Neurology and Neurosurgery 33 Queens Square, London WC1N 3BG

Don't miss out! There are still a few places remaining. Book online at: www.esp-physio.co.uk/courses and complete the online booking form. Early bird offer: £80 members only (until end January, then £95). Non-members: £120

Contact: Any questions please contact: admin@esp-physio.co.uk If you are interested in joining our group go to: www.esp-physio.co.uk only £25.

ESPPN Study day: 'Topical issues, informing practice: The future of MSK services (includes AGM)

Date: 22 April

Fantastic CPD opportunity

- This day will focus on a range of issues at the forefront of service development and commissioning, highly relevant for advanced practice clinicians. The day includes evidence based practice and innovative service redesigns.

- Keynote speakers confirmed include Patrick Hourigan on spinal injections, Lucy Arnott on virtual fracture clinics, Stephanie Poulton and Hilda Walsh on developing pain services in addition commissioning from a CCG and service provider perspective. This meeting will include >

a short AGM where members can influence the direction of the network going forward.

Don't miss out: book online now. Go to our courses page at: www.esp-physio.co.uk/courses

Cost: Early bird rate for members £80*

Normal rate £95, non-members £120.

Contact: All enquiries: admin@esp-physio.co.uk

*members need to be fully logged in for reduced rate. Join for only £25.

Association of Chartered Physiotherapists for People with Learning Disabilities (ACPLD) – Northern Region

CPD Study day: Dis dat, deciding right, decision making including EHCP/DNACPR and bereavement

Speakers: Presentations by Lynn Gibson and Dorothy Matthews

Date: Thursday 11 February

Time: 9am to 3.15pm

Place: Northumbrian Piper, Fawdon, Gosforth, Newcastle upon Tyne NE3 2AH

Cost: ACPLD members £10, non-members £20, students £10. Cheques made payable to ACPLD. Money for the study day must be paid for with your application or prior to the study day. Refunds for cancellation can only

be made if notice is given one week prior to the study day. Lunch and hot beverages are included in the price. Please state if you have any special dietary needs. Closing date for applicants is Friday 8 January 2016.

Contact: Cathy Dale at: cathy.dale@ntw.nhs.uk

The Association of Chartered Physiotherapists Interested in Vestibular Rehabilitation (ACPIVR)

Annual conference and AGM – Head injuries and vestibular rehabilitation

Date: Saturday 23 April

Confirmed speakers: Dr Barry Seemungal, neurologist and senior lecturer in neurology at Imperial College London, UK; Dr Simon Kemp, head of sports medicine, Rugby Football Union, UK; Laura Morris, PT, University of Pittsburgh Medical Center, USA

Place: Basement lecture theatre, 33 Queens Square, National Hospital for Neurology and Neurosurgery, London WC1N 3BG

Cost: ACPIVR members £90 plus booking fee, non-members £130 plus booking fee

Contact: Registration at: <https://acpivr2016.eventbrite.co.uk>

Info exchange

Study offers new hope to ankle arthritis patients

A new national multi-centred clinical trial promises to provide a major breakthrough in the treatment of ankle arthritis, investigating whether total ankle replacement is a more effective treatment for ankle arthritis than arthrodesis (fusion).

Ankle arthritis affects up to 30,000 people across the UK each year and can have a major effect on a person's quality of life, many of these patients will access physiotherapy services placing physiotherapists on the front line of identifying potential participants.

Effective recruitment to the trial is vital and total ankle replacement versus arthrodesis (TARVA) is using channels such as social media and an award winning patient information video, starring actor Sylvester McCoy (Dr Who / The Hobbit), to help the TARVA team engage with patients.

It is hoped that the TARVA study will offer vital evidence on the best course of treatment for patients who have this condition and which offers best value to the NHS.

Their lifestyle was secure even though Dorothy had been on long-term sick leave.

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For more information, links to the trial website and patient information video please email: tariq.karim@wwl.nhs.uk

Army School of Physiotherapy

Former students from the Army School of Physiotherapy are gathering information in order to write a book about the school at both Netley and Woolwich. The project is also looking at the development of physiotherapy in the army. If you attended the Army School of Physiotherapy or have worked as a civilian in a British military hospital and would like to contribute to this project please contact Len Asplin at: asp.net_rhh@btinternet.com

Evaluation of physiotherapist and podiatrist independent prescribing

The University of Surrey and University of Brighton are currently undertaking a Department of Health-funded study investigating effectiveness and efficacy of independent prescribing in physiotherapy and podiatry. Part of the study includes two online surveys, open to all clinicians undergoing independent prescribing training. Surveys take 10-15 minutes and explore views and experiences regarding implementation and educational preparation for training. If you would be interested in participating please contact: judith.edwards@surrey.ac.uk or: pp-ipsurrey@surrey.ac.uk

We are also looking for a prescribing clinician (independent prescribing qualification) to act as a case site. This involves having clinical practice observed by a researcher for up to working five days, during which patients will be recruited to a questionnaire study, and data collected on clinician work activities. We are open to any clinical specialties at present. Please see: <http://bit.ly/1KJn67d> and contact email: kerrie.margrove@surrey.ac.uk if you are interested.

Examination of rehabilitation needs screening approaches in forensic settings

We are exploring current approaches and future opportunities in screening for rehabilitation needs in forensic populations (prisons, secure settings and community).

We would like to hear from AHPs, nurses, doctors and associated colleagues about how you screen for rehabilitation needs, if there are any tools you use, and about your experiences of the screening process.

We have a particular focus on:

- physical health
- mental health
- learning disability

- developmental needs.

If you have information you can share with us or for more details about our project, please email: fv-uhb.rehabscreening@nhs.net

Please let us know also if you would be willing to complete our short survey and we will send this to you by email. With thanks, Donald McLean, physiotherapist, team co-ordinator, Reach Forth Valley, Stirling Community Hospital, Stirling.

Did you know what to expect when you qualified?

Are you a Band 5 physiotherapist (or equivalent)? Have you been working for 0-1 years? If so, are you interested in taking part in qualitative research to discuss your experiences in your first job?

Interviews and focus groups will take place in the London area so if you are living there, or are willing to travel, and fit the criteria above, please contact us via our project supervisor Jacqueline Potter, email: j.potter@uel.ac.uk Information will be provided on receipt.

Charity events

12 x 12 for cancer research



Physio Adam Cook has recently completed a 12-month challenge comprising 12 gruelling events. These included a 30 mile ultra-marathon, fell races, and the three highest peaks challenge. His last event was an all-day cycle on a static bike in the physiotherapy department of Chorley outpatient department of Lancashire Teaching Hospitals where he works. Over the year he raised a total of £1,600 for cancer research.

Nottingham physio students raise funds for cardiac risk in the young

Physiotherapy students from the University of Nottingham have helped to raise more than £1,600 in memory of the daughter of one of their lecturers.

The undergraduates joined forces with sports rehab students to fundraise for Cardiac Risk in the Young (CRY), a UK charity that helps young people diagnosed with life-threatening cardiac conditions and bereaved families.



Pictured above: The Nottingham physiotherapy and sport rehabilitation students

Following a charity auction the students worked as house cleaners, sports massage therapists and butlers in order to raise funds and commemorate Alexandra Reid, who died from an undiagnosed heart condition in 2012.

Alex, the daughter physiotherapy of lecturer Heather Reid, died from young sudden cardiac death aged just 16.

The student's fundraising efforts adds to the £60,000 already raised by the Alex Reid Memorial Fund for CRY. Some of this money has been used to screen young people between the age of 14 and 35 years of age and some is being used to fund research.

For more information about Cardiac Risk in the Young visit: www.c-r-y.org.uk >



Tell us about your charitable events – send an email to frontline@csp.org.uk

CSP Retirement Association



CSP Retirement Association

News and information from the CSPRA. Upcoming meetings, events and also details of get-togethers in your area.

