

Frontline

THE VOICE OF PHYSIOTHERAPY

15 October 2014
VOL 20 NO 18



Working for Atos?

Find out about a new approach **24**

Safe staffing

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First class service in France **22**






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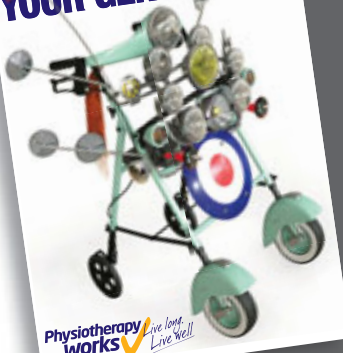
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PROFITING FROM INSPIRATION

COMING UP WITH A BIG LUNNY BUSINESS IDEA IS ONLY THE FIRST, AND OFTEN THE EASIEST, STEP.

DANIEL ALLEN

PHYSIOS WHOSE ENTREPRENEURIAL STREAK COULD REAP DIVIDENDS

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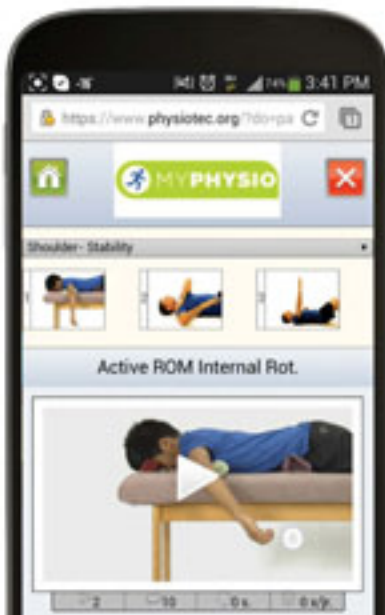
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Got a news story or idea for Frontline?

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

Want to send us a photo?

Use our dataseed photo service rather than email. For details see 'photographs' at: www.csp.org.uk/ideasforfrontline

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Members have access to the CSP's quarterly peer reviewed journal, *Physiotherapy*.
www.csp.org.uk/journal

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**Frontline**

is your magazine. Make the most of it!

Published 21 times a year, *Frontline* is your way of keeping in touch with the Chartered Society of Physiotherapy and physio-related news, views and features. It also offers you an opportunity to have your say about the issues that matter most to you. We welcome your letters, emails and ideas for issues you'd like to see covered.

The next issue of Frontline is out on 5 November 2014

Until then, you can keep abreast of the CSP work and physio-related news:

- **Log in** to get the most out of our website, with all you need to know about physio-related issues, including latest news: www.csp.org.uk
- **Look out for** interactive CSP (iCSP) a member-only networking site giving access to closed clinical forums, where you can exchange views with your peers. www.csp.org.uk/icsp
- **Check out** the weekly Physiotherapy News emailed direct to you. For more details, see: www.csp.org.uk/physiotherapynews
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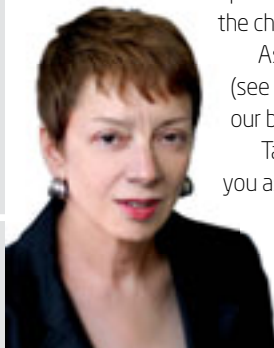
Rising to the challenge

These are interesting times for CSP members. We've just come through the political conference season with glowing colours, as the item on page 12 shows. To have physiotherapy mentioned by two major parties is a coup and reflects the hard work going on behind the scenes on members' behalf.

Meanwhile, some of you have been celebrating Older People's Day – as our front cover of an initiative on a London bus shows. Nothing speaks louder than members showing what the profession can do to help improve people's lives. Physiotherapy works: the challenge is to build that understanding among others.

As we went to press, our annual conference started in Birmingham (see page 8/9). You can read more about this exciting event – one of our biggest yet – online and in the next issue of *Frontline*.

Talking of challenges, we're looking forward to seeing as many of you as possible at the marches and rallies for fair pay and more on Saturday 18 October. Visit: www.csp.org.uk/18oct

**Lynn Eaton**

managing editor *Frontline* and head of CSP member communications

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NARROW PERSPECTIVE

I write about two articles involving Cwm Taf University health board (CTUHB).

The first article reviewed waiting times from referral to treatment for all NHS physiotherapy services in Wales, based on statistics published by the Welsh government. CTUHB was the worst performing health board, and I felt it insinuated that physiotherapy staff were under-performing. Here lies the danger of looking at figures at face value. Did you think to question: are these like for like services? How many physiotherapists are there per head of population? What are the differences in demographical data between these areas? I am not debating the accuracy of the data, however comparing services, covering very different geographical, and socio-economical types is not fair.

The most recent article speaks volumes in its brevity: 'Mid Glamorgan hospital suspends physiotherapy service'. First, I

would like to correct the use of 'wait-in clinics' as this should have said 'walk-in clinics'. Second, I understand that the closure of any service is noteworthy - but the article lacks any context. Have other services in England and Wales had articles published in *Frontline* over small community hospital closures?

CSP member, CTUHB

Frontline replies: *In supporting CSP members in their workplaces, we are keen to report situations affecting physio staff, whatever their setting. We welcome information about what is happening in your area.*

Our intention was not to de-motivate physio staff but to report on what appeared to be two important issues: the closure of a hospital and waiting times. Members can comment on articles or add information via the CSP website, and can also submit letters to Frontline, as this reader has done. Finally, we have corrected the term 'walk-in clinics' on the online version of the article. Thanks for pointing out the error.

BRILLIANT ARTICLE

I read the dyslexia article (page 22, 3 September). I am a child of the 60s, a left hander who was labelled as being 'word blind' in my infant school.

A diagnosis of dyslexia followed. I was encouraged to use my right hand - to no avail - and my habit of writing right to left across the page was broken. All my life I made compromises to cover up my dyslexia as I had grown up believing the taunts that I was thick and stupid. However, it was

only at the start of my NVQ that I let those forbidden words from my own mouth. I completed my NVQ in care with mobility and movement endorsements and won a City and Guilds medal for excellence.

I went on to become an assessor and then an internal verifier. In 2005 I was nominated by an NVQ candidate for a strategic health authority Mentor of the Year award and was the overall winner.

I am truly excited about the learning possibilities and support now available to all and thank you for a brilliant article.

Amanda Barfield

CARING AND SHARING

Thank you for supporting me as a finalist in the businesswomen's awards in north west England ('Physio in final round of Enterprise Vision Awards').

I was the only physiotherapist among the six finalists. The award was presented to a lady teaching children to cook.

It was a valuable opportunity to speak to a variety of audiences about how physiotherapy can transform lives. I specialise in working with tightness and scarring after surgery, accidents and radiotherapy.

Especially in these difficult times, we must remember what a positive difference we bring to people's lives. We must look out for opportunities to tell people what we are doing every day. Remember that however hard our NHS circumstances become, the 'magic' that can occur within the crucible of physiotherapy is ours to share with each individual.

Leah Dalby



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YOU'VE ADDED...

Responding to an online article titled 'Royal Society for Public Health surveys "healthy conversations"', stellaf said:

• I am a paediatric physio and regularly have these conversations with my patients. Just a few thoughts on what I say ... girls tend to drop out of exercise earlier than boys and I encourage them not to just think of 'school PE' type exercise but think more broadly of any activity that keeps them active.

I also empathise with them that they have an awful lot more temptations in the way of opportunities to eat unhealthy food than I ever did when I was their age. This makes it difficult for them to establish healthy eating behaviours.

Having read a news item in *Frontline* titled 'Physios provide emergency aid in Gaza', eddyhowes said:

• I am very interested in how you get

on the UK International Emergency Trauma Register of British medical and health professionals? If anyone has any ideas, that would be appreciated.

Frontline replied: *If any physiotherapists are interested in joining the register they should visit the UK-Med website (<http://uk-med.humanities.manchester.ac.uk>), or contact Peter Skelton for more information. Email: peter.skelton@hi-uk.org*

A news item titled 'Physio awarded £741,000 to research abdominal massage for patients with MS' prompted two comments: vitks said:

• Research is required in physical therapies to help patients remain in control.

And Sue Hallam commented:

• Well done Doreen and good luck with the study.

You can comment on articles from this issue of *Frontline* online. CSP members can log in at: www.csp.org.uk/frontline and then go to the 'current issue' section. You'll also find icons to recommend articles to other members, Facebook 'like' *Frontline* or tweet articles. Comments posted online may be printed in shortened form in the Talkback section of *Frontline*.

Burning Question

CSP experts give you regular updates on employment-related issues. Got an issue you're worried about? Ask your steward/student rep or, if you don't have one, contact the CSP. View previous columns at: www.csp.org.uk/burningquestions

Does my CSP insurance cover me for teaching Pilates classes?

If you hold the 'full practising' category of CSP membership your CSP professional and public liability insurance (PLI) covers all activities that the CSP determines are within the overall scope of UK physiotherapy practice. Exercise classes with a physiotherapeutic purpose, including the prevention or management of physical inactivity-related illness or health impairment, are within the scope of the profession.

So long as you advertise and deliver the classes as a physiotherapist, you will be covered by your PLI. You will need to ensure that you carry out an appropriate risk assessment and continue adhering to Health and Care Professions Council standards, such as keeping adequate records. For more information, email: paservice@csp.org.uk Tel: 020 7306 6666.

This is intended as general information only and does not replace individual advice

www.csp.org.uk

iCSP

iCSP offers a number of opportunities for you to contribute to discussions within your network. Go to www.csp.org.uk/icsp to sign up for ones that interest you. To follow these debates enter the 'find' code.

SIM man for on call training

Network: Respiratory care

Flavour: An exciting opportunity to use a new training tool is discussed.

Comments: 9 replies at 1 October

Find: qq438

Postural orthostatic tachycardia syndrome

Network: Neurology

Flavour: An interesting discussion on how a diagnosed clinical condition will affect a patient's future career.

Comments: 7 replies at 1 October

Find: qq439

Tricky post-traumatic BPPV case

Network: Vestibular rehabilitation

Flavour: Can you help with a challenging patient case?

Comments: 7 replies at 1 October

Find: qq440

Postural management help

Network: Learning disabilities

Flavour: A spinal scoliosis case is featured and help is required to with various sleep component. Nothing has worked so far.

Comments: 11 replies at 1 October

Find: qq441

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Go to www.csp.org.uk/password and tell us your email. We'll immediately email your details to you

NHS mega tender goes to NHS-led consortium

The largest single competitive tender for NHS clinical services has been secured by a consortium led by a NHS provider organisation.

UnitingCare Partnership has been selected out of three contenders as the preferred bidder for a five-year, £800 million contract to provide older people's healthcare and adult community services. It will cover Cambridgeshire, Peterborough and parts of Northamptonshire and Hertfordshire.

The partnership is a consortium of Cambridgeshire and Peterborough NHS Foundation Trust with Cambridge University Hospitals NHS Foundation Trust, the East of England ambulance service and MITIE, a private sector homecare provider, among other local businesses.

CSP members affected by the tendering process had gone through a 'really tough time over a long period of uncertainty about their futures', said senior negotiating officer Neil Lark. 'I am sure they will be relieved that they will remain employed by the NHS.'

'The CSP will try to ensure members are fully involved in any changes that affect them as staff and their patients.'

Daisy Collins, CSP steward said: 'We are pleased the contract is staying within the NHS but look forward to understanding the full detail of the preferred bidder's plans.'

'WE ARE PLEASED THE CONTRACT IS STAYING WITHIN THE NHS BUT LOOK FORWARD TO UNDERSTANDING THE FULL DETAIL OF THE PLANS'

Daisy Collins

Highlighting the positive role of Cambridge University Hospital's local unions in the process, CSP regional steward Kim Gainsborough, said: 'We are delighted with the outcome.'

The possible privatisation of NHS services through the competitive tender process - costing the clinical commissioning group £1 million and involving bids led by private companies Care UK, Capita, Circle, Optum, Serco and Virgin - was opposed by a public campaign involving local people and union members, including Ms Gainsborough.

For more information:
www.csp.org.uk/nhschanges
Gary Henson



Simon Hadley

Hip and knee pack wins award

An orthopaedic team, which includes clinical specialist physiotherapist Vicki Cattell, has won a British Medical Association patient information award. The team, from Guy's and St Thomas' NHS trust in London, received an innovation award for a multimedia recovery pack designed for hip and knee replacement patients. 'Our bespoke patient information was central to this ambitious initiative and was designed to help achieve its key objectives,' Ms Cattell told *Frontline*.

15 October 2014



SOMETHING TO ADD?...
go to www.csp.org.uk/icsp

£££
BRITAIN
NEEDS A
PAY RISE

SEE YOU ALL ON 18 OCTOBER!

The CSP hopes to see as many CSP members as possible on the marches and rallies on Saturday 18 October in Belfast, Glasgow and London to send a really loud message that we want fair pay for quality physio services. CSP marchers are encouraged to tweet on the day @thecsp #Oct18

Karen Middleton: stop physiotherapy 'sleepwalking into obscurity'

Every physiotherapist must act to ensure a future for the profession, Karen Middleton told more than 1,000 delegates on the opening day of the Physiotherapy UK 2014 conference.

'In one sense there couldn't be a better time for our profession,' the CSP's chief executive said in her Founders Lecture to mark the society's centenary.

Among other things, physios can reverse injury, enable people to live with long-term conditions, integrate health and social care and help people back into work.

'And we're very good value,' she told delegates in Birmingham on 10 October.

But she warned there is no guarantee of a rosy future: 'My greatest fear is that this profession will sleep walk into obscurity - that is that you and I allow our profession to wither and die.'

Signs of decline are already visible,

she said. These include the lack of student training places, the fact that only people who pay can routinely self-refer, and the controversy over physical contact with patients.

'And, my personal bugbear, we have hard-earned clinical autonomy, so how dare commissioners and planners decide how many times we see a patient, or whether we treat or just give advice,' she said.

Every CSP member can tackle the issues facing the profession, as well as embracing innovations and diversity, she told delegates.

Ms Middleton concluded: 'My commitment to you is that I will do my very best to ensure our profession continues to transform lives and to empower people to live as independently as possible.' Reports from Physiotherapy UK see www.csp.org.uk/news-events/physiotherapy-uk
Gill Hitchcock

Artwork marks 20 years of physio at Keele uni

Sue Rees, the CSP's chair of council, has unveiled an artwork commissioned to celebrate 20 years of physiotherapy education at Keele university.

The ceramic tile work, by local artist Phil Hardaker, was installed in the school of health and rehabilitation to commemorate a special anniversary

event held in September.

Pictured with the artwork are Keele's dean of health Andy Garner; former heads of school Marilyn Andrews and Marion Tidswell; Ms Rees; the current head of school Cath Bucher; and professor healthcare research Julius Sim.



Frontline - www.csp.org.uk

Apply to be NICE fellow or scholar

The CSP is encouraging physios to put themselves forward as candidates for the annual National Institute for Health and Care Excellence (NICE) fellows and scholars programme.