Contact Sue Russell at:
news4sue@keleus.com

CSPRA Oral History Project

The CSPRA Oral History Project contains several fascinating interviews with inspirational people. Dr Lynne Caladine and Dr Barbara Richardson, members of the oral history steering committee explain more about it and how to access the index and the recordings:

The oral history project interviews carried out with retired members by CSPRA members, was a brilliant opportunity to capture the unique characteristics of the development of the physiotherapy profession, much of which has occurred 'bottom-up' through the endeavour and dedication of individual members working for the best health of their patients. Interviewees came from different areas of physiotherapy work, background, experience, and job description and lived across England, Scotland, Wales and Ireland. Oral history recognises that people experience the same event in different ways. The aim was therefore to obtain many different perspectives from people who have experienced development of the profession. Our project identified five strands of development including one on management and leadership which is particularly relevant to the focus of this edition of *Frontline*, which has leadership as its theme.

The collection of 95 interviews include physiotherapists who both created change and who worked with change.

There are many differing and sometimes controversial perspectives that depict a journey of the profession from being 'hand maidens' to autonomous professionals. Management structures that impacted on physiotherapists across the decades are discussed as interviewees reflect on their roles as managers or team members. There are strong views on the qualities of leaders and the strategies and tactics that have led to the physiotherapy profession remaining a dominant force in health care over many years.

Together with a 16 page guide and index to the interviews, the collection is now available in the British Library and the CSP library. The British Sound and Moving Images Department at the British Library gives on-line catalogue access to summaries of interview content at <http://sami.bl.uk> (enter C1586). You can listen to the interviews at the British Library at St Pancras, London or Boston Spa, Yorkshire if a member, or at the CSP Library, contact: griffithsl@csp.org.uk

Particularly relevant to concepts of leadership is the interview of Lois Dyer the first physiotherapist seconded to the Department of Health and the first physiotherapist Chair of CSP Council (catalogue reference C1586/2). The project guide indicates many other examples of leadership and management narrative including entries from a number of managers (e.g. catalogue reference numbers C1586/1, /4, /5, /22, /33, /41)

Dr Lynne Caladine and Dr Barbara Richardson

Do you have experience of working in Palliative Care? Lyn Ankcorn writes: 'Payne's Relaxation Techniques' by Rosemary Payne.

I have been asked by Natalie Beswetherick, CSP director of practice and development, to contact members to see whether you might know of someone who works in palliative care who might want to take on role of editor/author of this seminal text.

There is a request from Dr Christopher Rowland Payne. His mother, a physiotherapist with a degree in psychology, Rosemary Payne wrote the well-recognised text book 'Payne's Relaxation Techniques' now in its 4th edition; translated into five languages. The Baroness Ilora Finlay wrote the foreword. It is widely quoted in various NHS Palliative care leaflets

and stress management leaflets.

Dr Rowland Payne is looking for someone to take over the reins of the textbook, and continue with the work his mother had accomplished.

If you can help or know someone who would be interested. Please contact me Lyn Ankcorn email: lyn.ankcorn@virginmedia.com or call/text tel: 07798 525822 or tel: 0121 475 2612.

Lyn Ankcorn Sec CSPRA

York Event

Date: 5 May 10am-3pm

Place: Bar Convent event facility, York (five minutes' walk from station)

Cost: Delegate price £15 includes all day tea and coffee and light lunch. Pay on the day. Format: Two speakers in the morning, lunch, one speaker in the afternoon

Contact: If interested email: judith6072@hotmail.co.uk

Closing date: 28 April

The CSPRA hope this event will encourage our northern members, like Glasgow, and of course all are welcome. Accommodation is available at the Bar Convent if I have prior notice. Speakers will be confirmed by February. I hope this will be a successful spring event.

Judith Saunders, chair CSPRA

Glasgow retirement group

If you are approaching retirement or already retired, you are welcome to join our evolving Glasgow group who plan to meet a few times a year for lunch or other activities. We meet in Glasgow as a convenient central place, but you do not need to have worked in Glasgow to join us.

We have only had two meetings since we began in summer 2015, so now is the time to join us and help shape our future plans.

Our next meeting is at 1pm on Thursday 3 March in Kelvingrove Art Gallery in Glasgow. Please contact Anne at: a_forrester50@hotmail.com if you would like to join us in March or be informed of future events. Do please contact us by 21 February if you wish to attend and we will send you further details about lunch/meeting plans.

East Anglian retirement group

The next meeting in Spring 2016 will be in Cambridge. Contact: jacquipotter@outlook.com for information.

Reunions



Thinking of having a reunion?

Need to contact old friends?

Send an email to
networkads@csp.org.uk

Don't forget... after your reunion has taken place, send *Frontline* a photo and tell us about it!

Sheffield Polytechnic 1978-1981

Some of us had a successful reunion in September 2015 and would like to do it again in 2016 – please save the date – Saturday 10 September 2016. It will be 35 years since we qualified – please join us before people get harder to find as retirement options begin! We will walk in the morning, in beautiful Derbyshire countryside, and eat at lunch and in the evening. Come and join us for all, or part of the day. Please email Nikki Adams at: n.adams@adamsneurophysio.org.uk (originally Bramson) for more details.

Withington Hospital, Manchester 1983-86

It is 30 years since we all became physiotherapists and we spent three great years together at Manchester's Withington Hospital. 1983-86. We are getting together on Saturday 21 May 2016 for a meal and drinks in Didsbury to reminisce and catch up. Please do get in touch if you were part of the 1983-86 Withington set and would like to join us. Looking forward to getting together.
Dawn Narborough (McCoy), email: narborough.family@gmail.com

The Royal Orthopaedic Hospital School of Physiotherapy – 'The Woodlands' 1969 - 1972

It is 43 years since we qualified and, whilst some of us are in contact, we have never organised a set reunion. If you are interested in meeting up sometime during the summer of 2016 please email me, Marilyn Andrews, at: m.p.andrews@keele.ac.uk It would be lovely to catch up with everyone after all this time.

United Liverpool Hospitals School of Physiotherapy 1977-1980



Hello! It's me. I was wondering if after all this time you'd like to meet? If you would, contact Karen (McLoughlin) at: email: ladylittler@gmail.com Please share with tutors et al: Eileen Thornton that includes you!

University of Northumbria 1993-1996

Save the date – Class of 96 reunion in Newcastle, Saturday 24 September 2016. It will be 20 years this year since we have graduated so it would be great to have a get together! Details TBC. Please pass this message on to people who you are still in contact with. Please get in touch via email to Nicola Idowu (nee Henderson) at: nichen74@yahoo.co.uk or see the Facebook page at: <https://www.facebook.com/groups/943057765730497/?fref=ts>

Bradford Hospitals School of Physiotherapy Set 1974-1977/8

It has now been more than 40 years since we all met in Bradford to start our physiotherapy training. Jill, Mary, Mary, Liz, Janet and Barbara shared a weekend in 2015 and plan to reunite in 2016.

We all wish to widen the circle by inviting everyone from our year to join us and meet in 2016. We plan to meet in Bradford over a weekend to revisit old haunts and local Yorkshire beauty spots – time and exact location yet to be decided. It would be great to hear from you. If you would like to join us, please contact. Jill Cooper nee Emery at: jill.cooper@hotmail.co.uk or Barbara (nee Sharp) at: barbara.marsland@gmail.com

Nottingham School of Physiotherapy

We are planning a reunion for the Nottingham leavers from 2001 in 2016 – it will be 15 years since we qualified. There are still people we have not been able to track down email addresses for – Darren, Cath, Carl, Nicky, Sue, Carol. If this is you please contact me at: rfieldhouse78@hotmail.com

Prince of Wales (POW) Set A 1966-69

Remember us – Angela Hancock-Martin, Jenny Eve, Marion McKenzie, Anne Brown? We hope to get in touch with Elaine Slater, Prunella Patel, Tina Laflin, Sue Frankel and perhaps others from Set A for a possible get-together in 2016, or just to hear how the passing years have treated you! Please contact: angecourt@googlemail.com and/or: awbrown15@gmail.com Hope to hear from you.

The Queen's College Glasgow Class of 1981 – Nearly 35 years!

Are there any old gals and guys out there interested in a get together perhaps in June 2016 to reminisce, celebrate and commiserate?

If there is an appetite for a bash we will be happy to do the planning. Please reply to: susan@familyhastings.com Looking forward to hearing from you! Jillan Rae (nee Craig), Irene Pullar (nee Caddie) Susan Hastings (nee Clunie)

St Mary's Paddington Class 1971-1974

Anyone out there from class 1971-1974 who would love to meet and catch up? Contact by emailing: lesrust@gmail.com

Middlesex Hospital Hydrotherapy – Summer/autumn 1961 – reunion

Looking to contact: Lorna Gerrard, Bridget Knott and Tessa Shepherd who did the 6/12 hydrotherapy course at the Middlesex Hospital in the summer/autumn 1961. Elizabeth Henderson nee Grieve would like to catch up! Contact: liz@braidhurst.co.uk Braidhurst Cottage, Kirk Brae, Shandon, Helensburgh, Argyll and Bute G84 8NP. Tel: 01436 820 256 or: 07900 692928.

Kings College Hospital 1966-69 October set

I am trying to organise a reunion for our set and have so far been in touch with three others from the set who are all keen to meet up. Please get in touch with me at: carolyn@beavisnet.co.uk if you are interested during 2016, probably October time, as it will be 50 years since we started our training! Venue is not decided yet. If you know of people from the set who don't get *Frontline* please can you pass this on. Thank you so much. Carolyn Beavis (nee Gray). >

Prince of Wales POW F Set (aptly named!) 1965

Our 50th anniversary (golden)! Anyone interested in a reunion? We already have a few who would like to meet up. Open to suggestions on day and venue. Please contact Elly on tel: 01548 521391 or email: eratthehaybarn@uwclub.net

West Middlesex Hospital School of Physiotherapy 1975-1978

Reunion? I have now contact with 14 students/physiotherapists from our set, but some are still 'missing'. Are you 'one of us', or do you know someone who graduated from West Middlesex 1978? Of so, please contact Lars Andersen on email: la-and@online.no

School of Physiotherapy, Withington Hospital Manchester 1973

Lenia from Nicosia, Cyprus would like to get in touch with friends from the school of physiotherapy, Withington Hospital Manchester 1973 intake. Email: elenidracopoulou@gmail.com

Northern Ireland School of Physiotherapy - Belfast 50th anniversary reunion

We have continued to meet since our reunion and are now planning the 50th reunion of our qualification in 1964, which will take place at a suitable date in 2017. We hope to have another luncheon party this spring so if any other physiotherapists would like to attend please get in touch with me at: jarcherphysio@aol.com

Edinburgh Royal Infirmary 1963-1966

Anyone out there still working? Fancy meeting up? Email me on: madelinesg14@tiscali.co.uk or tel: 01992 586659.

West London School of Physiotherapy

John M B Long would like to hear from ex-students who were there in the 1950s. Email: jmblong@hotmail.com

Salford School of Physiotherapy, Hope Hospital 1974-1977

It's a long time since we left Salford. If you are interested in a reunion or just a catch up by email, please get in touch with Jane Heyer at: janeheyer@rocketmail.com

London Hospital School of Physiotherapy class of 1977-80



The London Hospital School of Physiotherapy class of 1977-80 met in London in October. It was wonderful to see everyone again and we were also delighted and surprised to be joined by our Principal, Joan Piercy. We had a very chatty weekend catching up on the past 35 years. We visited the Whitechapel Art Gallery, had a walk around the much changed Royal London and then went for a group meal in Whitechapel.

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Courses – Guidance for members

Members have a responsibility to limit their practice to those areas in which they have established and maintained their competence. Completing a course may not be sufficient to establish personal competence in a new area, while members are responsible for undertaking CPD to maintain their competence in all areas of their current practice.

Members should explore individual courses' suitability and value (including their quality, intended outcomes and whether they include formal assessment of learning) for meeting and demonstrating fulfilment of their personal learning needs. Members should also think about the broader ways in which they can address their learning needs. These include day-to-day practice, self-directed and mentored learning, and professional networking and peer review.

It is important that members evidence their learning: maintaining a record of CPD is a regulatory requirement of the Health and Care Professions Council (HCPC), while recording the education and training undertaken to support progression into a new area of personal practice is a condition of CSP professional liability insurance (PLI) cover.

A course being advertised in *Frontline* does not necessarily mean that it is relevant to all members, has gone through a quality assurance process (courses advertised in the magazine are not formally recognised by the CSP unless explicitly stated), or that its topic area falls within the scope of UK

physiotherapy. In addition to issues of competence, including an area within personal and collective scope of practice depends on the context in which it is practised, how it is integrated into physiotherapy activity, how it is promoted as a service delivered by a physiotherapist and how its physiotherapeutic value is demonstrated.

Some areas ordinarily sit outside the scope of UK physiotherapy. However, they may be undertaken by CSP members as part of extended activity. Members should ensure that this is with the agreement of their employer and/or explicitly as a service delivered outside their activity as a physiotherapist; is supported by appropriate education and training; and is covered by insurance from a source other than the CSP. Courses advertised in *Frontline* may be relevant to members extending their activity in this way.

Further guidance and support:

- CSP ePortfolio: **www.csp.org.uk/ePortfolio**
- CSP Code of Professional Values and Behaviour: **www.csp.org.uk/code**
- *Frontline* CPD series (published in each issue)
- HCPC CPD requirements: **www.hpc-uk.org/aboutregistration/standards/cpd**



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*interactiveCSP is the online networking and knowledge sharing area of the CSP website. Find our more at www.csp.org.uk/icsp or call 0845 600 1394 for more information.

Paediatric Research Funding 2016

The **CSP Charitable Trust** in conjunction with **Action Medical Research** is offering a paediatric research funding award for experienced researchers in 2016:

Paediatric research funding

*for experienced
researchers*

Up to £250,000 for a research project to support research into paediatric non-acquired brain injury and/or paediatric cerebral palsy

The deadline for outline applications is:

5pm, Wednesday 30 March 2016

Further details on this call are available at:

www.csp.org.uk/prf

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physiotherapy education and research



Courses & conferences

Animal therapy

HAVE YOU CONSIDERED EXPANDING YOUR SKILLS BY WORKING WITH ANIMALS?



Hartpury's MSc in Veterinary Physiotherapy is a hands-on and dynamic programme offered to chartered physiotherapists who are now looking to focus their skills and experience on working with animals.

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* You must be a physiotherapist who is registered with the Healthcare Professions Council and be a member of the Chartered Society of Physiotherapists to apply. Postgraduate funding is now available from the Student Loans Company. Some restrictions apply. To find out if you qualify please visit www.slc.co.uk

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Tel: 0116 255 6326



Complementary therapy

Foundation Acupuncture course

When: 12 March 2016 – 8 May 2016

Where: Portsmouth

When: 8 April 2016 – 15 May 2016

Where: Macclesfield

Tutor: Mr Kam-Wah Mak
BSc, Dip Ac, Cert. Ed.MCSP

Contact:

Ken Joy
info@heseminars.com
01202 568898

Foundation Acupuncture Course

When: 26 April 2016 – 28 April 2016

Where: Wilmslow Physio

M-Level accredited Foundation Acupuncture course with Jennie Logbottom MSc MMed FCSP MBAC. Dates: April 26th-28th & June 21st-22nd Cost: Early-bird £475 before March 14th (£495 thereafter).

Contact:

Andy Corner
info@wilmslow-physio.co.uk
01625 530794

Foundation in Acupuncture Course

When: 13, 14, 15 May, 24, 25, 26 June 2016

Where: Birley Campus, Manchester Metropolitan University

Contact: cpd.hpssc@mmu.ac.uk

Learn to use Acupuncture for the treatment of musculoskeletal conditions using a combination of Chinese medicine and western approaches. The course is highly practical and interactive with two highly experienced tutors, delivered in a brand-new purpose built educational facility.

For more information: www.hpssc.mmu.ac.uk/courses/cpd and search 'Acupuncture'

Trigger Point Acupuncture Course

When: 23 April 2016

Where: Wilmslow Physio

Integrating manual therapy and trigger point needling. Date: Saturday April 23rd. Tutor: Jennie Longbottom MSc MMed BSc FCSP Venue: Wilmslow Physio, 20A Grove Street, Wilmslow SK9 1EB. Cost: Early-bird £105 before March 14th (£120 thereafter).

Contact:

Andy Corner
info@wilmslow-physio.co.uk
01625 530794

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Complementary therapy

Adapted Tai Chi Exercises**When:** 16 April**Where:** Reading**When:** 14 May**Where:** Bristol**When:** 8 October**Where:** Manchester

1 day course for Physiotherapists, Occupational Therapists, Assistants, Technical Instructors, students and other health professionals.