NICE is seeking 10 fellows, who are usually senior health and social care leaders. They act as ambassadors for the institute for three years and help to implement its guidance.

In addition, applications are open for 10 one-year scholarships, which allow health and social care professionals to undertake projects that aim to improve the delivery of care or evidence-based practice.

The deadline for applications for the 2015 programme is 14 November.

CSP professional adviser Carley King told *Frontline*: 'If you're passionate about implementing research into practice, this could be for you.'

'Becoming a NICE fellow or scholar is an excellent continuing professional development opportunity.'

Earlier this year Will Carr, a clinical specialist in falls prevention at Cheltenham General hospital in Gloucestershire, started a one-year scholarship. He leads a project examining compliance with NICE guidance on falls prevention for inpatients.

'Being part of the NICE scholarship programme has been an incredibly positive experience,' said Mr Carr.

Robert Millett

• NICE fellowship and scholarship programme:
www.nice.org.uk/get-involved/fellows-and-scholars

Physio and NICE scholar
Will Carr



NICE puts exercise

The CSP has welcomed the focus on exercise in the latest NHS guidance on MS care as an 'opportunity' for physios.

People with MS should be encouraged to exercise, according to updated guidance from the National Institute for Health and Care Excellence (NICE).

It says patients should be advised that aerobic, balance and stretching exercises may be helpful in treating MS-related fatigue.

NICE calls for people with the condition to receive supervised exercise programmes involving moderate progressive resistance

training and aerobic exercise.

And it recommends that every person with MS has a comprehensive review of their care at least once a year and that multidisciplinary teams, including physiotherapists, should oversee the care they receive.

About 100,000 people in the UK have MS, with symptoms usually appearing first in younger people.

CSP professional adviser Carley King told *Frontline*: 'This is a complex client group with a variable presentation of symptoms.'

'As physiotherapists, we have an expert knowledge and unique understanding about the

CSP launches campaign t



15 October 2014



'MOTIVATIONAL INTERVIEWING' E-LEARNING TOOL LAUNCHED

'Motivational interviewing in brief consultations' is a free online learning tool on the BMJ Learning website. Linda Hindle, the lead allied health professional at Public Health England, which commissioned the e-learning module, said many clinicians will find it useful. It explains how motivational interviewing can be used in clinical practice and how it can improve patient outcomes.

at heart of MS guidance

multifaceted nature of MS and how this may impact on an individual's ability to exercise safely.

'This is why we must position ourselves as the lead professionals in delivering exercise to this patient group.'

Paul Cooper, a consultant neurologist and chair of the guidance development group, said current standards of MS care vary greatly across the UK.

'We want to ensure that throughout the country people with this distressing

NICE says people with MS should have regular support from healthcare professionals

and disabling disease have prompt access to specialists who understand their needs and can help improve their condition,' he said.

Gill Hitchcock

- *Multiple sclerosis: management of multiple sclerosis in primary and secondary care* www.nice.org.uk/guidance/cg186



Charlie Milligan

to keep older people active and mobile

The CSP says its first UK Older People's Day on 1 October was a huge success, with almost 300 members taking part.

Activities were held across all four countries, with physiotherapy staff handing out the society's Physiotherapy works: We're talking about your generation leaflet (right).

CSP head of press and public relations Jennie Edmondson said: 'Thank you to everyone who contributed to the day, however big or small, to promote the role physiotherapy plays in keeping older people living longer and living well.'

Some of the highlights included Cardiff physiotherapist Debbie Richardson and Pip Ford, CSP public affairs and policy manager for Wales, joining events by Age Connects and Age Cymru. They visited a local leisure centre, GP surgery and care home to talk to older people.

In Scotland, physio Janet Thomas and her colleagues at Whitefield day hospital in Dunfermline held a Ryder Cup-inspired Wii golf session for patients. Edinburgh private physio Julia Hume ran a gentle exercise, strength

and balance class. In London Stephanie Bruggemann from Sutton and Merton community services' falls prevention service spoke at a local event.

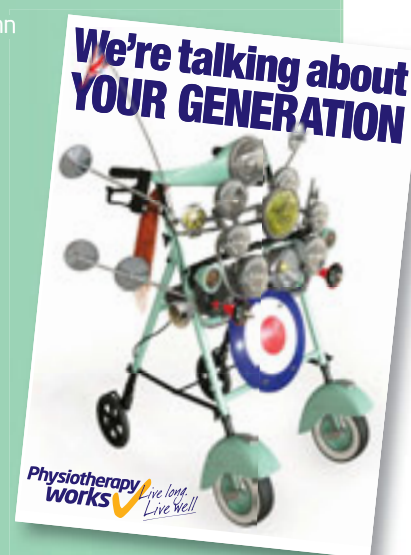
Many members also took to social media using the #PhysioWorks hashtag to promote the day, and @physiotalk hosted a tweekchat on frailty.

Members can download the leaflet, to help educate older people about the importance of keeping active, at csp.org.uk/yourgeneration or phone the CSP on 020 7306 6666 for hard copies.

The society's involvement in the day was all part of its Physiotherapy Works initiative. See page 42 for more on our local Physio Work events.

Michelle Carnovale

- *As our cover shows the theme in London was getting older people back on the buses after a confidence-knocking event.*



PHYSIO LEADS ACCREDITED TELEHEALTH SERVICE

A physiotherapy-led telehealth service has become the first in Europe to receive accreditation status from the European Code of Practice for Telehealth Services.

The team from East London NHS trust are led by physiotherapist Raguraman Padmanabhan (front row, second from the right), who works as a community matron.



Retired members could be
healthwatch

The CSP is encouraging members – particularly those who are retired – to use their physiotherapy expertise as volunteers for their local consumer championing organisation, Healthwatch.

Elaine Curtis, a retired CSP member who has been a volunteer for nine months, said becoming a volunteer is a chance to ‘get your message across and still feel useful’.

Local Healthwatch organisations were set up in 2013 to gather and represent the public’s

Healthwatch volunteer Elaine Curtis

views on health and social care services in England.

‘We want to encourage as many members as possible to get involved with local Healthwatch organisations,’ said CSP associate member officer Catherine Smith.

‘But we would particularly like retired members to see the value in putting themselves forward for this.’

Since joining her local Healthwatch, Ms Curtis, who retired from physiotherapy in 2001, has worked on the engagement and experience committee of Torbay and Southern Devon

Physio features on the agenda at political party political conference season

Political leaders drove physiotherapy up the agenda during this year’s political party conference season, including a call by David Cameron for more physiotherapy to prevent illness.

In an interview for Radio 4’s influential Today programme, the prime minister said the health service needed to be ‘preventative’. He went on to say ‘we need more physiotherapy and more helping people with things that make them ill in the first place’.

In Birmingham, at the Conservative party conference, Jeremy Hunt addressed a fringe meeting about relieving pressure on the NHS.

The health secretary responded to a question from CSP chair of council Sue Rees at the event, organised by the College of Emergency Medicine, the Foundation Trust

Network and the Royal College of Physicians.

She asked for Mr Hunt’s view on better access to community rehab. Replying, he said the current level of access to both rehab and physiotherapy ‘sums up the problems in the health and care system.’

‘As we move to personal care and personal control, we need to look at commissioning someone’s entire health and care needs, moving away from the false economies of not providing people with the care they need, when they need it.’

His opposition counterpart, Andy Burnham, in his speech to the Labour party in Manchester,

promised to recruit new teams of physios, home care workers, occupational therapists, nurses, midwives and to put GPs at the centre of home care.

The CSP’s director of marketing and communications, Rob Yeldham, said it was key that these very senior politicians were all talking about rehabilitation and all mentioning physiotherapy as part of the solution:

‘It’s critical for the profession that, not only do we influence at a local level, which is part of what the Physiotherapy Works programme is about, but we also create an overall environment





Experts on

health and care trust.

She said she has been contributing to decisions on issues including library services for care homes and learning disability service funding.

Retired physiotherapy staff can bring valuable experience to local Healthwatch, because they understand health and care services and are also equipped with good social skills, according to Ms Curtis.

CSP representatives have been regular contributors to meetings of the national body, Healthwatch England, since its formation in 2012.

Louise Hunt

• To contact Elaine, phone: 01548 521 391
or email: eratthehaybarn@uwclub.net
www.healthwatch.co.uk

la during season

where key politicians – who are also making decisions about funding and policy – see that physiotherapy is really important.’

The CSP’s policy and public affairs officer for England, Ben Wealthy, said the three politicians were acknowledging that the UK needs a different model of health and social care in which prevention is central.

‘But they were also thinking about money,’ he said. ‘And keeping people out of hospital.’

‘So there was quite a lot of consensus, but where there is less is around the how and the funding. Labour’s £2.5 billion Time to care plan has been challenged by suggestions that the money wouldn’t be available.’

‘And even when additional funding is being promised, it’s unclear when it will be delivered.’

Gill Hitchcock

Frontline - www.csp.org.uk

Future leaders find a slot in Welsh minister’s diary

Two physiotherapists have spoken of the importance of engaging with politicians, after spending an ‘inspiring’ day shadowing the Welsh health minister Mark Drakeford.

Band 7 physios Tracy Jones and Rachel Crayford were invited to spend time with the minister as part of Cwm Taf University health board’s clinical leadership programme.

Ms Crayford told *Frontline*: ‘It was clear that he understood the important role allied health professionals play, and the impact physiotherapists can have in supporting the healthcare agenda.’

The day, on 25 September, included a 30-minute question and answer session with the minister and visits to events. The physios accompanied him to the launch of the Academi Wales clinical leadership conference and the opening of a new eye clinic at the University Hospital of Wales, both in Cardiff.

Both said they found the day ‘informative and inspiring’ and that they gained a greater understanding of how health boards work with the government.

‘Physios can play an important role by providing feedback,’ said Ms Crayford.

Robert Millett



From left to right: Physiotherapist Rachel Crayford, Welsh minister for health and social services Mark Drakeford and physiotherapist Tracy Jones



SOMETHING TO ADD?...
go to www.csp.org.uk/icsp

Physio input 'vital' to paperless

Physios can play a key part in the drive to make the NHS paperless by 2018, delegates at a conference in London heard on 1 October.

The message was delivered by NHS England digital champion Phil Koczan, who said: 'I think it's vital that we get engagement from physios and other allied health professionals (AHPs).'

In terms of engaging people nationally, Dr Koczan said the national clinical chief information officers' network includes people from a range of clinical backgrounds. The network, which was launched in January, aims to improve health services through informatics.

But Dr Koczan said physiotherapists should also be involved in local e-records projects: 'Part of it is working locally

within the trust on what sort of information physios would like access to, and on how can they help with the development and implementation of the system.'

Dr Koczan said some trusts were making very good progress towards achieving a paperless NHS by 2018, but that others lagged behind.

'We need to make data capture as simple as possible for clinicians, as close as possible to the point of care, but also give clinicians the tools to do their job without creating a lot of extra effort,' said the practising GP.

'That is one of the reasons why general practice has been so successful – the computers were designed to improve the job that we do.'

Eventually, patients would be able to email and Skype clinicians,

NHS England digital champion Phil Koczan called for physios to help set up systems that capture patient data



CSP raises concerns over low fees for

The CSP has expressed concern that physiotherapists in England and Wales could receive lower than expected fees for writing medical reports in whiplash cases.

Accredited experts, including physios, should receive a fixed fee of £180 following government reforms to reduce the number and costs of whiplash claims.

But the society has warned that whiplash experts will receive a greatly reduced fee if claimants commission their reports through medical reporting organisations (MROs).

These are organisations that provide evidence and medical experts for law firms and insurance companies.

Rachel Newton, the CSP's interim head of public affairs and policy development, told *Frontline*: 'When reports are commissioned through MROs the end fees for carrying out an assessment and producing a report can be as little as £40 to £50, which can have an adverse effect on their quality.'

The society has responded to the second phase of a Ministry of

Justice consultation on whiplash claims. It has suggested that steps should be taken to ensure that MROs do not dominate the market.

It has also welcomed a government proposal to prevent solicitors engaged in whiplash cases from employing MROs that they own.

The second phase of the consultation includes the introduction of an independent online hub, with the working title of MedCo. People needing a medical report to support a whiplash claim will



NHS CHOICES GETS 41 MILLION VISITORS

NHS Choices has seen a near fourfold increase in visitors over three years to 41.4 million in July. The figures indicate a steep rise in usage, from 10 million visitors in July 2011, 19 million in July 2012 and 33 million in July 2013. CSP professional adviser Stuart Palma said: 'Having clinically accurate information can empower patients to be more responsible and make healthier choices.'

ss NHS agenda

but those channels must be safe and effective, Dr Koczan said. Though NHSmail works 'incredibly well' in the NHS, he pointed out that clinicians need to be aware that outside the health service, the system is not secure.

Clinicians who email patients should find a way to maintain security, or make sure patients are happy with a 'less than ideal system'. Security and confidentiality should not create barriers, said Dr Koczan, who called for a 'secure as it needs to be' approach.

Sean Brennan, an informatics consultant to the NHS and conference chair, said physiotherapists should be involved from the start of developments in electronic documentation.

He is currently advising East

Lancashire Hospitals NHS trust as it introduces e-prescribing and medicine administration, e-case notes and clinical portals.

'In my project we involved AHPs throughout. Physios have just as much entitlement to look at electronic records as any clinician and they need to be a part of the project team,' he said.

Commenting after the event, Steve Tolan, CSP head of practice and development, said: 'The simple choice for us is to design how we record patient interactions, or be made to use systems designed for us and which may be less suitable.'

The conference, titled 'Electronic document management in healthcare', was organised by Healthcare Conferences UK.

Gill Hitchcock

Physio team wins at HSJ Value in Healthcare Awards

Physiotherapy staff were among the winners at this year's Health Service Journal (HSJ) Value in Healthcare Awards.

A multidisciplinary intensive care team from University Hospital Southampton NHS trust triumphed in the clinical support services category. Judges were impressed by the team's success in mobilising patients at an early stage.

Zoe van Willigen, clinical lead physiotherapist for the service, told Frontline: 'As therapists we always ask ourselves "Can this patient walk today, ventilated or not?" and work back from that. This means that patients get the highest level of rehab possible, every day of their intensive care stay.'

'And the fact that we have physiotherapy technicians implementing this service means it is extremely cost effective too.'

The HSJ awards, which celebrate outstanding efficiency and improvement in healthcare, were announced at a ceremony in London on 23 September. Visit: www.hsjvalueawards.co.uk/home
Robert Millett

The winning team from University Hospital Southampton NHS trust (left to right): therapy technician Shirley Wynne, Dr Rebecca Cusack, clinical lead physio Zoe van Willigen, therapy technician Leanne Gallagher, senior physio Nikki Collings, senior sister Sarah Herbert and Dr Dominic Richardson



whiplash reports

be able to visit MedCo and receive a list of accredited experts or MROs.