Tutor: Rosalind Smith MCSP
Advanced Tai Chi Instructor
TCUGB

The course covers the demonstration and use of effective, relaxing exercises suitable for chronic pain, falls, arthritis, rheumatology, neurological, palliative care, mental health, pulmonary and cardiac rehab clients including a discussion of specific case studies.

Fee: (includes course notes) £90

For details/application forms or information on hosting a course please contact Ros Smith MCSP
Advanced Instructor TCUGB,

Tel: 01900 829545**Email:**

taichiexercises@gmail.com

www.taichiexercises.co.uk

THE 50 MOST USEFUL ACUPUNCTURE POINTS REVISED (10 hrs CPD) (1 day)

With: Hubert van Griensven

See multiple 2016 dates including Loughborough, Surrey and London

Contact: www.physiouk.co.uk/acupuncture7

Electrotherapy

Laser Therapy Training 2016**When:** 20 February**Where:** London**When:** 19 March**Where:** Basingstoke

Theory, dosage, safety, contraindications, regulations, hands on training.

Cost: £200.

Contact: Course Leader:
James Carroll FRSM. 01494
797100, www.thorlaser.com
Register online - Early Bird
Discounts available

Manual therapy

INTRODUCTION TO MYOFASCIAL RELEASE (PART 1) WITH JOHN ANNAN (2 days)

When: 27th – 28th Feb 2016**Where:** Hemel Hempstead**When:** 12th – 13th March 2016**Where:** Surrey**When:** 19th -20th March 2016**Where:** Fife, Scotland**When:** 23rd- 24th April 2016**Where:** Loughborough**When:** 14th -15th May 2016**Where:** Yeovil

Contact: www.physiouk.co.uk/
john4 or call 0208-787-5963

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Manual therapy

Certificate in Spinal Manual Therapy**When:** 6 Aug. 2016 – 14 Aug. 2016**Where:** Holloway Community Health Centre

This intensive evidenced based 8-day programme is designed to develop clinicians knowledge and clinical expertise in the area of spinal manual therapy to an advance level. Specialist musculoskeletal physiotherapists Dr Toby Hall will present an exciting programme that covers to an advanced level, examination, clinical reasoning, and management for all spinal regions. Toby will present a multi-factorial approach to the management of acute and chronic spinal pain disorders, which brings together in a logical manner the neural, joint and muscle systems. This program has been presented in many countries. Previous participants have highly recommended the course to their colleagues.
www.manualconcepts.com

Contact:

Toby Hall

info@manualconcepts.com

+61412851385

CONNECTTHERAPY SERIES UK 2016 WITH LJ LEE

The full 15 day course with Linda-Joy Lee, formerly known as the Discover Physio Series. Starts in April.

See www.physiouk.co.uk/series or call 0208-787-5963

Better than the January Sales!**When:** 11 Jan. 2016 – 31 Dec. 2016**Where:** Online

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Featuring international experts in the field of MSK healthcare such as: Prof Peter OSullivan, Prof Hakan Alfredson and Dr Emma Stokes: Topics include Management of CLBP, Tendonopathy, Exercise promotion, Psychological interventions for MSK clinicians, Men's Health and Professional issues in physiotherapy and much more Download for free from our website or type macp podcasts into your search engine


Contact:

Musculoskeletal Association of Chartered Physiotherapists
administration@macpweb.org
01202706161


MULLIGAN LEVEL 1 (2 days)

When: 27th – 28th Feb 2016**Where:** Crawley, West Sussex**When:** 27th – 28th Feb 2016**Where:** London

Contact: www.physiouk.co.uk/
mulligan2016
or call 0208-787-5963


mipawork
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Level 1 Workshop in London
 May 21 - 22, 2016
 Balance Performance Physiotherapy
 113 Gauden Road, Clapham London

End therapist burnout, and learn to create whole-body changes that last.



Workshop Highlights

- Learn to work with balanced, effective body mechanics, giving you more power and endurance in your practice.
- Learn a three-session protocol that rebalances the entire structure with gravity.
- Discover how to work *in* connective tissues rather than just *on* them.

£250
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www.mipawork.com

DOUG HEEL – BE ACTIVATED LEVEL 1 2016 DATES (2 days)

When: 2nd-3rd April 2016
Where: Surrey
When: 9th–10th April 2016
Where: London
Contact: www.physiouk.co.uk/doug or call 0208-787-5963

DOUG HEEL – BE ACTIVATED LEVEL 2 2016 DATES (2 days)

When: 4th-5th April 2016
Where: Surrey
When: 7th–8th April 2016
Where: London
Contact: www.physiouk.co.uk/doug or call 0208-787-5963

LJ LEE – THE THORACIC RING APPROACH (4 Days)

When: 6th-9th April 2016
Where: London
Contact: www.physiouk.co.uk/thorax or call 0208-787-5963

LJ LEE – THE SPORTS PELVIS & HIP (3 Days)

When: 21st – 23rd April 2016
Where: London / Surrey
Contact: www.physiouk.co.uk/pelvis or call 0208-787-5963

THE ADULT HIP: IS IT AN FAI, LABRAL TEAR OR LIGAMENTOUS TERES INJURY?

When: 16th April 2016
Where: Edinburgh
When: 14th May 2016
Where: Chertsey, Surrey
With: Benoy Mathew and Glen Robbins
Contact: www.physiouk.co.uk/hip12 or call 0208-787-5963

Kinesiology Taping (FMT1&2) from RockTape UK


When: 30 Jan. 2016 – 31 Jan. 2016
Where: Exmouth Massage School
When: 6 Feb. 2016 – 7 Feb. 2016
Where: University of Central Lancashire
When: 27 Feb. 2016 – 28 Feb. 2016
Where: Bristol Massage School
When: 27 Feb. 2016 – 28 Feb. 2016
Where: London
When: 23 April 2016 – 24 April 2016
Where: Manchester Central
Contact: [RockTape UK](http://RockTapeUK.com)
seminars@rocktape.net
 01206 615464

Laser Therapy Training 2016

Please refer to advert in Electrotherapy section

Born to Move

When: 28 Feb. 2016
Where: Chester
When: 20 March 2016
Where: Deptford, London
When: 15 May 2016
Where: Liverpool
 Learn how to help clients re-connect with fundamental, primitive movement patterns and re-discover their inner hunter-gatherer to move better, easier and with less injury.
Contact: [RockTape UK](http://RockTapeUK.com)
seminars@rocktape.net
 01206 615464



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cspads@media-shed.co.uk
 0845 600 1394

Manual therapy



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Salford Professional Development

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9th March 2016 | University of Salford

Chartered Society of Physiotherapy members receive 20% off using **PHYSIO20**

0161 295 0115 | eleanor@onecpd.co.uk
www.salford.ac.uk/onecpd

Patellofemoral Rehabilitation Course

When: 19 Feb. 2016 – 19 Feb. 2016

Where: Physiotherapy London, LONDON

When: 22 Feb. 2016 – 22 Feb. 2016

Where: Royal Infirmary University Hospital BRISTOL
by Dr Christian Barton

Contact:
www.vitalpm.com Kasia Zielina, Vital Performance Management
info@vitalpm.com
07940015169

Chris Worsfold's Clinical Whiplash & Neck Pain Course

12th / 13th March
Chelsea & Westminster Hospital,
369 Fulham Rd,
London SW10 9NH.

Cost: £240

Visit www.clinicalwhiplash.com/courses

Email:
michelle@tonbridgeclinic.co.uk

Miscellaneous

Cognitive Behavioural Therapy Skills Training

When: 21 April 2016 – 22 April 2016

Where: Arrowe Park Hospital

"Applying CBT skills to Physiotherapy practice is one of the most evidence based things a Physiotherapist can do and Dr Zara Hansen is recognised as the most qualified and experienced Physiotherapy trainer in the field". Arrowe Park Hospital, Wirral. April 21-22nd. See www.cbtskillstraining.co.uk for programme and booking details.

Contact:
Dr Zara Hansen
hella@cbtskillstraining.co.uk
07980 357269

Neurology

Spinal Cord Injury Conference – Hobbs Rehabilitation in partnership with Irwin Mitchell

Neural Plasticity: Its Clinical Relevance in Treatment of Spinal Cord Injury

When: Thursday 25th February 2016

Where: Novotel, Southampton

Cost: £20 donation to Southern Spinal Injuries

Contact: Maddison.Peters@irwinmitchell.com
0114 294 7959

Registration Link:
<http://www.cvent.com/d/4fq74b/4W>

Upper Limb Rehabilitation for the Neurological Patient: A Multi-Faceted Approach

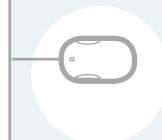
When: 10 March 2016 – 11 March 2016

Where: Oxford Centre for Enablement

This is a 2 day course designed for Occupational Therapists and Physiotherapists working with patients with neurological impairments. At the end of the course delegates will be more informed about a range of upper limb treatments available to their patient group. The course will cover topics such as CIMT, saeboflex, mirror therapy and motor imagery.

Contact:
Course Coordinator
coursecoordinator@ouh.nhs.uk
01865 227879

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Orthopaedics and rheumatology

Musculoskeletal Imaging Referral and Interpretation Courses**When:** 11.03.16 and 15.04.16**Where:** BOLTON (MARCH) and HATFIELD (APRIL)**Contact:** enquiries@imaginginnovated.co.uk

Make the most clinically appropriate and cost effective use of MRI, Ultrasound and X-Ray imaging for your patient and improve your image interpretation skills and understanding of the radiological report.

£140 + VAT

Please visit www.imaginginnovated.co.uk to register and for further details or contact us at enquiries@imaginginnovated.co.uk

Pain management

PAIN AND PHARMACOLOGY WITH DAVE BAKER (1 DAY)**When:** 26th Nov 2016**Where:** Crystal Palace**Contact:** www.physiouk.co.uk/davebaker or call 020 8 787 5963**Laser Therapy Training 2016**

Please refer to advert in Electrotherapy section

Understanding Hands Study Day**When:** 4 June 2016**Where:** Royal United Hospital, Bath, BA1 3NG**Course Cost:** £85**Closing Date:**

Friday 20 May 2016

Course Information:

This study day is aimed at Physiotherapists at Band 6 and below and will include:

- Anatomy and biomechanics;
- Commonly encountered hand conditions;
- Investigations and interpretations;
- An overview of CRPS;
- Workshops covering: treatment and progression; simple splinting; troubleshooting;
- A surgical talk by Professor G Giddins.

To apply, please contact Vanessa Rubery, Course Administrator, for an application form:

Email: vanessarubery@nhs.net**Tel:** 01225 824292

Pain management

KNOW PAIN WITH MIKE STEWART (2 days)**When:** 2nd–3rd April 2016**Where:** Milton Keynes**When:** 26th–27th Nov 2016**Where:** Peterborough**Contact:** www.physiouk.co.uk/mike4 or call 0208-787-5963

Sports medicine

LJ LEE- 15 DAY CONNECTTHERAPY UK 2016 SERIES

See advert in manual therapy

DOUG HEEL BE ACTIVATED 2016 DATES

See advert in manual therapy

EVIDENCE BASED INJURY PREVENTION IN RUNNERS (BRIDGING THE REHAB TO PERFORMANCE GAP)**When:** 7th–8th May 2016**Where:** Burton on Trent**With:** Benoy Mathew and Glen Robbins**Contact:** www.physiouk.co.uk/runners or call 020 8787 5963**OVERUSE INJURIES OF THE LOWER LIMB: EVIDENCE AND RX WITH MANUAL THERAPY****When:** 5th June 2016**Where:** London**With:** Benoy Mathew and Claire Slater**Contact:** www.physiouk.co.uk/hip12 or call 0208-787-5963**TANYA BELL GOING GLOBAL MASTERCLASS UL AND LL****When:** 24th–25th June 2016 (UL)**Where:** London / Surrey**When:** 26th–27th June 2016 (LL)**Where:** London / Surrey**With:** Tanya Bell**Contact:** www.physiouk.co.uk/tb or call 020 8787 5963**Movement Beyond Mobility****When:** 17 Jan. 2016**Where:** BSO Teaching Centre**When:** 6 March 2016**Where:** Central Manchester**When:** 17 April 2016**Where:** BSO Teaching Centre

The new (level one) movement course from RockTape UK will teach you the knowledge and practical skills to improve mobility, stability and motor control to improve movement and performance for your individual clients or in a small group setting.

Contact: RockTape UK seminars@rocktape.net 01206 615464

Sports medicine

**Laser Therapy
Training 2016**

Please refer to advert in
Electrotherapy section

**Biomechanics and
Running Retraining
Course Level 1 and
2**

When: 20 Feb. 2016 – 21
Feb. 2016

Where: Pure Sport
Medicine, LONDON

When: 25 Feb. 2016 – 26
Feb. 2016

Where: Northumbria
University, NEWCASTLE

by Dr Christian Barton
£250 Early Bird rate finishes
1st Dec 2015

Contact:

www.vitalpm.com Kasia
Zielina, Vital Performance
Management
info@vitalpm.com
07940015169

Women's health

**ASSESSMENT,
TREATMENT &
MANAGEMENT
OF DRA (2 days)**

When: 23rd-24th April 2016

Where: Milton Keynes

When: 2nd – 3rd July 2016

Where: Northern venue required

With: Samantha Gillard

Contact: www.physiouk.co.uk/
dra3 or call 0208-787-5963

**Diane Lee 2 Day
Abdominal Wall
Course**

When: 10th – 11th July 2016

Where: London / Surrey

Contact: www.physiouk.co.uk/
diane or call 020 8787 5963

**ACUPUNCTURE IN
WOMENS HEALTH**

With: Cheryl Mason

See www.physiouk.co.uk/cheryl
for dates and details

**Obstetric Pelvis
Masterclass with
Michelle Lyons**

When: 16 & 17 April (1.5 days)

Where: Royal United Hospital,
Bath, BA1 3NG

Course Cost: £210
(early bird offers available)

Closing Date: Friday 1 April 2016

Course Information:

Topics covered will include:

- Understanding hormonal changes during the childbearing year;
- Integrating assessment and treatment of the pregnant and post-natal spine, pelvic girdle, coccyx, hips and pelvic floor;
- Pelvic pain during and after pregnancy;
- Preparing your patients for Labour and Delivery;
- Sexual health during and after pregnancy.

For an application form please contact Vanessa Rubery (Course Administrator), Therapies Department, Royal United Hospital, Bath, BA1 3NG.

Email: vanessarubery@nhs.net

Tel: 01225 824292

**ACUPUNCTURE IN
PREGNANCY**

When: 9th April 2016

Where: Chertsey, Surrey

When: 1st Oct 2016

Where: Available to host
(Northern venue)

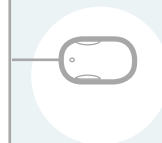
With: Cheryl Mason

Contact: www.physiouk.co.uk/
cheryl

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It gives me the best advantage in the professional marketplace.

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Physiotherapy Research Foundation

Research Awards 2016

The **CSP Charitable Trust** is pleased to announce the **Physiotherapy Research Foundation (PRF)** award scheme this year. The trust is now accepting research applications for funding in 2016.

Scheme A

*for experienced
researchers*

**Up to £150,000
available for
research
projects**

Scheme B

*for novice
researchers*

**Up to £25,000
available for
research
projects**

Scheme B

**Paediatric research funding
for novice researchers**

Up to £25,000

of funding in the area of
paediatric non-acquired brain
injury and paediatric cerebral
palsy, available for one
research project

The deadline for outline applications
is **12 noon, Friday 11 March 2016**

Guidance notes and outline application
forms for each scheme can be found at:
www.csp.org.uk/prf

The CSP Charitable Trust
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Supporting the advancement of
physiotherapy education and research



Recruitment



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- Neurology
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- Respiratory
- Surgery / ITU / HDU
- Cardiac Rehabilitation / Vascular
- Women's Health
- General Inpatients
- Learning Disabilities
- Mental Health
- Oncology / Palliative Care
- Orthopaedics



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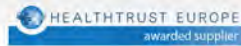
AtlantisMedical.co.uk

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PHYSIOTHERAPIST REQUIRED

Location: RMAS, Camberley, Surrey

Pay: £26,041 - £34,876

Hours: 37.5



MINISTRY OF DEFENCE

We are looking for an experienced Band 6 musculoskeletal physiotherapist to work at the Royal Military Academy Sandhurst.