The society said in its consultation response: 'The CSP's preference is that individual MedCo search results offer a choice of named practitioners. If MROs need to be included it is essential that this is as a choice, along with individual named practitioners.'

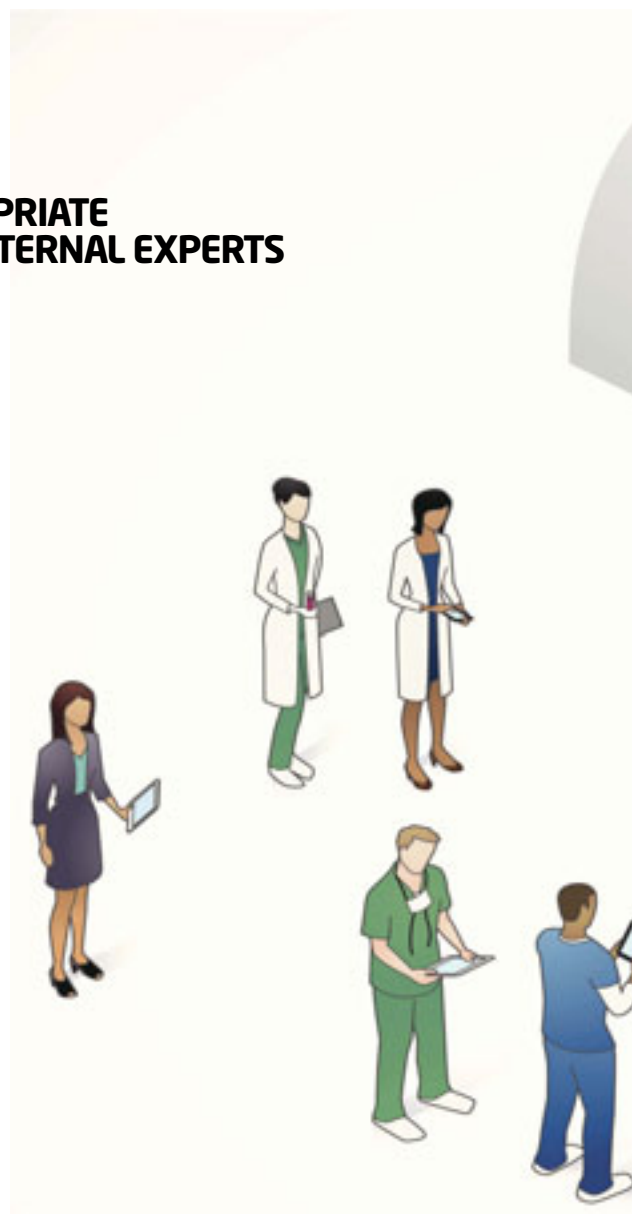
Robert Millett

CSP response to the consultation:
www.csp.org.uk/consultations



THE THORNY ISSUE OF WHAT CONSTITUTES AN APPROPRIATE STAFFING LEVEL IS BEING TACKLED BY THE CSP AND EXTERNAL EXPERTS

Getting it right



The Francis review of services in Mid-Staffordshire NHS Trust commented on the need for appropriate staffing levels. As a result, the spotlight has fallen on what is the 'right' number of clinicians for a certain number of patients. The focus had been particularly on nursing care, but it is important that physiotherapy engages with the issues.

There are no simple answers to safe and effective staffing, and no 'ideal' standard staff:patient ratio. Requirements vary depending on patient need, service environment and wider staffing issues.

To help members decide what's right for their service, the CSP has commissioned an external team of experts to help.

Project consultants will be developing an online tool and guidance for members to consider safe and effective staffing for their

patients, within their service context. The work will be completed by April 2015.

In our Q & A, CSP professional adviser Rebekah Middleton, who is leading the project, explains more.

Why is the CSP doing this?

Physiotherapy is patient-focused by nature. Every contact with our patients must be based on quality, compassionate care, delivered in ways that are best suited to meeting patient needs. The project will give members a clear way to identify and describe the physiotherapy resources needed to deliver a safe and effective service. The approach will uphold a genuine focus on the patient and enable individual teams to take into account a breadth of factors that influence the quality of patient experience and outcomes – from the extent and nature of patient need and

dependence, the service delivery model, to the staff skill mix.

Will it look at the independent sector as well as the NHS?

Yes. The project will take into account the full diversity of physiotherapy, including settings, sector and service delivery methods, such as seven-day services. The approach will also be inclusive of the four nations. Member involvement will be key to shaping, informing, testing and refining the results. Members will be kept abreast of ways in which they can get involved as the project develops.

Will it mean we can argue for more staff?

That depends. The central outcome of the project will be an evidence-based approach to ensuring a safe and effective staffing



SOMETHING TO ADD?...
email us at talkback@csp.org.uk

15 October 2014



mathisworks/Getty Images

level for your service. The on-line tool will allow you to input details for your service and will help you to appraise the significance of factors, so you can tailor how you make the case for how your patient needs can be met. The tool will enable you to factor in variables about your patients, such as level of levels of dependency, service environment, such as ward layout or unit size, and staff factors, including skill mix and building in time for leadership and management activities, service evaluation and research, CPD and practice education. The combined perspective will give a rounded view of the staffing required.

How will I be able to use the tool?

The tool will support you in

investigating the unique nature of your patient group, service environment and team. It will help you to take stock of your current level of resource and think carefully about how best to use it, or if you need to make the case for increased resources.

If you feel the staffing levels are inappropriate, it may be time to speak up.

You will be able to use the tool to do this from an informed position, and by relating staffing needs directly to safety, ensuring high-quality, compassionate care, and optimising patient outcomes, value and impact. **fl**

Links

www.nice.org.uk/Guidance/SG1
www.csp.org.uk/node/433530

WHAT ARE THE ISSUES?

There are five main themes within the project:

1 Physiotherapists have a key role to play in ensuring the safety of patients in all settings and optimising patient outcomes in cost-effective ways. But there isn't a simple link between staffing levels and patient benefit. Much has been said recently about staff:patient ratios, especially in acute ward settings and for nursing. But there is no magic number to be applied. Adequate staffing levels are only part of the answer.

2 Physios are experts in team-working and every interaction with patients is about collaboration. Many factors impact on patient care and outcomes. Our approach will embrace these, avoiding simply focusing on staff inputs and tasks.

3 We must raise our profile and recognition of the value of our contribution to patient care. There is a risk, particularly as a result of media attention on doctors and nurses, that the contribution of physiotherapy and other allied health professions is overlooked. The National Institute for Health and Clinical Excellence safe staffing programme and draft legislation in Wales, for example, centre on nursing only. The project will strengthen our participation in debates on safe and effective care and support members to make the case for resources to meet patient needs in clinically and cost-effective ways.

4 The staffing of a service needs to balance skills, sufficient number of staff and the outcomes to be achieved. The resources that are developed will put us all in a stronger position to present what is needed for a cost-effective and clinically effective service.

5 it is essential to have a workforce that is sustained at appropriate levels and which is 'future-proofed' against possible changes in care provision, such as providing more services in a person's home. These factors are an integral part of the solution for patient safety long term. Education, research activity, professional development and leadership activities are also key to quality standards and patient safety.

See also: www.csp.org.uk/staffinglevels and our news story, *CSP to offer staffing advice*, page 8 *Frontline*, 1 October 2014

18 Physio findings



IN OUR REGULAR ROUND-UP OF RESEARCH THAT'S RELEVANT TO PHYSIOTHERAPY STAFF, **JANET WRIGHT** LOOKS AT NEWLY PUBLISHED STUDIES AND A CSP INITIATIVE

MENTAL HEALTH



67photo/Alamy

Activity eases the burden of schizophrenia

Physical activity is important for people with schizophrenia and can help to relieve their symptoms. But programmes need to be led by professionals and take the patients' other health conditions into account, say physiotherapists who specialise in mental health.

'This is a complex group,' said one specialist. 'You wouldn't go and take a non-mental health patient group that were overweight,

diabetics, at risk of a heart attack and let them start exercising without an assessment.'

Brendan Stubbs, of the University of Greenwich, and colleagues sent a survey to 480 members of the International Organisation of Physical Therapists in Mental Health.

Most of the 151 who responded believed physical activity was important, and three-quarters thought

MEMBER BENEFIT

Tell other physios what you're up to

Would you like other CSP members to know about your work? Some findings you've made, or an interesting project you're involved in?

Now's a chance to present your work to Physiotherapy UK 2015, on 16 to 17

October next year at the BT Convention Centre, Liverpool.

The CSP's scientific committee is inviting members to send in an abstract - a brief summary of a report.

You don't have to be an academic researcher or lecturer.

This is open to members working in all areas, including clinical practice and management. As well as traditional

scientific reports - original data collected by the authors - organisers will welcome 'special interest reports' on topics such as organisation or service delivery.

'The programme has been designed to appeal to all members' professions, including those engaged in clinical practice and management, as well as those involved in education and research,' say the organisers.

They're inviting abstracts of work on any of the event's four themes; leading

Physiotherapy UK
CONFERENCE & TRADE EXHIBITION 20

15 October 2014

distress

this should be led by physios. But only 30 per cent knew of any guidelines covering physical activity for people with schizophrenia.

Programmes should be tailored to meet each patient's complex needs, said respondents.

Among the benefits of physical activity, various physios noted, were that patients became more relaxed, more capable of living 'in the here and now'.

Physiotherapists, the authors say, 'have the necessary knowledge and skills to lead and oversee the successful delivery of physical activity in patients with schizophrenia in clinical practice'.

Stubbs B et al. The Assessment, Benefits and Delivery of Physical Activity in People with Schizophrenia. *Physiotherapy Research International* 2014; <http://dx.doi.org/10.1002/pri.1592>

're doing

change; research into practice; workforce development; and public health, prevention and wellbeing.

If you are successful, you will have the choice of either speaking about your work or displaying it in the form of a poster, with photos or other graphics as well as text.

The closing date for submitting abstracts is 19 January 2015. Find out more, including guidance on writing an abstract, at: www.physiotherapyuk.org.uk/presenting/2015-abstracts

Frontline www.csp.org.uk

Comments & Conclusions

- Obese people with binge eating disorder felt more fatigue and musculoskeletal pain after a walking test than obese people without the disorder. Researchers advised clinicians to take account of this, along with depression and low self-esteem, when developing exercise programmes for binge eaters. **Vancampfort D et al. *Disability & Rehabilitation* 2014; <http://dx.doi.org/10.3109/09638288.2014.942000>**

- Patients are reported to follow instructions better and recover more fully if they take part in making decisions about their treatment. But a study of back-pain patients found that physiotherapists' eagerness to treat the problem made it hard to share decision-making. Researchers called for further work to focus on implementing shared decision-making. **Jones LE et al. *European Spine Journal* 2014; <http://dx.doi.org/10.1007/s00586-014-3187-0>**

- Liver injuries caused by herbs and supplements taken for health increased from seven per cent to 20 per cent of all liver injuries caused by medicines, herbal remedies and dietary supplements in the past decade, a US study found. Middle-aged women had the most fatal or serious injuries. **Navarro VJ et al. *Hepatology* 2014; <http://dx.doi.org/10.1002/hep.27317>**

- Surgery on a broken heel is no more effective than conservative treatment such as splinting, a randomised controlled trial of 143 patients has

found. Both groups recovered slowly and, of the operation group, 19 per cent developed infections and 11 per cent needed further surgery.

Griffin D et al. *BMJ* 2014; <http://dx.doi.org/10.1136/bmj.g4483>

- The effects of stress hormones change as we age, making older people more likely to suffer from infections after painful events such as bereavement, researchers from the University of Birmingham have found. **Vitlic A et al. *Immunity & Ageing* 2014; <http://dx.doi.org/10.1186/1742-4933-11-13>**

- Drinking milk may slow the progression of knee arthritis in women, though apparently not in men, a study of 2,148 patients suggests.

Lu B et al. *Arthritis Care & Research* 2014; <http://dx.doi.org/10.1002/acr.22297>



PHYSIO FINDINGS...
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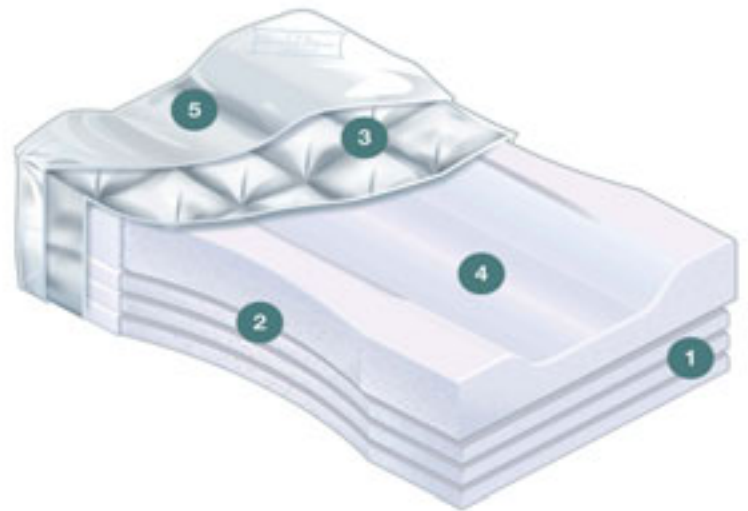
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TATLER Magazine

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and would have no hesitation recommending this
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just want a first class product ”
Dave Washington
Practice Manager Sportssage Physical Rehabilitation

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Woman Magazine

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Dr Michael Gould
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In Person...

Live and on stage

September and October are particularly busy months for conferences. I seem to attend at least two a week to speak, listen, or ask questions and, of course, to promote physiotherapy to others.

Public speaking is a key skill. We've all sat through presentations that have been inspiring – and ones where we've quickly become bored.

But presenting is a skill we, as clinicians and leaders, need to develop. The opportunity often starts at an undergraduate level as we learn to present to other students. As clinicians we then move on to presenting case studies to clinical colleagues. We may then move to larger groups and finally to a conference audience.

However, whatever the level, the process you go through in preparing for and delivering a presentation is pretty much the same. I will share with you some of my top tips but must stress this is a skill that needs formal training to develop. The best training I had was from actors at the Old Vic, although the training itself was agony. You need to practise and to garner honest feedback.

Preparation is everything. What is the conference about? Who is the audience? Who else is speaking? What sort of venue will it be and what technical support is available? The technology support people are your best friends, so work with them.

And, of course, what are you going to talk about and for how long? Balance what you think, or

PRESENTATION SKILLS CAN COMPLEMENT YOUR CLINICAL ONES, SAYS CSP CHIEF EXECUTIVE KAREN MIDDLETON

know, the audience want to hear about and what you want to convey.

Once you have your subject matter, think about the 'story' you want to tell. It needs to have a beginning, middle and an end. What is the narrative?

At this point I start jotting down broad points I want to make and then gradually fill it out with content. I tend to type out the full speech, then break it down into prompt cards and then, perhaps on the day, not even use them. It just depends on the nature of the lecture or presentation. Reading verbatim notes is fine in certain circumstances but not in others.