This prestigious academy is the home of officer training for the British Army and generates around 600 newly commissioned officers every year.

An exciting opportunity has arisen for a motivated, enthusiastic and experienced physiotherapist to join our team. You must have excellent interpersonal skills and work well in a busy department.

Successful candidates must have CSP and HCPC registration. Military experience would be an advantage but not essential.

For any enquiries regarding this post please contact:

cathy.keeling435@mod.uk

Apply online at:

www.civilservicejobs.service.gov.uk

Closing date: March 2nd 2016

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Band 6 £26,302 - £35,225 + relocation expenses where appropriate
Full time, 37.5 hours, permanent

NHSGGC is Scotland largest Health Board and one of the largest NHS organisations in the UK. We offer leadership opportunities to develop your skills in leading change and supporting junior staff and with support from peers and Team Leads there will be an expectation to lead on service development and lead projects to improve patient experience. These posts would be of particular interest to applicants with a specialist interest in a range of areas e.g. movement disorders and Dementia to allow the continued development of a highly specialist team of staff.

You will provide direct clinical care, which encompasses Physiotherapy assessment, treatment and management of patients within the specialist area of Medicine for the Elderly. There are 3 hospital sites in Clyde, The Royal Alexandra Hospital in Paisley, Inverclyde Royal Hospital in Greenock and the Vale of Leven Hospital in Alexandria and you will be expected to be able to work on each of these sites, bringing your experience and knowledge to each.

It is expected that you will rotate to the Hospitals allowing a different focus at each hospital within the specialism of Medicine for the Elderly e.g. Day hospital, Older Adults Assessment Unit, Elderly Rehabilitation Wards.

Education to degree level with current registration with the HCPC and evidence post graduate experience in a relevant setting and experience of supervising staff and students is essential. You will be expected to have skills and knowledge through the competency framework and relevant peer contact.

These posts require PVG Scheme Membership/Disclosure Scotland Check.

For more information please call Alistair MacKinnon AHP Team Leader - Dept of Medicine for the Elderly (DoME) on 0141 314 7072.

To apply visit www.jobs.scot.nhs.uk and search for for reference number 40985G.

Closing date: 17th February 2016.



jobescalator.com
from the Chartered Society of Physiotherapy

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Job Escalator provides:

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1 x Physiotherapist (College)**

(Equivalent to Band 6/7 dependant on experience and qualifications)

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Hours: 37.5 hours per week / 52 weeks

Holidays: 25 days + bank holidays (holidays to be taken outside term-time)

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Requirements:

Candidates for this role must have a recognised Physiotherapist qualification, be registered with the Chartered Society of Physiotherapists (CSP) and hold a registration with HCPC. It is essential you have experience of working as a Physiotherapist with children and / or young people with profound and multiple learning disabilities and complex physical impairments.

To apply please visit:

<http://www.seashelltrustcareers.org.uk/Vacancies>

Closing Date: February 24th

We value diversity and are committed to equal opportunities. Disabled candidates who meet the minimum criteria on the person specification will be guaranteed an interview. Our charity is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all staff and volunteers to share this commitment. As part of our safer recruitment policy, successful candidates will be required to undergo an enhanced DBS check and full references will be taken





Annual Representative Conference

2016 Manchester
14/15 March

What is ARC?

ARC is an opportunity for the CSP's members to come together for two days to discuss and debate matters of importance to members, the services they offer and the health and welfare of the community. Those who attend are present as representatives of the stewards and health and safety reps, Regional Networks and Country Boards, Professional Networks, Students, Associates and equality and diversity and retirement networks.

Why is ARC important?

- It's your group's opportunity to have its say and influence CSP policies and direction e.g. on professional practice, employment issues, health service delivery, learning and development, equality and social policy
- CSP is committed to follow up on all motions passed by a majority of delegates.

How can you be involved?

- Write a motion to give your group's opinion of what CSP should do
- View the motions on the website each year and discuss views with your group and other members.

What do I need to do and when?

- September - November: discuss potential ARC motions.
Agree which motions you are submitting with the chair of the group and then draft the wording.
- October: if you need final advice on the wording of your motion you can contact Louise Walker at: walkerl@csp.org.uk or Elaine Sparkes at: sparkese@csp.org.uk
- 4 December 2015 noon: MOTIONS must reach CSP at: arcmotion@csp.org.uk
- 8 February 2016 noon: RECEIPT OF NOMINATIONS FOR ARC REPRESENTATIVES names of member representatives (and reserves where appropriate) must reach CSP events unit at: arc@csp.org.uk on the correct form.
- 24 February 2016: TRAINING DAY in CSP, London for ARC delegates
- 14&15 March 2016: attend the ARC CONFERENCE in Manchester.

Find out more at: www.csp.org.uk/arc

Private work available

GREAT OPPORTUNITY FOR A PART-TIME, FLEXIBLE MUSCULOSKELETAL PHYSIOTHERAPIST and also a community physiotherapist to join a friendly, busy clinic in London N14. Suit local person with excellent clinical and interpersonal skills. In-house CPD. Please send CV and covering letter stating availability to: info@oakwoodphysio.co.uk

NW LONDON BOOST PHYSIO seek a full-time employed and part-time physio to join our friendly team of 18. We have four high street clinics specialising in outpatient musculoskeletal and orthopaedics See: www.boostphysio.com Please email your CV to: info@boostphysio.com or call for a chat on tel: 020 8201 7788.

MUSCULOSKELETAL PHYSIOTHERAPIST REF: ADPN001 22,000GBP to 25,000GBP Connect Physiotherapy, Tyne and Wear (North East) Full details on: www.jobscalator.com

LIVERPOOL Would you like a truly rewarding job, where you can make a difference to peoples' lives? Full-time, part-time physiotherapists required working in occupational health environment with established team. Good musculoskeletal skills essential, OH experience an advantage. Excellent salary and CPD budget. Enquiries with CV to: stuart@sunrehab.co.uk

ESTABLISHED MIDLANDS PRACTICE requires self-employed physiotherapist to join professional multidisciplinary team. Strong links with local sports clubs. Excellent deep tissue/sports massage skills required and desire to assist clinic expansion. Hours to suit with expectation to work some evenings and Saturdays. CV to: nicky.shearer@hotmail.com Further details call tel: 07530 183831 www.footsteps-clinic.co.uk

SPORTS/REHABILITATION THERAPIST Ref: SWEXRHB001 18,000GBP to 21,000GBP Connect PHC, South West Essex (South West) Full details on: www.jobscalator.com

CHELMSFORD, ESSEX Self-employed physiotherapist required for part-time evening and weekend work (two

evenings with or without Saturday) in busy practice. Applicants must be able to build and manage a musculoskeletal caseload. Referrals will come from GP's, consultants, medicolegal companies and from clients directly. Excellent manual therapy skills are required. Ideal for MACP or similar style physiotherapists. Good communication skills are essential to deliver high levels of customer service along with the ability to work well in a team or as an individual. Please send CVs to: infofarrellphysiotherapy@gmail.com or contact tel: 01245 615051.

WINCHESTER Part-time hours available in busy sports injury and physiotherapy clinic. Daytime and evening shifts needed. Ideally five years qualified and must be experienced in musculoskeletal conditions. Email enquiries and CV to: winchesterphysio@btconnect.com

EXPERIENCED MUSCULOSKELETAL PHYSIO REQUIRED for one or two evenings a week plus some Saturdays. Pay dependent on experience. Regular in service training. Please send CV or for more information email: physio@waterlaneclinic.co.uk

EXETER AND TORQUAY, WESTON SUPER MARE AND CLEVEDON Part-time opportunities for independent manual therapists possessing positive and enthusiastic approaches towards patient care, to join our team. Download the full information pack from: www.amsphysio.co.uk/careers

PART-TIME MUSCULOSKELETAL PHYSIOTHERAPIST with Framework Clinics, Stirling. Salaried permanent position with varied role. Minimum three years experience. Active training programme. Contact: morag.fraser@btconnect.com

SENIOR PHYSIOTHERAPIST – SWINDON (Honda Factory) RehabWorks have an exciting opportunity for a senior physiotherapist based within the Honda Factory in Swindon. The successful candidate will receive a competitive salary, excellent benefits in a supportive and friendly environment. This is a full-time position working on a shift rota system. For more information please contact: hr@rehabworks.co.uk Website: www.rehabworks.co.uk

TEAM LEAD – MANCHESTER, SLOUGH, GLASGOW, LONDON (Four positions) RehabWorks have four separate exciting opportunities for experienced physiotherapists to manage friendly teams in our Manchester, Slough, Glasgow and London centres. These roles will be 40 per cent managerial and 60 per cent clinical with flexible working hours and comprehensive training and development. Excellent rates of pay plus enhanced benefits! For more information please contact: hr@rehabworks.co.uk Website: www.rehabworks.co.uk

NUNEATON, WARWICKSHIRE Part-time physiotherapist required for two evenings per week, hours to be negotiated. Please send enquiries and/or CV to: info@abbey-physiotherapy.co.uk

OPTIMISE NEUROTHERAPY CENTRE (www.optimiseneurotherapy.com) are looking to recruit an experienced neurological physiotherapist to join our team based in Crawcrook, Gateshead in the North East of England. Full and part-time posts considered. Acquired brain and spinal cord injury caseload, outpatient and outreach settings. Competitive salary, flexible working and training opportunities. For more information or to apply, please email your CV to: reception@optimiseneurotherapy.com

CHIPPENHAM, WILTSHIRE Full/part-time, permanent/self-employed basis Physio Plus, Chippenham, is looking for a highly-motivated, enthusiastic and innovative musculoskeletal physiotherapist to join their team. This part-time position has an opportunity for the appropriate candidate to be full-time after a probationary period. You will provide a high quality service to outpatients and musculoskeletal patients, assessing, planning and delivering individual treatment programmes. An interest in women's health is desirable but not essential. With excellent working conditions and ample time to treat patients, Physio Plus gives the ideal candidate opportunities for high quality professional development, working as part of a dynamic and creative team Salary is dependent on experience, please submit CV/covering letter to Andrew Baldwin at: info@physioplus.org.uk

NW LONDON/HERTFORDSHIRE

Bodybalance Physiotherapy and Sports Injury Clinic require experienced and talented sports and musculoskeletal physiotherapists for multiple full-time or part-time positions. Great working conditions, interesting patient mix including sports, acute musculoskeletal and ortho. Fun, friendly workplace with plenty of opportunities to shine. Excellent remuneration for the right person, plus CPD, mentoring, gym memberships, etc. Contact us for more details: jobs@bodybalancephysio.com.

BIRMINGHAM: EXPERIENCED ELDERLY CARE PHYSIOTHERAPIST REQUIRED

for up to three days per week. Can be flexible on day/hours. CV/enquiries to: jane@neuro-therapy.co.uk or call tel: 07906 810832 for further details.

LURGAN, NORTHERN IRELAND Full-time physiotherapist required for busy private clinic. Excellent salary and flexible working hours. HCPC and CSP registered essential. Email CV to: jonathon@activetherapyclinic.co.uk

MNC ARE LOOKING TO RECRUIT A FULL-TIME NEUROLOGICAL PHYSIOTHERAPIST

(band 6/7 equivalent) (Manchester neurotherapy centre/neurological teaching centre) www.mncweb.co.uk Are you a dynamic and enthusiastic team player? Do you want to work in an environment where you have the time to listen, rather than simply hear what your patients have to tell you? Would you like support to challenge your own potential in order to help your patients fulfil theirs? Working at a recognised centre of excellence, the successful candidate will have opportunities to develop their clinical skills through our formal clinical supervision programme led by advanced Bobath tutors. Regular opportunities for joint working/peer supervision with other experienced team members with expertise in Feldenkrais, Pilates, hydrotherapy and complex presentations. Postgraduate Bobath experience essential ie. three week basic Bobath course. We are interested to hear from candidates with other post graduate qualifications. Contact: admin@mncweb.co.uk or tel: 0161 793 0003.

NEWCASTLE-UNDER-LYME, STAFFORDSHIRE

Experienced musculoskeletal physiotherapist (minimum five years qualified in outpatients) required by friendly, well-established private physiotherapy practice for negotiable part-time hours on a self-employed contract. Caseload is musculoskeletal. Applicant must have excellent manual therapy, rehabilitation, clinical reasoning and interpersonal skills and the ability to work independently as part of a small practice. Person specification: competent, conscientious and trustworthy. Acupuncture qualification an advantage but not necessary. Must be HCPC and CSP registered with enhanced DRB. Contact Ceri at: c.parsons123@btinternet.com

SOUTH WALES Part-time, self-employed musculoskeletal physiotherapist required to join friendly and expanding private practice, based in various clinic locations throughout South Wales. Please send your CV/enquiries to: nicky@go-physio.com >



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NORFOLK Full or part-time experienced musculoskeletal physiotherapist wanted for established private clinic. Hours will include evenings and weekend work. Mixed case load private, AposTherapy, insurance, occupational health, and NHS. Manual skills essential, acupuncture desirable. In house training and CPD budget available. Please send your CV to: office@jeffordcentre.com

WE ARE RECRUITING FOR FULL AND PAR-TIME MUSCULOSKELETAL PHYSIOTHERAPISTS

to join our Darlington team at Virgin Care. We are looking for dynamic and motivated physiotherapists with excellent communication skills and an innovative and flexible approach. You must have experience of working as a physiotherapist at Band 6 or equivalent and experience of working within an outpatient setting. Contact: jackie.bendle@virginicare.co.uk for further details.

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“A Jedi uses the Force for knowledge..”. Are you passionate about getting people back to fitness? Do you want something to really challenge you clinically? Is so, you could be who we need. A rare opportunity to join our team of three musculoskeletal physios that needs a fourth at our thriving physiotherapy practice in Bingley, West Yorkshire. Interested are you? Contact us you must. Use the Force and send us a letter that tells us why we should consider you to join our team over all the others that have applied to: jacqui@bingleyphysio.com

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(two to three hours each) per week neuro/elderly care in north London. Apply with CV and covering letter to Michelle Stevens at: vacancies@eastfinchleyclinic.co.uk

NW LONDON www.nwlphysio.co.uk

Are you a skilled musculoskeletal physiotherapist who is also willing and

able to do home visits when necessary? We are looking for a self motivated, holistic, caring physiotherapist to join our team. We offer in service training and mentoring guidance, a modern up to date clinic and support from our administration team. Car owner essential. Please send CV and covering letter to: clinic@nwlphysio.co.uk

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We are currently looking for musculoskeletal physiotherapists to join our expanding team. Well-established private practice now also treating NHS patients through the AQP service. We will consider full-time or part-time (including evenings and Saturday morning availability). Jobs available throughout our Lincolnshire based clinics (depending on your location). This could include Lincoln, North Hykeham, Gainsborough, Louth, Market Rasen and Navenby to help with our ever-increasing patient case load. If you are interested, please send your CV and any questions to Jane Seabrook at: jane@lincolnphysioclinic.co.uk

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BRISTOL AREA Part-time musculoskeletal physio required for 15 hours per week. Must be qualified five years minimum and happy to work alone in a GP surgery. Please email your CV to: sue@prospectphysiotherapy.co.uk

LECKEY, LISBURN, NORTHERN

IRELAND Physiotherapist – permanent position, part time and flexible working also considered. £25-35k. This is a fantastic opportunity for an experienced physiotherapist to utilise their skills in an innovative manner by supporting the technical research manager in activities related to research and development which will help drive clinical and service innovation. By providing expert opinion and practical therapy skills into the research, design and development process, your knowledge will be at the heart of the Leckey products we produce. You will champion the perspective of the product user, supporting the design team with expert practical knowledge related to paediatric physiotherapy practice and products. A minimum of four years' post-registration experience is required and current registration with a professional body. Please email CV and covering letter to: recruitment@leckey.com or contact Emma Hanley on tel: 028 92600750 to discuss this role in confidence.

PART-TIME PHYSIOTHERAPIST

WANTED Ten hours per week (negotiable) working for the Wessex Multiple Sclerosis Therapy Centre in Warminster. Excellent interpersonal skills required to fit in with this friendly team working for a small successful charity in fully equipped gym. Neuro experience essential, full CSP membership required. Please contact Rosie Eliot for further details on tel: 01985 217728.