If you use PowerPoint slides be careful that they add to what you are saying and don't distract the audience. Ensure they are readable from a distance. It is crucial that you say more than what is on the slides – or else why not just send your presentation to members of the audience?

Then practise. If this is new to you, practise out loud as you need to hear yourself speak. And always check your timing, remembering that

you may well speak quickly if you are feeling nervous.

On the day itself, try to go to the venue in advance and get the feel of the place and the technology you will be using.

And then there is you. We all get nervous in these circumstances, in fact this is necessary to ensure you have sufficient adrenaline to perform, but it is important to control those nerves. Remember that you

know more than anyone in the room about the specific subject you are going to talk about and that the audience is there to listen to you.

Dress for the occasion as this shows you respect your audience. Ensure you have your opening line ready but be prepared to respond to anything said in the introduction.

And then off you go!

Do make eye contact with people in the audience, if you can. Do look up and out and try not to look back at your slides. Use pauses, change your rate and tone of speaking and repeat key points.

And one thing about humour - do use it appropriately but don't force it.

The most important thing about presenting is to be yourself. Never bluff the answer to a question: be prepared to say you don't know, but will find out.

Presenting is a performance and, once mastered, it will help in so many other areas of your professional life. *fl*

You can email Karen at: middletonk@csp.org.uk

VIEWS & OPINIONS

in perspective

Vive la France!

Helen Mooney has been delighted by the support of physiotherapists after having her second child.



Last month I began re-educating my pelvic floor. Unlike some women I was aware that I had one and had located it once or twice in the past when doing Pilates.

The birth of my eldest daughter four years ago made me think about it again. Back then when I left the London NHS hospital where I had given birth I was

given a leaflet explaining the various exercises I should do in a bid to get the somewhat elusive and definitely under-exercised muscle back into shape.

Yet, back

home sleep deprivation, sore nipples and a crying baby meant that my pelvic floor was largely forgotten. Four years on, however, and having followed my partner across the channel to live in France our youngest daughter was born in June. I found out that as part of my postpartum treatment I would be prescribed 10 sessions of *la rééducation périnéale* with a physiotherapist.

This is designed to retrain the muscles of the pelvic floor, and is one of the cornerstones of French postnatal care. It has been paid for by French social security since 1985.

The idea is that by doing so

women will be able to have children again more quickly and will avoid the problems related to serious incontinence when they are older.

So I start the sessions while on maternity leave, and with baby in tow the physiotherapist explores the state of my pelvic floor.

I am pleased when she decides that it is *moyen* or average. And that's when the hard work starts. There are two methods for the re-education itself, manual and biofeedback and most physios use a combination of the two.

Mine largely uses the latter which means using an electronic pelvic floor re-educator hooked up to a machine

advice line

Some members working in the NHS will be asked to make choices on their pensions arrangements.

Decisions, decisions

During the next few months letters will be sent out to 500,000 NHS pension scheme members in England and Wales asking them to make a choice about whether to move their current pension membership into the '2008 section' of the scheme. Members in Scotland will follow the same exercise later in 2015.

It will only be those CSP members who are currently a member of the '1995 section' of the NHS pension scheme and have no protection, or partial protection (known as tapered protection), who will need to make a choice. Members who were more than 10 years away from their expected retirement date in April 2012 have full protection and will not need to make a choice. The reason for this exercise is that the new 2015 NHS pension scheme arrangements automatically increase the normal pension age for many staff. This

means that when members originally made a choice they did not know that their retirement age would be extended and they may wish to re-evaluate their choice not to move to the 2008 scheme.

From April 2015 the retirement age in the new NHS scheme is set equal to the state pension age (SPA). This depends on your age: for example, if you were born in 1971 your SPA is 67, but if you were born in 1983 it is 68.

You can find out your SPA by visiting the following website: www.gov.uk/calculate-state-pension

Your decision to move into the 2008 scheme is a personal one and depends on your retirement and lifestyle plans but actuarial figures suggest that if you plan to work until 64 or beyond, and stay within the NHS scheme, you are probably better off moving to

GOT SOMETHING TO SAY?

We encourage members to contribute to these pages. For information see the guidelines at: www.csp.org.uk/frontlineideas or email: eatonl@csp.org.uk
The views expressed here are not necessarily those of the CSP



viewpoint

Get the free pelvic floor training she received from a midwife and child in France earlier this year

that records the force of my internal contractions.

I have to follow a series of on-screen exercises contracting and relaxing my pelvic floor as well as instructions from my physio. By the end of the course she says my pelvic floor is much stronger but that I should remember to continue to do the exercises manually every day (for the rest of my life!) and suggests doing so when brushing my teeth, watching television or sitting in the car at traffic lights.

In the UK incontinence figures are startling: one woman in three leaks (www.ncbi.nlm.nih.gov/pmc/articles/PMC1476070/). Yet

evidence shows that conservative management and good postnatal management is the most effective way to deal with pelvic floor issues (Cochrane review).

The French know this and it's time women in the UK had these specialist sessions on the NHS.

I did not have to pay a penny for my pelvic floor physio sessions and just when I thought I was through my doctor gave me a prescription for 10 more, this time for my abdominal muscles. With any luck I'll be wearing a bikini on the beach next summer. Well, we'll see. Vive la France!

Helen Mooney is a journalist

Arrangements, says Caran Chamberlain

the 2008 scheme. If you are likely to retire before 62 you are probably better off leaving your benefits in the 1995 section. There will be other considerations. Those members on tapered protection will need to consider the value of losing it if they move to the 2008 section. There are also other differences between the two sections to consider.

So how do members make a choice? When you receive your letter you will be directed to the online calculator on the NHS BSA pension website. You will also need a copy of your total reward statement, if you do not receive this at the same time it can be accessed via your human resources department. For more information, visit: www.nhsbsa.nhs.uk/pension and: www.csp.org.uk

Caran Chamberlain is a CSP senior negotiating officer



App offers hope

Sonia Pombo explains how a new app might help to cut people's salt intake and weight

With one adult in four in the UK now classified as obese, promoting healthy eating has never been more important. We all know that the key to a healthy lifestyle is staying active and eating healthily, but our reliance on convenient, processed foods, which contain varying quantities of fat, sugars and salt, makes it extremely difficult. Nonetheless, with heart disease and diabetes affecting so many people and costing the NHS billions of pounds each year, it's clear that we all need to make the extra effort to look after ourselves.

We can all do something to improve our health, and you don't need a nutrition degree to know what's good for you and what's not. Front of pack nutrition labelling is one simple yet effective way of encouraging people to make small changes in their diet. Many companies now follow the same labelling system, which uses colours to highlight whether your food is high or low in fat, saturates, sugar and salt. This consistent way of displaying important nutrients in your food means it's now relatively easy to understand the labels and choose healthier options.

Consensus Action on Salt and Health (CASH) (www.actiononsalt.org.uk) is big on healthier eating, as we know all too well the effects a poor diet can have on health; a high salt diet, for example, leads to raised blood pressure, increasing your chances of developing heart disease.

This is why we created a great new smartphone app called FoodSwitch. FoodSwitch is an award-winning app that allows you for the first time to scan the barcodes of your food and drink products and instantly see whether they are high (red), medium (amber) or low (green) in fat, saturates, sugars and salt. What's unique about the app is that it also searches the database of nearly 100,000 products for similar but healthier products, making it easier than ever to switch to healthier foods. The free smartphone app can be found on the NHS Health Apps Library (<http://apps.nhs.uk>) and can be downloaded from iTunes or Google Play.

As health professionals, we must embrace technology and acknowledge the potential benefits health apps can have on people's health! FoodSwitch UK is a great app to direct patients to if they are looking to eat healthier. For more information, go to: www.foodswitch.co.uk

Sonia Pombo, nutritionist, Consensus Action on Salt and Health

Time to re-assess



Barrie McKillop, Atos' clinical director for personal independence payments (PIP), is keen – understandably – to draw a line under what has gone wrong with the process in the past.

'There have been delays in the PIP process, and face-to-face interviews have taken longer than anticipated,' he accepts. But better training, 60 more assessment centres and more staff will help. And there have been delays at the Department for

Work and Pensions (DWP) end too, with unrealistic expectations from the outset.

'It's taken twice as long as anticipated to complete the reports to the required clinical standard,' he admits.

More centres to speed throughput

The priority now for Atos is to get assessments moving faster and to achieve greater throughput.

In part it will do this by opening more centres.

15 October 2014

**WILL CHANGES
AT ATOS MAKE IT A
BETTER COMPANY
FOR CSP MEMBERS
TO WORK WITH? LYNN
EATON LOOKS AT
THE INTERNATIONAL
COMPANY'S PLANS**

New opportunities

Members of the CSP work in a variety of different roles nowadays, not just the traditional NHS hospital or musculoskeletal (MSK) clinic.

A small, but potentially growing, number are taking on a relatively new work opportunity - as personal independence payment (PIP) assessors. It's just one of a number of opportunities opening up, including assessments for the new government Health and Work Service which is set to recruit assessors very soon for people off sick for more than four weeks.

About 150 CSP members are carrying out PIP assessment work, often alongside a more traditional clinical role.

Over the last 18 months, a number of CSP members who conduct assessments for Atos have said they are working in conditions that they feel are unacceptable.

Among their concerns are: the safety of physios providing these assessments; whether the level of training is appropriate for the work; and the challenges of meeting the rigorous checks carried out by the Department for Work and Pensions (DWP) when it investigates the standard of physios' assessments.

Unlike clinical work, an assessor only determines a benefit applicant's functional ability - whether they can walk a certain distance. They do not suggest treatment.

Nor do they advise on whether or not the person should be working. This

is determined under a totally separate benefit assessment - work capability assessment - which can trigger an employment support allowance. This process is totally unrelated to the PIP assessment process.

The information they provide to Atos is then sent to the DWP whose benefit assessors determine whether the individual is entitled to a disability benefit, and if so, at what level.

'We do take the concerns of members who have opted to do this work really seriously,' said chief executive Karen Middleton. 'We want to ensure the appropriate governance and training is in place for our members.'

'But I'm aware this is a really sensitive issue,' she added.

The CSP is neither encouraging nor discouraging members from working in this new role. 'I recognise that our members may need to look at a number of work opportunities nowadays, often outside traditional roles, and in many different workplace settings.'

'Despite some of the initial concerns voiced by the CSP about the change in the assessment process, our members are well placed to carry out functional assessments. That's what they are trained to do.'

CSP director of practice Natalie Beswetherick was also clear that this was an appropriate role for physios: 'We do recognise that PIP assessments are within members' scope of practice.'

She and Ms Middleton recently met Atos officials to air members' views. As a result, Barrie McKillop, Atos' clinical director for PIP, spoke frankly to *Frontline* about how things will improve.

In 2015 60 new centres, offering a total of 300 assessment rooms will go live. The first five of these were due to open last month. Staff will be directly employed by Atos.

'We don't have targets for the number of assessments they should do in a day. Obviously we are looking at capacity,' said Dr McKillop, 'but the reality is the assessment takes as long as it takes.'

But reports will need to be focused, precise and concise.

'It's in everyone's interests that this is done efficiently,' he says. 'It's not the case that a longer report is a better one.'

Training issues

Improved training should, Dr McKillop hopes, reduce the time it takes to compile clinical reports.

The physios are trained to assess a variety of conditions, not just MSK, says Dr McKillop, a medically-trained doctor.

'Many claimants have multiple medical conditions, or a combination of physical and mental conditions.'

He refutes any suggestion that they have >

26 Welfare rights

'WE'VE BEEN WORKING WITH THE DWP TO GET THE PROCESS WORKING AS BEST AS WE POSSIBLY CAN. THERE HAVE BEEN LOTS OF REFINEMENTS AND IMPROVEMENTS'

Barrie McKillop

a remit from the DWP to reduce benefit awards, but they do have targets built into their contracts with what they call their 'supply chain partners'. These include NHS and private physio clinics.

Dr McKillop refuses – initially at least – to be drawn on the exact number of days Atos expects to take from receipt of an assessment application through to referring it back to the DWP. But when pressed he reveals that the new target will be 30 days.

He is aware that one of the issues that may have slowed things down is that physios have been trying to offer clinical solutions to the person's functional limitations. What Atos needs is merely an assessment, not advice on how to improve things. Better training should help with this.

Training to improve

'We've been working with the DWP to get the process working as best as we possibly can,' says Dr McKillop, who has been with Atos for 12 years. 'There have been lots of refinements and improvements.'

Atos has decided to increase the training to reflect the demands on assessors. It will still involve a one-week online but the classroom-based course will be extended from five to eight days

Atos is also planning to increase the number of training courses available as more suppliers are identified and its new assessment centres come on stream.

The A-B-C rating

Quite appropriately, checks are made on the standard of an assessor's work. But this feedback can be a frustrating experience for physios who don't meet the required grade. They are scored on an A-B-C rating to make sure they are meeting DWP standards. If they consistently score C they are not allowed to continue as an assessor.

Again, better training from the outset should reduce the risk of C ratings.

Questions add to delays

Although assessors normally submit their report on the day of the interview, delays can occur if an Atos supervisor queries a clinical issue, perhaps because the assessor doesn't sufficiently explore someone's mobility issues and function, says Dr McKillop.

Once completed and returned to the DWP, a benefit official may have further questions, sometimes up to six weeks after the assessor saw the applicant.

Again this is a frustration for members, but one that better training from the outset should help to address.

Safety issues

Members have expressed concern at the time taken assessing a complex case (they are meant to take an hour but two is not unusual). They are also worried at their own safety when handling patients with mental health problems, whose cases often take longer.

One member worked in a clinic that had panic alarms, but only by the office door, rendering them virtually useless.

Dr McKillop says there have not been any major safety incidents with PIP claimants. Most, he says, report how positive they've found the assessment process.

'But when the file is referred from the DWP they will mark if there has been any known unacceptable behaviour before they send it to Atos,' he says. 'Anything that suggests there is a risk of violence or aggressive behaviour would be flagged to the practitioner, who should have a chance to review the file before they see the claimant.'

He adds that Atos has visited all the sites and reviewed the rooms 'to make sure it is as safe as it can be'.

AT-A-GLANCE GUIDE TO PERSONAL INDEPENDENCE PAYMENTS

- When a new benefit assessment system was introduced in 2011, it met a storm of protest from disability groups and CSP members who argued it would mean tighter eligibility criteria, more bureaucracy and delays in payments.
- Personal independence payment (PIP) replaces disability living allowance for people with long-term conditions or disabilities. It is not related to ability to work or unemployment benefit.
- PIP has nothing to do with work capability assessment, the test for employment support allowance (ESA), a totally separate benefit for people who are out of work and need financial support.
- Atos (<http://uk.atos.net/en-uk>), an international information technology services company, won the contract for both PIP and ESA assessments in Scotland, and in north east, north west, south east and south west England.
- Capita (www.capita.co.uk) won the contract for PIP assessments for the rest of the country, including Northern Ireland.
- In June 2014 a Department for Work and Pensions (DWP) report showed a serious backlog in claims for PIP. From April 2013 to March 2014, 349,000 claims were made but in only 83,900 cases were decisions reached - less than one in four.
- The National Audit Office and a House of Commons select committee have criticised Atos' performance.
- Atos pulled out early from the ESA assessments contract also because of a backlog of cases. It is understood to have made a substantial payment to the DWP for breaking that contract.

He is also keen to emphasise that there will be more training for physio assessors in how to handle claimants with mental health issues and dealing with difficult situations.

What's in it for you?

Not everyone would want to work as a PIP assessor, but Dr McKillop believes there are career benefits for those who choose to do so:

'Assessors say they really like using their clinical experience in a different setting. They have found the training structure very helpful. And they value being able to spend some of their time in face-to-face work, without being hands on.'

'It provides something different in their career, something they can take back to their day-to-day practice' **fl**

Working as a PIP assessor or considering doing so in future?
Check CSP's latest guidance at: www.csp.org.uk/pips

Masters Dissemination Award

The new CSP Research Priorities Masters Dissemination Award, financed by the CSP Charitable Trust, was set up to:

- fund members undertaking post-registration Masters research projects to disseminate their findings
- develop the evidence base in areas identified in the recent CSP project as research priorities for physiotherapy – see www.csp.org.uk/researchpriorities
- maximise the impact of research undertaken at Masters level.

To be eligible for consideration, a member should have:

- registered their Masters research project in the CSP database of research priority projects
- passed a post-registration Masters programme and been awarded Distinction, Merit and/or 65 % or over for their Masters dissertation.

Applications are assessed by the Charitable Trust's Education Awards Panel. The next deadline is **1 November 2014**.

For more information including details of how to register your project please visit: www.csp.org.uk/charitabletrust



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Getting into RESEARCH

EVERY PRACTISING CSP MEMBER IS INVOLVED IN ASSESSING RESEARCH EVIDENCE. TAKING A STEP INTO PRESENTING OR DOING RESEARCH MIGHT NOT BE AS DAUNTING AS IT LOOKS, SAYS CSP ADVISER NINA PATERSON

All CSP members - including students and support workers - are critical users of evidence. So when I was asked to write about how to 'get into research', and to encourage readers to think about going from 'using' to 'doing' research, I knew I wouldn't be short of material.

Evaluating the effectiveness of your service or your own practice is, or should be, a normal part of everyday life for anyone working in health and social care. For example, you might be benchmarking what you do using local or national guidelines, measuring the effectiveness of a particular

intervention, or changing your practice after reviewing the available evidence.

Whatever area of physiotherapy you work in, as part of a structured organisation such as the NHS or as a lone private practitioner, your responsibility to provide the best possible care to your patients, service users or clients means that you have a professional obligation to be 'into research'.

Many of you will have just come back from Physiotherapy UK 2014, having listened to great platform presenters and reviewed posters. Like any conference you attend, it will have >

made you think, taught you something new, consolidated your knowledge, and ultimately changed your practice. By being able to present your work, not only are you evidencing your professional development, but you're also increasing the profession's evidence base, demonstrating that physiotherapy works.

Support is available

As my colleague Imogen Scott-Plummer, CSP research adviser, notes: 'Abstract submissions for Physiotherapy UK doubled this year.' It is also great to know that the CSP received more enquiries from members thinking laterally about research - seeking advice about how to present findings; from quality audits, service evaluation and projects, not only randomised controlled trials.

Another colleague works for a large trust, where staff can access a range of opportunities that develop research skills, such as journal clubs, best practice, audit and research forums. They regularly produce posters and present project and research findings in a multidisciplinary setting.

If you are fortunate and work somewhere similar, where organisational processes support your development, make the most of such opportunities. Going a step further and presenting at a conference shouldn't be that daunting, you've had great practice. Down the line you might also want to share your experiences and support others who may not have had the same opportunities.

The description above may be a world away from your workplace. The responsibility may rest with you in your own time to keep up-to-date with research but even if this is the case, that



TOP TIPS

- rather than making your research 'fit', look for a conference whose themes match your research
- use the submission criteria to help you shape your abstract rationale - that's what you're being scored against
- make a note of the submission deadlines. Leave plenty of time to edit; whatever the word count it won't be enough, and leave enough time to submit via the online portal.
- Don't give up. If you aren't successful the first time, try again

shouldn't stop you. Think carefully about what's in it for your employer, focusing on the benefit it will bring to the team and organisation.

Think about what support you might need time to write up, financial support for travel, poster production, time off to present and so on. When negotiating this level of support, it is important to do

your homework - know what your employer's policies are, who to speak to, what funds are available and how to access them. If you need financial help, the CSP Charitable Trust (www.csp.org.uk/charitabletrust) has awards available. Full information about these can be found on the CSP website, but both the Conference and Presentation Award and

the Robert Williams International Award would be worth exploring.

There are a number of support routes available. The Council for Allied Health Professions Research (www.csp.org.uk/cahpr) is one example, CSP research advisers another. The iCSP research network is also thriving. If you are lucky to have formal mentoring routes at work, make the most of them as well as informal routes such as a friend or colleague who present regularly.

There are any number of books, blogs, information websites that address the process of writing and submitting.



You'll find some tips to get you started, but you'll also find links to some of articles in the box. As with the last continuing professional development article (1 October 2014), no specific activity has been suggested - simply think about your own work and what you would be interested in writing up - what would you need to do to disseminate? Make a plan: identify what you will need to do to achieve your goal. Set realistic timescales and think through solutions to any potential barriers.

And finally, give it a go! Remember if your proposal doesn't get accepted the first time, take on board any feedback and try again. Even seasoned researchers experience this.

This article assumes that you have a research topic area that you want to present. If you are reading this and you're not at that point yet, then hold that thought. A forthcoming article in this CPD series will look at 'data and its uses'.

So stick a marker in this article and come back to it later. **fl**



SOMETHING TO ADD?...
email us at frontline@csp.org.uk

15 October 2014



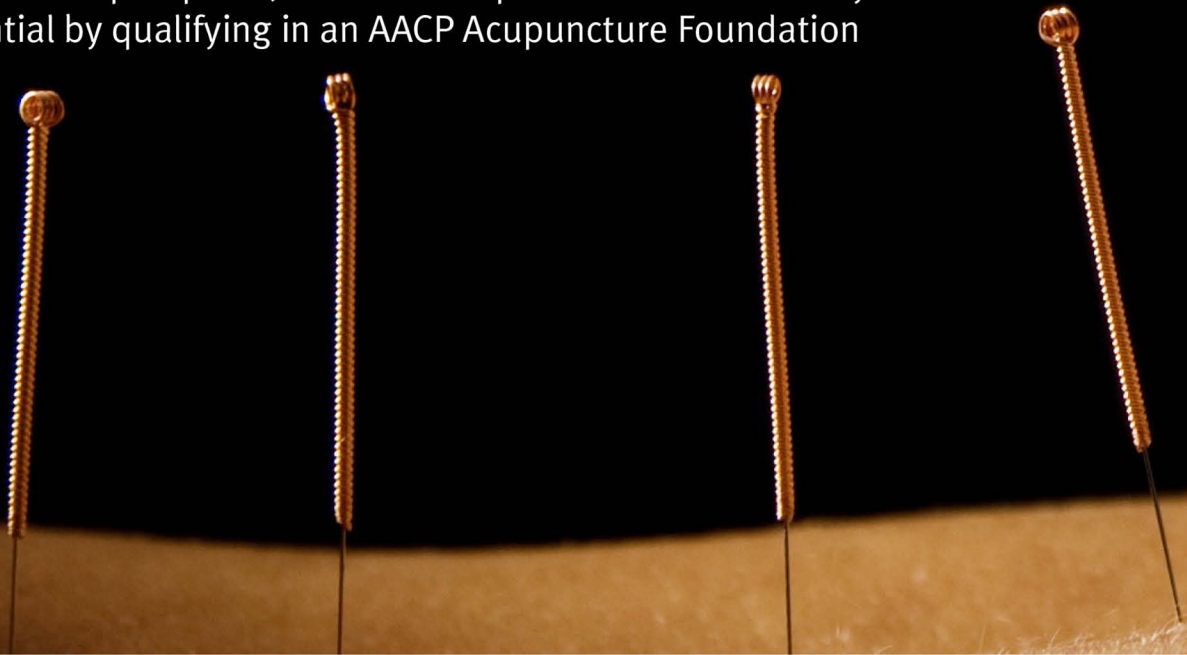
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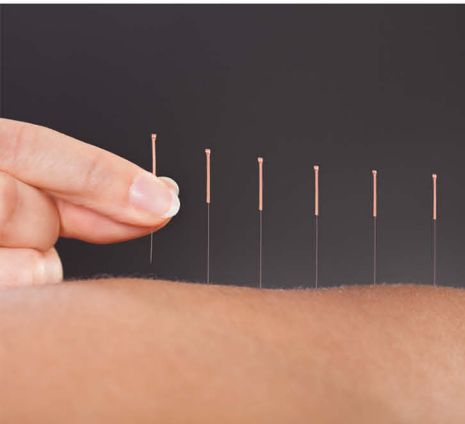
AACP Scottish Conference

Grange Manor Hotel, Grangemouth
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- Up to 6 hours of CPD

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Marketing and promoting

'We're good problem solvers,' says Cathal Malone, the physio behind MSKnote, a patient management programme for clinicians specialising in musculoskeletal (MSK) problems. 'We look at things in a logical manner - that's what we do on a day-to-day basis.'

He's explaining how he came up with the idea for the software that he hopes will transform the way health professionals assess, track and treat patients with MSK problems.

When he started working as an extended-scope physio with Sussex

Community NHS trust three years ago, staff were taking notes on paper which were then scanned into the hospital system. Administrative delays meant that when patients returned for subsequent appointments, the relevant information was not always available.

'That was the catalyst for getting into it,' he says. He also knew there was a need for a system where notes taken by clinicians, such as physios, orthopaedic surgeons and rheumatologists, were more easily shared.

'In healthcare, we're all used to

using pen and paper for taking patient notes, but that's an inefficient way of doing it,' he says. 'So now there's this big drive towards using computers for taking our notes.' But if typing skills are not up to scratch, notes may be less reliable and practitioners could be leaving themselves open to litigation as a result. 'On the basis of that idea, I thought "let's start developing something";' he says. The result, MSKnote, uses multiple-selection dropdowns and drawing functions, as well as free-text boxes, to help increase the accuracy of clinicians' notes. >

PROFITING
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**COMING UP WITH A
BRILLIANT BUSINESS
IDEA IS ONLY THE
FIRST, AND OFTEN
THE EASIEST, STEP.
DANIEL ALLEN
MEETS SOME
PHYSIOS WHOSE
ENTREPRENEURIAL
STREAK COULD
REAP DIVIDENDS**

15 October 2014



The business run by physios Ali and Chris Cowley bridges the gap between the NHS and the private sector in an innovative way.

Healthy Hydrotherapy in Bristol was set up three years ago in response to patients asking for more out-of-hours hydrotherapy.

Ms Cowley says: 'We saw a gap in the market and knew we could fill it. We decided we could dip our toe in the commercial world and set up our own hydrotherapy business.'

Mr Cowley adds: 'Alongside the initial idea and vision, we were also acutely aware of the financial difficulties experienced by the NHS, the closure of many hydro pools around the country and the fact that our local NHS hydrotherapy pool was under-utilised on many evenings.'

They pitched their idea to management at North Bristol NHS trust: the Cowleys would use the NHS pool to provide a valuable evening service for the local population; in return, much-needed income would be generated for the hospital's physio department.

Extensive contract negotiations followed to ensure both parties were covered legally and it was agreed that the Cowleys could rent the pool when it was not being used by the NHS.

There was a lot to learn, but the internet provided plenty of

business resources, and courses run by HM Revenue and Customs were invaluable. 'It took a year of hard work to set it up,' says Ms Cowley.

Since then, they have evolved and adapted to ensure clients' needs are met and that good working relationships are maintained with the trust. The business has expanded to provide hydrotherapy for a wider range of patients, on a one-to-one or affordable group-session basis, and there is now a team of physios, all with their own specialist skills.

Mr Cowley says their model is one that could become increasingly common in the NHS. 'For departments to be successful, they need to be flexible and innovative in their approach to service provision and income generation.'

LINKS

www.msknote.com

www.storycises.com

www.healthyhydrotherapy.co.uk

For CSP guidance, visit:

www.csp.org.uk/yourbusiness

Physiotherapists like Mr Malone are not uncommon: practitioners who see where obstacles to good practice lie and suggest improvements. But only a few follow up their ideas, and fewer still turn them into viable commercial propositions, not least because to do so demands a willingness to be immersed in the sometimes opaque world of business.

Mr Malone has certainly done that. 'It's been a completely new adventure and a very steep learning curve,' he says. MSKnote started as just a plain Word document, a prototype of sorts, which he adapted, developed and improved with support and feedback from trust colleagues, before he approached an IT company and asked it to turn his initiative into a computer program.

Hard work is vital

What began almost as a hobby has gradually taken up more and more of his time, including a day-and-a-half each month on a business management programme at Chichester university. 'It's taken two years, working on it every evening. It certainly takes over your life. If you have an idea and feel strongly about it, with hard work you can get there. But unless you really want to commit to something, I wouldn't advise it, especially when you're a full-time physio as well.'

That said, Mr Malone is beginning to see some attraction in perhaps one day being able to divide his time between

'SUCCESS IN THIS AREA ISN'T BY ACCIDENT'

Steve Tolan

physiotherapy and business. And the rewards could be impressive. He believes the potential market for MSKnote extends overseas.

Steve Tolan, the CSP's head of practice and development, supports the idea of physios branching out into business. A former foreign risk underwriter in the City of London, he says: 'I'm very big on promoting the idea of learning from elsewhere. Typically, people who spend their entire life in health take much of their learning from this sector, whereas, in fact, there are things to learn from other areas of work. Even the experience of running a sandwich shop does actually have an impact.'

But building a business can be a challenge for physios, Mr Tolan says. 'They don't have any core training, they may not have any experience of a commercial environment and their primary focus is on the care of patients.' Moving away from the altruistic core values of physiotherapy can feel uncomfortable.

He also warns that business success rarely comes overnight: 'Having a good idea or inventing something is only the first step – and is actually the easiest step. Making it viable and ensuring it can add value is the most difficult thing.' And that's

a problem facing all wannabe inventors, not just those with a physio background. Time and again on Dragons' Den, TV's pitch-your-idea programme, it is the products with evident and sustainable widespread appeal that win the cash. 'Success in this area isn't by accident,' Mr Tolan says.

Money is not the sole motivator

Physios who turn ideas into business success stories are rarely just motivated by money. It's often the instinct to address unmet need or a shortfall in service provision that drives them.

Wendy Joy and her business partner Jane Reynolds are the physios behind Storycises, a programme of movement skills for young children based on a story format.