LONDON/ESSEX BORDER Experienced musculoskeletal physiotherapist required, on a self-employed basis. Must have minimum of five years' experience. CSP/ HCPC registration. Flexible part-time hours and days. Electrotherapy and acupuncture experience advantageous. Please send CV to: ruthy.c11@hotmail.co.uk

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Practice for sale

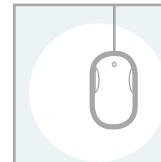
2016: A NEW YEAR – A NEW OPPORTUNITY Long-established, busy physiotherapy practice based in Berkshire for sale. Owner looking to retire and may

consider partnership with the right person. This thriving practice is averaging 10 per cent annual growth over the past four years, and still has further potential. Offers in the region of £125K For further detail contact: clinicsale@fastmail.fm

Business opportunity

ASSOCIATE/PARTNERSHIP

Opportunity in Dorset. A vibrant physiotherapy clinic in Dorset, which also hosts a team of complimentary practitioners, is seeking an associate to fill the role of a retiring partner. The role would require an experienced musculoskeletal physiotherapist undertaking a caseload of both private and NHS patients in the clinic and GP surgery locations, with some administrative responsibility. The successful candidate would be making a long term commitment and succession offers the opportunity of purchasing the retiring partners' shareholding. Enquiries to: stuart.piddock@thewimborneclinic.com Tel: 01202 841000.



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ThreeMinutes

Judith Cochrane

Support worker Judith Cochrane earned a special CSP award last year for extending her comfort zone in her work with people with haemophilia in the Belfast area

What did the award mean to you?

I was delighted to be awarded the 21st Anniversary CSP Associate award in December. I am very thankful to my colleagues for nominating me and the other assistants who 'taught' me the job over the past 16 years. Recognition of my work has also highlighted the overall great work the haemophilia team does and the support they have given me.

Tell us about your day job

I work alongside the multidisciplinary teams in the Haemophilia Comprehensive Care Centre in Belfast. My job involves working with inpatients, outpatients and domiciliary visits. I assist the lead physiotherapist in the rehabilitation of patients through patient assessment, patient education, patient treatment, hydrotherapy support, audit, research, stock management and equipment checks. A large part of my job involves assisting with the adult and paediatric clinics. The physiotherapist carries out the patient's annual musculoskeletal (MSK) screening and I record all the data (similar to how a dental nurse works alongside the dentist). During clinic I also replace faulty or worn equipment, arrange appointments, prioritise who we need to see and issue relevant questionnaires.

It sounds like you go the 'extra mile' for patients and colleagues?

This was a new post in the area. This meant that I have been able to develop the role. I observed gaps where I thought I could put my skills to use. I was given the opportunity and support to take on new roles. We recognised the need to make our teaching sessions with the children fun so I have been developing games and puzzles to keep their interest and to educate them at the same time.

Our patient group will be attending clinics for life and I think it is important to keep a good rapport with the patients and parents.

If I can do anything to help them along the way I try my best. The skills of the team are new to me and I am interested to learn from them and assist them in any way I can.

What keeps you going?

The team I work with are very encouraging and keen to try new approaches when appropriate. I have been given the opportunity to attend conferences and

courses where I was able to network with patients and other health professionals. It is an exciting time to be working within the haemophilia team as, in recent years, there have been advances in the treatment available to the patient group. They are now encouraged to participate in activities they were previously unable to do. This calls for a change in mindset and practice for both patients and health professionals. I look forward to the days ahead and the opportunities they bring.

What's your next step?

I plan to keep producing resources to be used to educate our children in a fun way and to keep them interested in looking after their health. Hopefully, in the future, I can get some more training to enable me to take even more of an active part in our patients' annual MSK screening and also to equip me to be able to deliver exercise programmes to our patient group. I am keen to try new approaches in my workplace – it keeps the job interesting, exciting and enjoyable.

Any tips for associate members seeking to widen their goals?

For 13 years I was content with what I was doing but for the past three years I am really enjoying what I do and it's all thanks to redeployment. It is not something I actively sought but, alongside my fellow associates, one of us had to move. With their agreement I took the opportunity to take the step on to a new career path.

Don't be afraid to move out of your comfort zone in order to achieve your goals. In moving to somewhere new you challenge yourself to look in a fresh way at your job. Be aware of needs in the service your team provides and don't be afraid to be the one to aim to find a solution to that need. Seek out a mentor who is willing to assist you to achieve your goals. **FL**

Judith Cochrane is a physiotherapy assistant at the Haemophilia Comprehensive Care Centre, Belfast City Hospital



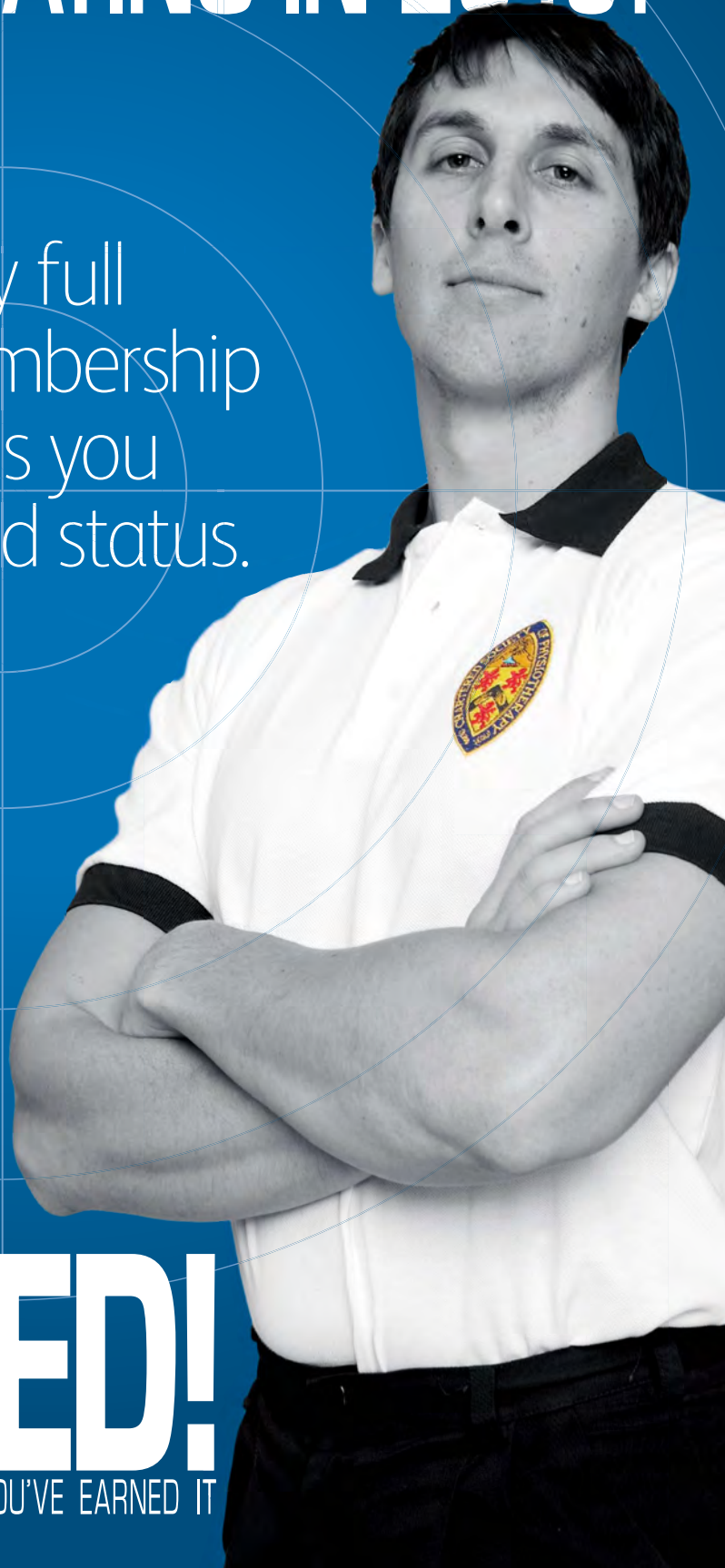
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