The idea of Storycises is that children act out a story and in doing so exercise those skills. Results suggest that over the course of a term the exercises really do make a difference, says Ms Joy. Interest in Storycises is growing and as well as schools, children's centres, nurseries, childminders and libraries, are beginning to take notice.

But developing and marketing the business has been hard work. 'We're self-taught, so it's been a steep learning curve and we're still learning,' Ms Joy says. 'But it's going incredibly well and wherever we go we're getting a great response. For us, it worked well having two people involved because we've both got strengths and weaknesses.' *fl*

Library and Information

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www.csp.org.uk/lis

First announcement at

Physiothe

CONFERENCE & TRADE

Physiotherapy UK 2015 will showcase the latest research findings and best practice, educational and professional developments in physiotherapy. The programme brings together the work of a number of CSP professional networks, offering physiotherapy staff from a wide range of backgrounds the opportunity to hear top speakers, access new evidence to support their practice and to learn, debate and share knowledge and experiences in the pursuit of excellent patient care.

The CSP Scientific Committee is now inviting abstract submissions for platform and poster presentations which relate to this year's four programme themes:

- **Leading change**
- **Public health, prevention and wellbeing**
- **Research into practice**
- **Workforce development**

and call for abstracts

therapy UK

EXHIBITION 2015

Transforming lives, transforming practice

- Abstracts should be submitted online at www.physiotherapyuk.org.uk
- For more information and detailed guidance on the submission of abstracts go to www.physiotherapyuk.org.uk
- Deadline for entries: **19th January 2015, 12 noon.**



BT Convention Centre, Liverpool
16-17 October 2015



Robert Williams International *Award*

The World Confederation for Physical Therapy (WCPT) International Congress will take place in Singapore on 1 – 4 May 2015.

The Robert Williams International Award, funded by the CSP Charitable Trust, provides financial assistance to help members of the CSP to present papers at the Congress. A total of £10,000 for up to 10 awards is available for allocation and awards will be offered on the basis of the quality of abstracts submitted.

Applicants for the Robert Williams Award must submit an abstract for presentation to the World Congress.

The closing date for abstract submission to WCPT is 31 October 2014.

Details of the application procedure for the Robert Williams Award are available from the CSP website **www.csp.org.uk/charitabletrust** (follow the link to the RWA page).

The closing date for applications for the Robert Williams Award is noon on 7 November 2014.



The CSP Charitable Trust
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frontline

DIRECTORY

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Courses and Conferences 54

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PUBLICATION DATES

Issue date	Booking deadline
Nov 5	Oct 20
Nov 19	Nov 3
Dec 3	Nov 17

NOTICEBOARD:

This section covers CSP's work at region and country level and also offers you the opportunity to advertise your CSP recognised Professional Network event free of charge. Reunions, info exchange and obituaries are also permitted within this section. Send the information you wish to include to: directory@csp.org.uk

PLEASE NOTE: Professional Network notices are limited to 180 words

Please note The courses and conferences advertised in this section have not gone through 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.

To advertise your course call **0845 600 1394** or email: cspads@media-shed.co.uk

Sugar & Spice

You and *Frontline* go together so well - it's another classic combo!

News from the CSP English Regional Networks, branches and Country Boards

You can access more information at www.csp.org.uk/nations-regions



English networks news

The 10 English regional networks organise regional forums four times a year. All members are welcome and encouraged to attend; qualified, associate, students and retired members. As well as access to study days and conferences, getting involved with your regional network is a good way to link up with others, learn about opportunities and challenges locally and be part of the wider physiotherapy profession. Access your regional network web pages at www.csp.org.uk/nations-regions

Physiotherapy Works Locally - a UK initiative

Physiotherapy Works action for you

The Physiotherapy Works Locally events focus on the future of physiotherapy, which is in our hands. Now is a critical time for qualified, student and associate members to take action in building our future and in leading a change. It isn't going to be easy but we know that

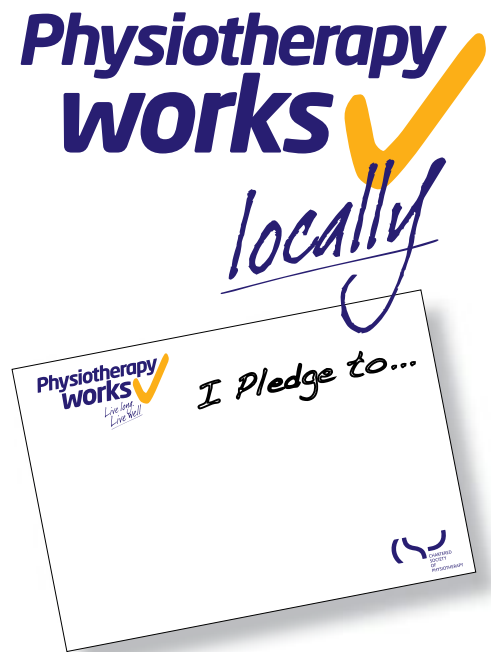
continuing with health and social care systems as they are is unsustainable. A major focus is to use every opportunity to promote what physiotherapy can do too. With all this in mind attendees at the events made pledges shown in the photos.

- If you haven't already attended an event sign up now for your free place at: <http://www.csp.org.uk/professional-union/physiotherapy-works-programme/physiotherapy-works-events-coming-you>
- Make your pledge for our official pledge wall at: www.csp.org.uk/physioworkspledge

Pledges from members in North East



Atle Karstad



15 October 2014

Pledges from members in West Midlands



Sheila Stringer



Ann Green



Omkar Sawant

Pledges from members in East Midlands and Yorkshire and the Humber



Alistair Beverley



Angela Clough



Chris Walker



Kirsty Huntingdon



Lucy Cocker



Nicola Adkin

News from the CSP English Regional Networks, branches and Country Boards

You can access more information at www.csp.org.uk/nations-regions

Development day

All of the ERNs were represented on 16 September on a development day at the CSP chaired by Beverley Harden of the South Central region. This was a dynamic day of sharing information. Karen Middleton spoke about leadership and celebrating success and emphasised the importance of nominating physiotherapists for awards. If you have any ideas of nominations please send these to your regional chair and ensure physiotherapists are recognised.

Anne Jackson updated the regions on Physio Works progress and the new web pages. ERNs had the opportunity to discuss new resources, new research with the British Orthopaedic Association, falls commissioning tool, social care briefing followed by a lively discussion facilitated by Sue Hayward Giles and Ruth Ten Hove on 1) Reducing falls and 2) the implications of the BOA research.

ARC 2015

Date: 9-10 March 2015

Place: Manchester – Palace Hotel

Initial information for ARC 2015 is being placed on the ERN iCSP site and the ARC section of the CSP website. Friday 5 December 2014 12noon – is the deadline for receipt of motions. Each English Regional Network (and Country Board) is responsible for the allocation and nomination of their representatives to ARC, with each ERN and Board being allocated three seats. If you have ideas for motions please go to your regional chairs as this a real opportunity to influence the profession

East Midlands and Yorkshire and the Humber

Joint event - Using NICE guidance to deliver quality, cost effective care

Date: Wednesday 12 November, 5pm - 6.30pm

Place: Seminar Rooms 2 and 3, Queens centre for Oncology and Haematology,

Castle Hill Hospital, Cottingham, East Yorkshire HU16 5JQ.

Twitter: [@CSPEastMidlands](https://twitter.com/CSPEastMidlands)
[@CSPYorksHumber](https://twitter.com/CSPYorksHumber)

East of England

The region enjoyed an informative and interactive meeting with a session on communication skills for the business environment, 'Selling Your Physiotherapy Service with Confidence!', from Julie Denning and Nicky Hunter. Members took part in discussions and workshops exploring how physiotherapists communicate and how this can be adapted for a more commercial purpose.

A discussion is planned for our next meeting to schedule for 2015 including study days and planning of a Physiotherapy Works roadshow.

Karen Middleton was welcomed to the September forum which promoted good discussion with constituents about the central direction of travel for the profession.

London

Older People's Day - raising the profile of physiotherapy

Older Peoples Day, on 1 October, saw the London Regional Network take to the roads on double decker Transport for London buses. On three different buses, members of the regional network covered three routes in the north east, north and south of the capital. Feedback and a report about the event from the London Regional Network core team will be in next issues Noticeboard section of *Frontline*.

The main emphasis of the day was to support older people with any concerns or problems that they may have with public transport and in particular travelling by bus. This included advice and the opportunity to practise their transfers on and off the buses. The regional network members also

ran a ferrule exchange programme as well as disseminating the new Physiotherapy Works 'Talking about your generation' leaflet, highlighting the role that physiotherapy can play in keeping older people living longer and living well.



Members who attended the events came from a range of clinical backgrounds and job roles, from associates to managers and clinical directors. Sometimes members may not necessarily feel it is their role to be doing such tasks, however, the success of the day really highlights that every CSP member has a role to play in raising the profile of physiotherapy.

What this event also provided was an opportunity for members to be active in raising the profile of physiotherapy to the patients and public, as well as decision makers. The patients and public are very often the professions best advocates. If we can influence them to understand the value of physiotherapy, as well as talk about their positive experience with physiotherapy, they can then spread the message far and wide to patient feedback groups, health and wellbeing

15 October 2014

boards in addition to many other avenues.

The London regional networks event furthermore demonstrated the work that can be done in collaboration with local links. The three London routes attended Age UK events throughout the day. Some of these events were held in collaboration with other partners such as CCGs. These are ideal opportunities to influence, engage and raise the profile of physiotherapy with decision makers and commissioners.

Taster session on MSK diagnostic ultrasound in physiotherapy

Speakers: Stuart Wildman and Rob Mast of the Ultrasound site (<http://theultrasoundsite.co.uk>)

Date: 17 November 6.30pm - 8.30pm

Place: St Leonards Hospital, London N1 5LZ
The event will include the uses of ultrasound, job roles and training, clinical case studies and a practical demonstration. Contact: Book a place at <https://www.eventbrite.co.uk/e/a-two-hour-taster-on-msk-diagnostic-ultrasound-use-in-physiotherapy-registration-13357710271>

Physiotherapy Works locally event

Date: Monday 8 December 9.30am - 4pm

Place: Citadines Hotel, High Holborn, London WC1V 6LF.

North East

Members at the very first Physiotherapy Works event have pledged to promote the profession as often as possible please see <http://www.csp.org.uk/news/2014/09/12/members-pledge-promote-physiotherapy?networkid=437> for pledges and to make your own.

Twitter: [@CSPNorthEast](https://twitter.com/CSPNorthEast)

South East

Physiotherapy Works locally event

Date: Saturday 22 November, 10am - 4pm

Place: Worthing hospital, Worthing Health

Education Centre, Park Avenue, Worthing BN11 2HR.

South West

Physiotherapy Works locally event

Date: Wednesday 2 December, 10am - 4pm

Place: Exeter Court Hotel, Kennford, Exeter EX6 7UX.

A new venue, Oaktree Arena near Highbridge, was used for the recent regional forum on 10 September 2014. This was a great way of getting some new faces from the north of the region to attend. The forum was an excellent, high energy event with a really interactive and enthusiastic group of CSP members and excellent guest speakers.

The forum began with the 'business' part, in which Nikki Parfitt (chair) updated the group on news from the CSP, forthcoming events, national and local priorities, and plans for Older Peoples Day on 1 October. This was followed by a CPD session on dementia, to tie in with the CSP theme of 'Living Longer: Living Well'. Charlie Thorne, from Age UK Somerset, updated us on services available for older people in the region.

Vicky Goodwin provided information on the benefits of joining Agile, the CSP network for those working with older people and the funding and CPD opportunities that are available. She also updated the network on the work of PenCLARHC (the South West health and research centre) which aims to bring together the work of clinical and academic communities to undertake research which directly benefits practice.

There was a market place, with information from Age UK Somerset, PenCLARHC, Agile and the Physio Works series. Here members were able to find out about services for their patients, opportunities for funding for their own CPD and resources to help them make the case for physio; all whilst enjoying a free lunch!



Judy Paice (speaker) and Adam (Vice Chair) demonstrating the coloured bed sheet, and fuzz-felt pants! This illustrates the difference contrast can make to people with dementia in being able to retain their independence.

Judy Paice, dementia nurse specialist, gave an interesting, interactive and thought provoking workshops! For such a serious topic, there was a great deal of laughter whilst learning with props involving a miniature toilet bowl and fuzzy-felt pants. All of those who attended, regardless of their area of practice, left reflecting on its relevance for their own practice. Judy really opened our eyes to the importance of all those in health and care services to be informed about dementia so they can improve the experiences of those with the condition, and those caring for them.

Thank you to Judy for a fantastic session and to all of those who came along to the event.

Dates for your diary

- 1 - 8 December - quarterly regional forums
- 9 December - English network forum
- 10 December - CSP council meeting.

Physiotherapy Journal online
 Now with an app for iPad users
 No more waiting for the latest papers, no more storage issues and no more wastage
 More info at: csp.org.uk/journal

professional networks notices

Word limit for Professional Network notices

With the increasing pressure on space within *Frontline*, it is necessary to restrict the length of entries in the Noticeboard section, therefore submissions will be limited to 180 words (not including name). Notices should be supplied not exceeding this amount. If your Professional Network has regional groups (such as ACPIN) the word count will apply to each separate area. The editor will make the final decision on what appears if copy needs to be cut.

Association of Chartered Physiotherapists in Neurology (ACPIN) - London

Interdisciplinary study morning 'Motivation and rehabilitation'

Date: Saturday 25 October. Registration 9am for 9.30am start. Finish 1pm

Place: Basement Lecture Theatre, The Clinical Neuroscience Centre, 33 Queen Square WC1N 3BG

Cost: £20 for ACPIN, SSNP and RCSLT members, £45 non-members

Please note all applications and payments are now made via 'Eventbrite' using credit/debit card.

Contact: Book at: <https://www.eventbrite.co.uk/e/motivation-and-rehabilitation-tickets-12929032083>

Registration deadline midnight Monday 20 October.

Association of Chartered Physiotherapists in Neurology (ACPIN) - Surrey and Borders

Evening Lecture - An introduction and update on the use of dynamic movement orthosis (Lyca garments)

Speaker: DM Orthotics - Liz Betts and Anna Cartwright

Date: Tuesday 11 November, 7pm for

7.15pm prompt start

Place: Physiotherapy Gym, Frimley Park Hospital

Cost: Free for members, £4 non members. No booking required. Also on iCSP

Contact: Amy Canham at: amycanham@nhs.net

Association of Chartered Physiotherapists in Neurology (ACPIN) - Wessex

Aquatic physiotherapy for neurological conditions

Dates: Saturday 15 November and Sunday 16 November

Cost: £150 for ACPIN Members, £200 for non-members. Lunch included.

Tutor: Jacqueline Pattman, MCSP, ATACP

Place: Glenside Rehabilitation Centre, South Newton, Salisbury SP2 0QD

Contact: wessex@acpin.net

Evening lecture - Clinical psychology in neurological conditions

Date: Tuesday 7 October

Time: 7.30pm start

Speaker: Dr Fionnuala McKieran, joint clinical director, department of clinical psychology, University of Southampton.

Place: Room 1, Education Centre, Royal Hampshire County Hospital, Winchester.

Cost: free to ACPIN members, non-members £1. Students and non-members welcome, no need to book

Acupuncture Association of Chartered Physiotherapists (AACP)

AACP Basic acupuncture foundation course

This course is designed to offer participants with a level of knowledge, skill and understanding that will allow them to practise acupuncture in a safe and appropriate manner, in a clinical setting.

Cost: £495 - One year's full membership of the AACP with many benefits!

To book: Contact Sarah Brand on tel: 01733 390007 or email: sec@aacp.uk.com

Dates: 7/8/21/22 February 2015 and 11/12 April 2015

Place: Bristol

Dates: 21/22 February, 28 February /1 March and 11/12 April 2015

Place: Wrexham

AACP grants

AACP have a number of grants available for AACP members. For more information please

contact Mindy Cairns (AACP research advisor)
at: research@aacp.org.uk or see the AACP
website: www.aacp.org.uk

AACP CPD courses:

Contact: Sarah Brand on tel: 01733 390007
or email: sec@aacp.org.uk

Sports injuries

Date: 30 November

Place: Wirral

Tutor: Jon Hobbs

Needling masterclass

Date: 4 December

Place: Peterborough

Tutors: Teresa Syed and Joanne Dyson.

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.
To find out more and join ACPOHE go to: www.
acpohe.org.uk Annual membership £50 for UK
and Ireland and £65 for overseas.

Current available courses - 2014

Office Ergonomics Level 1

Date: 1-2 November

Place: Nottingham

Cost: £280 members, £340 non-members.

Lunch not included

Introduction to Applied Ergonomics

Date: 4-5 November

Place: Hampton, Peterborough

Cost: £300 members, £360 non-members.

Lunch included

Manual Handling Train the Trainer and Risk Assessment

Date: 21-22 November

Place: Hampshire

Cost: £300 members, £360 non-members.

Lunch included

Current available courses - 2015

Office WorkStation Ergonomics (DSE) Level 1

Date: 7-8 March 2015

Place: Guildford

Cost: £280 members, £340 non-members.

Lunch not included

Office Workstation Ergonomics (DSE) Level 1

Date: 13-14 June 2015

Place: Guildford

Cost: £280 members, £340 non-members.

Lunch not included

Contact: For course information and to book
online: <http://www.acpohe.org.uk/events>

Association of Orthopaedic Chartered Physiotherapists (AOCP)

New to 2014 submissions for the AOCP awards are being invited

*Have you done a piece of research or audit?
Have you worked on some redesign aspect
at work, set up a new service or developed a
new role?*

*Have you developed innovative guidelines or
practice that has influenced your service or
could influence other services?*

Well this is your chance to get extra
recognition for the work you have done and
also the chance to win £1000!

2nd place £250 and a cut-glass trophy
for each. Also, best orthopaedic-related
undergraduate dissertation - Winner gets
£500 and a cut-glass trophy.

Best 10 get free AOCP membership for a
year once they have graduated and become
a CSP member.

Please submit entries by email to: rachel.
martin@poole.nhs.uk by 30 November 2014

Entries should comprise a 500-600 word
summary outlining the:

Title/Aim/Methodology/Results/

Clinical implications and relevance

Winners will be notified in December 2014.

Winning entries will be published in the

newsletter.

Chartered Physiotherapists Working With Older People (AGILE)

Regional Study Days for 2014/2015

Soft-touch trigger point treatment with the older person

Speaker: Ed Wilson BA (Hons) MCSP, HCPC
Registered, MCTA, CMP

Content: These one-day interactive study
days provided through both lectures and
practical sessions are designed to:

- enhance a physiotherapist's understanding
of pain management, with the use of
trigger points to relieve pain in the older
person.
- enable the physiotherapist to develop
clinical reasoning through interactive
discussions using case examples and
a problem solving approach with multi-
pathology and in frail older people.
- provide an excellent alternative technique
for needle-phobic patients presenting with

trigger points, plus no aggressive
techniques are used.

Dates for each region:

14 March 2015 - AGILE (N. Ireland) - Belfast.

Organiser/contact Gail McMillan at: gail.

mcmillan@belfasttrust.hscni.net

11 April 2015 - AGILE (West) COURSE FULL

St Martin's Hospital, Bath. Organiser/contact

Ruth Sampson at: ruth.sampson@sirona-cic.

org.uk

13 June 2015 - AGILE (Scotland) - Ninewells

in Dundee. Organiser/contact Fiona MacLeod

at: fiona.a.macLeod@nhslothian.scot.nhs.uk

Note: Please contact the organiser of the
region nearest you for an application form and
further information, or visit the AGILE website
on the events page for venue details: [http://
agile.csp.org.uk/network-events](http://agile.csp.org.uk/network-events)

Cost: £60 AGILE members - places are limited
so applications will initially only be considered
for current AGILE members.

Chartered Physiotherapists Working With Older People (AGILE)

AGILE West regional study day 'Dementia from all perspectives'

This study day is aimed at physiotherapists
working with dementia patients. AGILE
members only (for details of membership
please see AGILE website). Lunch provided.

Speakers: Clare Leonard, Judy Paice, Angela
Clayton-Turner

Date: 1 November

Cost: £35

Place: Education Centre, Salisbury District
Hospital, Salisbury, SP2 8BJ

Contact: Kate Bennett email: kategahr@
hotmail.co.uk

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

Introduction to sport

Place: Keele University

Date: Saturday 25 October

Place: Coventry University

Date: Saturday 26 October

Place: University of East London

Date: Saturday 1 November

Cost: Members £40, non-members £100

South Region Evening lecture series Fundamentals of athletic movement

Date: 22 October

Introduction to disability sport

Date: 19 November

Peer learning / CPD pathway**Date:** 10 December**Current soft tissue techniques for sport****Date:** Part 1 -15-16 November,

Part 2 - 7-8 February 2015

Place: Mile End Hospital, London E1 4DG**Tutors:** Colin Paterson, Sian Knott, Sandy Tubby**Cost:** Members £200, non-members £260**Contact:** Full details and bookings via:
physiosinsport.orgAll courses may be paid for by instalments by
contacting: admin@physiosinsport.org**Physio First****Physio First Conference 2015****Soft Tissue. The Hard Truths!****Place:** East Midlands Conference Centre,
Nottingham NG7 2RJ**Date:** 28 - 29 March 2015

After a very successful conference we are pleased to announce the 2015 conference, entitled 'Soft tissue. The hard truths!' Conference continues to be the 'not to be missed' Physio First event of the year and 2015 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 including: Professor Dr. Deborah Falla (Germany), Lyn Watson (Australia), Professor Jill Cook (Australia), James Butler (UK), James Earls Director (UK), Professor Tim Watson (UK), Tim Beames (UK), Sam Singh (UK)

Other events over the weekend:Large trade exhibition opens Friday 27
March 4.30pmFriday night drinks reception and supper-
only £12!

AGM - Join the business of your organisation.

Cost: Delegate prices start from £165 per day. Book online and receive £10 discount
www.physioforst.org.uk (members only).
Bookings open 1 September.

Contact: For more information or to book please contact Alice on tel: 01604 684968 or visit: www.physiofirst.org.uk

Aquatic Therapy Association of Chartered Physiotherapists (ATACP)**UK aquatic therapy conference****Date:** 1-2 November**Place:** DMRC Headley Court, Headley,
Epsom, Surrey.

Celebrating the 25th anniversary of the ATACP

Cost: ATACP members £165, non members £175. Full cost after 25 April: ATACP members £185, non members £200

Contact: CSP members can download a booking form from: <http://www.csp.org.uk/icsp/aquatic-therapy-site-icsp>

Otherwise, please contact Sarah Wratten for a booking form or further information on: atconference2014@gmail.com
Book now to avoid disappointment.

British Association of Hand Therapy (BAHT)**Level III MSc module: contemporary practices in injection therapy****Date:** October - December**Place:** University of Nottingham

Contact: Claire Driver on tel: 0115 8231786, email: claire.driver@nottingham.ac.uk

Cost: £667.78**Level II: Optimising soft tissue function****Date:** 21-23 November**Place:** Northwood, Middlesex

Contact: Ella Donnison, email: handtherapy@sky.com

Level II: Management of tendon and ligament injuries**Date:** 26-28 November**Place:** Norwich

Contact: Debbie Larson, email: debbie.larson@nunn.nhs.uk Taught by NES
www.neshands.co.uk

Level II: Management of the wrist**Date:** 21-23 January 2015**Place:** Edinburgh

Contact: Julie Jones, email: julie.jones@nhslothian.scot.nhs.net

Taught by NES www.neshands.co.uk**Level I: Introduction to hand therapy****Date:** 4-6 March 2015**Place:** Derby

<http://www.pulvertafthandcentre.org.uk/>

Level III: BAHT Evidence based practice course**Date:** 22 April 2015**Place:** Nottinghamshire**Speaker:** Jeremy Lewis

Contact: bahthandtherapy@gmail.com

Level II: The PIPJ**Date:** 13-15 May 2015**Place:** Tooting, London

Contact: Helen Griffin, email: helenl.griffin@stgeorges.nhs.uk

Taught by NES www.neshands.co.uk**Level I: Introduction to hand therapy****Date:** 6-8 July 2015**Place:** Nottingham

Contact: Liz Weedon, tel: 07733 238947, email: elizabeth.weedon@circlepartnership.co.uk

Level II: WRULD**Date:** 30 September to 2 October 2015**Place:** Ashford, Kent

Contact: Michael Keane, email: michaelkeane1@nhs.net

Taught by NES www.neshands.co.uk**Level I: Introduction to hand therapy****Date:** 25-27 November 2015**Place:** North London**Contact:** www.neshands.co.uk**British Association of Chartered Physiotherapists in Amputee Rehabilitation (BACPAR)****Advance notice - Date for your diary 2014 BACPAR conference and AGM****Date:** 13-14 November**Place:** Wolverhampton Science Park

Contact: Programme outline and application forms will be available at: <http://bacpar.csp.org.uk/>

Pelvic, Obstetric, Gynaecological Physiotherapy (POGP) - formerly the Association of Chartered Physiotherapists in Women's Health (ACPWH)**Understanding pelvic organ prolapse - assessment and conservative management****Date:** 8 November**Place:** Glasgow**Cost:** £125 POGP member/affiliate; £160**Physiotherapy assessment and management of female urinary dysfunction****Date:** 28-30 November**Place:** Winchester, Hampshire

Cost: £350 POGP member/affiliate; £420 non-member

Contact: To request a copy of the information pack for any of the above courses please email: info@acpwhworkshops.co.uk

For further details of the POGP short course programme please visit the POGP website at: <http://pogp.csp.org.uk/courses-events>

Physiotherapy Pain Association (PPA)

Two-day course introducing physiotherapists to theory and practice of the cognitive behavioural approach

Date: Saturday 29 November and Sunday 30 November

Place: Clinical Science Building, Nottingham City Hospital

Content: Two-day course introducing physiotherapists to theory and practice of the cognitive behavioural approach

Tutors: Dr Pete Gladwell and Emma Knaggs

Cost: PPA members £180 and non members £200

Contact: ptecourses@gmail.com

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

Association of Paediatric Chartered Physiotherapists (APCP)

In cahoots - APCP Annual conference 2014

Summary: Two-day conference featuring a joint programme with CYPF (paediatric OTs) on the first day and a parallel programme for children's therapy managers/team leads on the second day - full programme details available on the APCP website.

Date: Friday, 21 November and Saturday, 22 November

Place: Surgeon's Hall, Edinburgh EH8 9DW

Cost: Early bird rates (before 12 September) - £95 one-day registrations / £180 two-day registrations

Contact: Email: va@apcp.org.uk

Further information can be found at: apcp.csp.org.uk

Association of Chartered Physiotherapists in Orthopaedic Medicine and Injection Therapy (ACPOMIT)

ACPOMIT are pleased to offer both members (£60) and non-members (£85) the opportunity to attend an injection therapy focused cadaveric study evening. The three hour event will be hosted at Charing Cross Hospital in London on Wednesday 26 November, 6pm-9pm. It presents a great opportunity for AHP's to practise injection techniques with specific anatomical guidance and peer review. For more information see www.acpomit.co.uk

Musculoskeletal Association of Chartered Physiotherapists (MACP)

MACP Conference and AGM - Exercise, rehabilitation and patient engagement

- Dr Andrew Murray - Physical inactivity: The major challenge of the 21st century
- Dr Richard Weiler - Rehabilitation: Why am I here? I have no physiological Ideal
- Rob Shannon - Engagement strategies: Overcoming barriers
- Prof Stephen Harridge - Ageing and exercise: The importance of skeletal muscle
- Oliver Davies - Specific exercise in unique populations: How does this transfer to the normal clinical environment

Date: 25 October 2014 9.15am-5pm

Place: Brunei Gallery, Russell Square, London

Contact: Register online at: macpweb.org by email at: admin@macpweb.org or call tel: 01202 706161.

Cost: £110 MACP members and associate members; £135 non-members.

The MACP presents: Spinal masqueraders expanded

The MACP has developed a further stand-alone course designed to enhance awareness and clinical reasoning in the management of non-musculoskeletal causes of back and radiating leg pain. This course covers in depth the topics of Cauda Equina Syndrome, visceral, vascular and pelvic masqueraders.

Tutor: Laura Finucane, Sue Greenhalgh and Chris Mercer.

Date: Saturday 8 November 2014, 9am-4.30pm

Place: St Mary's Hospital, London

Cost: £110 MACP members £120 non-members

Contact: Terry Smith on email: admin@macpweb.org or tel: 01202 706161.

Electrophysical Agents and Diagnostic Ultrasound Professional Network

A study day looking at electrotherapy and ultrasound imaging in women's health

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

Date: Friday, 28 November Registration 9am for 9.30am

Cost: £40 for members of Professional Network/£50 for non-EPADU members/£50 for non-CSP members, to include refreshments

Confirmed lecturers include: Tim Watson, Jane Dixon, Elizabeth Carruthers and Kay Crotty, including sessions on TENS in pregnancy and pelvic floor activation.

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

Chartered Physiotherapists working as Extended Scope Practitioners (ESP)

Autumn lower limb study day

Date: Wednesday 22 October

Speakers: Mr James Calder, orthopaedic surgeon: Managing chronic ankle instability. Rob Mast and Stuart Wildman, MSK sonographers: Overview of ultrasonography in the foot ankle. Mr Simon Ball, orthopaedic surgeon: Meniscal injuries - optimal management and when to operate.

Professor Mike Hurley: Translating research into practice. Mr Johan Witt, orthopaedic surgeon: Common pathologies of the young adult hip

Cost: £80 (early bird ticket - members only - until end August)

Members: £95 Non-members: £120

Contact: Book online now at:

www.esp-physio.co.uk/courses

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

Association of Chartered Physiotherapists in Reflex Therapy (ACPIRT)

ACPIRT Reflex therapy 3rd foundation course

Four weekends over six months. An exciting opportunity for physiotherapists and healthcare professionals to be inspired! A course that will change how you treat your patients. Learn to treat the body through reflex points on the feet with a modality of treatment akin to reflexology. Reflex therapy can be used for a wide variety of patients and integrated within your own Healthcare setting. A comprehensive training led by experienced tutors providing the skills for safe and effective

frontline

practice, endorsed with the CSP quality mark.
Dates: (2015) 28 February/1 March, 28/29 March, 9/10 May, 26/27 September
Place: Hope Bowdler Village Hall, Hope Bowdler, nr Church Stretton, Shrewsbury, Shropshire
Cost: £1,200
Contact: For further information please email: info.acpirtfoundationcourse@gmail.com

Association of Chartered Physiotherapists in Temporomandibular Disorders (ACPTMD)

Introduction to physiotherapy management of temporomandibular disorders (TMD)

Date: Saturday, 15 November 2014
Place: Guy's Hospital, London
Tutors: Phil Bateman and Helen Cowgill
Cost: £149 (£129 early bird discount if book by 31 August 2014)
Contact: Email: helen.cowgill@outlook.com
 For info: www.ACPTMD.co.uk

Chartered Physiotherapists in International Health and Development (ADAPT)

ADAPT annual study days and AGM - 'The emerging role of the physio in global contexts'

Day one: Guest speakers sharing their personal experiences, lectures on key clinical areas to equip for overseas working and AGM
 Day two: Opportunity to learn key practical skills to use overseas
Date: 7-8 November
Place: Central London
Cost: one day £25/45, both days £45/70 member/non-member (subsidised further for students). Lunch and refreshments included
 Limited places - please book early to avoid disappointment
Contact: Visit: adapt.csp.org.uk or email: adaptenquiries@gmail.com for more info.

Association of Chartered Physiotherapists in Oncology and Palliative Care (ACPOPC)

Annual autumn conference

25th Anniversary
Complexities in oncology and palliative care - looking after your patients and yourself
 Topics to include: Motivating for self-management, acupuncture and cancer pain, developing dynamic and sustainable services, mindfulness workshop, motor neurone disease service needs, and much more.
 As part of the conference there is an optional three-course dinner on Thursday 13 November to celebrate our 25th anniversary.
Place: Croydon Park Hotel, 7 Altyre Road, Croydon CR9 5AA
Cost: Members - two day rate £130, one day £75. Non-members - two day rate £160, one day rate £90. Optional conference dinner £25
 Hotel accommodation available at reduced rates by quoting the conference when

The future is in our hands
 Now is a critical time for physiotherapy

Qualified, student, and associate members ACT NOW - join one of our *Physiotherapy Works Locally* events and take the first step towards building your future.

By attending, you'll be able to:

- **Meet CSP leads** and local activists
- **Get up-to-date** with the changing world of healthcare
- **Explore the difference** that you can make to your patients through new approaches
- **Make every contact count:** know your service, your population and the evidence
- **Feel equipped** to promote your profession and influence those that count.

The events will run throughout 2014/2015 and will come to Wales, Northern Ireland and Scotland as well as all English regions. Each is a full day from 10am to 4pm with lunch provided. Places will be allocated on a first come, first served basis.

First dates available:

22 nd November	Worthing
27 th November	Antrim, Northern Ireland
2 nd December	Exeter
8 th December	London

Physiotherapy works
locally

A new series of free events

Book your free place and find out more at
www.csp.org.uk/physioworkslightly
 or email physioworks@csp.org.uk



booking directly with the hotel

Contact: Email: katharine.malhotra@rmh.nhs.uk or: malhotrakatharine@gmail.com
Further information can be found at: acpopc.csp.org.uk

Musculoskeletal Association of Chartered Physiotherapists (MACP)

An introduction to motivational interviewing - by Rob Shannon

The success of physiotherapy is often influenced by the extent to which patients engage with treatment and adhere to the specific exercises and lifestyle changes that are recommended. This usually requires a high degree of effort and motivation, however poor adherence is a common.

Motivational Interviewing is defined as a collaborative conversation to strengthen a person's motivation for and commitment to change (Miller and Rollnick 2013). It rests on a foundation of person-centered counseling skills that provide the conditions of support which are conducive to change, and seeks to elicit and reinforce the person's own arguments for modifying their behavior.

During this one-day course you can expect to learn from short lectures, video analysis, experiential exercises and discussion about motivational interviewing.

Place: Frimley Park Hospital, Surrey.

Date: Saturday 1 November

Cost: £110 MACP members - £120 non-members

Contact: Pay online at www.macpweb.org or email Terry Smith on: admin@macpweb.org or tel: 01202 706161.

Medico-legal Association of Chartered Physiotherapists (MLACP)

Winter conference - Justifying new technology in rehabilitation: Implications for medico-legal work

Date: Friday 14 November

This annual conference of the Medico Legal Association of Physiotherapists aims to look at technology and how it is increasingly becoming part of our clinical practice but when and what are we recommending? How do we include technology in our reports and how do we justify the cost?

This conference aims to address the key issues surrounding technology in rehabilitation and will be a thought provoking day for physiotherapists who would like to stay ahead

of the clinical and report writing curve!

The conference is an ideal opportunity to meet others involved in medico-legal work and, following the success of last year, the day will, once again, close with a drinks reception to which all the delegates are warmly invited.

Place: CSP, 14 Bedford Row, London WC1R 4ED

Course chair: Kate Sheehy

Cost: £50 MLACP members, £85 non MLACP members

Speakers include: Jon Graham - PhysioFunction, Henry Whitcomb - One Crown Office Row, Toby Carlson - PACE Rehabilitation, David Johnson - FOIL President and Partner at Weightmans LLP

Contact: If you have any queries please email MLACP at: info@mlacp.org.uk

For programme details and an application form please go to the MLACP website: <http://mlacp.org.uk>

McKenzie Institute Mechanical Diagnosis and Therapy Practitioners (MIMDTP)

Annual conference

'Do words speak louder than actions?' The importance of communication in changing health behaviour and improving treatment outcomes

Date: Saturday 29 November

Place: Postgraduate Education Centre, Birmingham City Hospital

Cost: (Including lunch and refreshments): before 31 August; £50 members and £75 non-members. After 31 August; £60 members and £85 non-members

Contact: Further details and application form available via: <http://mckenzieinstitute.co.uk/mimdtp/>

other group news and events

Dealing with dyslexia: CSP disabled members' network meeting

Date: Wednesday 26 November 10.30am - 4pm

Place: CSP, 14 Bedford Row, London WC1R 4ED

The CSP disabled members' network group is hosting a special meeting on 26 November at CSP HQ. The theme of the meeting will be supporting students and clinicians with dyslexia. There will be a panel of guest speakers on dyslexia - details to follow.

All CSP and AHP disabled members are welcome, including student members. CSP and AHP clinical educators, admissions tutors, students, stewards, and managers who have a particular interest in dyslexia are also invited to attend this event.

Lunch will be provided. CSP members please log on to the iCSP network to register and to access the Trainline code for booking your travel. Please register by 17 November.

Contact: Email: feldmang@csp.org.uk or call tel: 020 7306 6682.

Putting the 'T' into LGBT: CSP LGBT network meeting

Date: 23 October 11am - 4pm

Place: CSP, 14 Bedford Row, London WC1R 4ED

The Lesbian Gay, Bisexual and Transgender (LGBT) network group is meeting on 23 October at CSP HQ. There will be guest speakers (to be notified), including a speaker on trans issues.

All CSP LGBT members are welcome, including student members. LGBT members of other AHP unions are also very welcome. CSP stewards, managers and students with a particular interest in equality and diversity issues are invited to join for the speaker session 11am-1pm. Lunch will be provided.

CSP members please log on to the iCSP network to register and to access the Trainline code for booking your travel. Please register by 16 October at the latest.

Contact: Email: feldmang@csp.org.uk or call tel: 020 7306 6682.



**Send Frontline
your Professional
Network notice
directory@csp.org.uk**

info exchange

Examination of rehabilitation needs screening approaches in forensic settings

We are currently 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 part 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.

A pilot randomised control trial (RCT) to investigate the effects of a dynamic elastomeric fabric orthosis (shorts) in athletes with pelvic/groin pain, across selected clinical and performance measures

A PhD study (ethical approval from Plymouth university) is looking to recruit athletes with pelvic/groin pain, to evaluate the effect of a customised orthosis (in the form of Lycra shorts) on measures including the ASLR,

squeeze test, multiple single-leg hop-stabilisation test, and broad jump.

The orthosis was developed from the results of an athletic pelvic belt study, and has been evaluated as a series of single case studies (n = 8). A pilot RCT will commence in January 2014 to build upon the patient profile of those who respond best, and to ascertain effects upon power and athletic balance.

For further information on becoming involved and/or requesting a participant information pack, please contact the investigator: Leanne Sawle (chartered physiotherapist), email: l@sawle@dmorthotics.com Tel: 07801 332355.

retirement groups news

CSP Retirement Association

Did you get involved in Older People's Day on 1 October?

There are several ways you can support and promote physiotherapy – Look at your local Healthwatch site.

Members will be receiving the autumn newsletter, either in hard copy form or electronically. Please let me know, Lyn Ankcorn, on email: ankcorn@csp.org.uk or Catherine Smith at: smithc@csp.org.uk or call EHU on tel: 020 7306 6666 if you have not received your copy.

The newsletter has requests for retired members to become involved in various activities. Have you thought of bell ringing, and the therapeutic demands, of balance, co-ordination, and physical exercise? The Motor Neurone Association is looking for visitors. Did you know that there is a training course for sighted people to assist guide dogs for the blind? With our past professional experience we are well suited. The guide dog cannot take its owner out shopping for a new dress, and say – 'darling you look lovely in that dress!' – or 'Sorry this is not you!' Also we are looking for new committee members for 2015 and there is a self-nomination form.

Come to the CSPRA Study day, Monday, 1 December, 10.30am onwards at CSP London Office, Bedford Row. The speakers for the day include Karen Middleton new CSP chief executive, Catherine McLoughlin, retired

nursing officer, and lay CSP council member, and Betsan Corkhill – 'How to knit a flexible mind'. Cost £15 includes lunch and coffee. Cheques payable to CSPRA, please send to Lyn Ankcorn 23, Swarthmore Road, Selly Oak, Birmingham B29 4NQ. Email: ankcorn@csp.org.uk Tel: 0121 475 2612 or 07798 525822.

Retired physiotherapists in East Anglia lunch date

A group of retired physiotherapists in East Anglia are meeting for a social lunch on Tuesday 21 October. We are meeting in Saffron Walden and anticipating a good lunch and an opportunity to visit the market in this old an interesting town. If any physiotherapists who are retired or close to retirement would like to join us please contact Jacqui Potter at: JacquiPotter@outlook.com

Chartered Society of Physiotherapy Retirement Association (CSPRA)**New CSPRA book club**

Thank you to all RA members who have contributed to the iCSPRA 'book club'. Please continue, we have some very good suggestions, let's have some more!

If anyone would like to contribute a book and finds it difficult – please email me at: ankcorn@csp.org.uk and I will help. If you do not have a computer and would like more information please call tel: 0121 475 2612 or: 07798 525822 Keep reading!

Lyn Ankcorn, secretary CSPRA

Chartered Society of Physiotherapy Retirement Association (CSPRA)**Newsletter**

Would you like to write an article and send it to Lyn Ankcorn at email: ankcorn@csp.org.uk

If you are retiring/approaching retirement why don't you join the retirement association? Please contact the CSP enquiry handling unit: enquiries@csp.org.uk or for more information contact Catherine Smith at the CSP on email: smithc@csp.org.uk or tel: 020 7314 7843 with your name, address, CSP registration number and contact details.

Should you wish to discuss this first with a committee member, the chair of

the association, Chris Foster, email: chris@nagdragon.eclipse.co.uk or Lyn Ankcorn, secretary, email: ankcorn@csp.org.uk would be pleased to hear from you.

reunions

20 year reunion Bristol Physio 1992-5

Anyone interested in meeting in Bristol for a 20 reunion in spring 2015?

I have set up a closed group Facebook page called 'Bristol Physio reunion 1992-5'. Please join and share in the discussion of choosing a venue and date, or you can contact me on: janine_browne@hotmail.com

Woodlands (Royal Orthopaedic Hospital) School of Physiotherapy, Birmingham. Set 49

It is 35 years since we qualified! Would you be interested in meeting up with Janet, Tessa, Elaine, Annette and Lynn? If so, please contact Lynn Clark (Deeley) via: trevor@trevorclark.net

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 address: elenidracopoulou@gmail.com

Queen Margaret College, Edinburgh 1981 to 1984

If anyone would like to meet up to celebrate 30 years since we left QM, please contact Jennifer McArtney (nee James) at: j.a.mcartney@btinternet.com. We are thinking of the first weekend in October.

The London Hospital 1977-1980

2015 will be our 35 year anniversary since qualifying. Jane Nicklin and Wendy Hendrie (nee Dickerson) are hoping to organise a reunion in London - time and place to be decided. Please contact us if you are interested in joining us. It would be great if we could track everyone down so please let people from our year group know if you are still in touch. Jane and Wendy can be contacted at: mscentrenorwich.wendyhendrie@gmail.com and: jane.nicklin21@btinternet.com

Manchester Royal Infirmary 1984

It is 30 years since we all started our training together at Manchester Royal Infirmary in 1984, would anyone like to meet up, if so please email Judith Davies (nee Docherty) at: andydavo@btinternet.com or Claire Shenton (nee Taylor) at: graham.shenton@tiscali.co.uk If we get some interest we could arrange to meet in September or October in Manchester.

St Mary's Hospital London Set E 1974-1977

I would like to arrange a reunion of us 'old crocks'. Hopefully a venue in London sometime this summer/autumn. If you know others that are unlikely to read this please let them know. Contact Sharon Standen (nee Edwards) on tel: 01843 601806 or email: standen56@hotmail.co.uk if you are interested.

Wolverhampton School of Physiotherapy. Class (including staff) of 1987-1990

25 years next year (really?) since we qualified. If you are interested in a reunion in the summer, 2015, please email me, Jill Nussbaum (nee Davies) at: dannynussbaum@btinternet.com I am thinking perhaps a venue in Wolverhampton or Birmingham areas. Any other ideas welcome.

Pinderfields College of Physiotherapy Reunion 1991-1994

Updated email address

It's 20 years since we qualified and went our separate ways. Let's meet up and find out what we've been up to over the last two decades! If you are interested in meeting up in Wakefield in September please get in touch. Contact Adrian Capp at: adrian_capp@yahoo.co.uk

Queen Elizabeth School of Physiotherapy 1966-1969 September set

Anyone interested in meeting up after 45 years this year since we qualified? Some of us are still in contact. Please email Janet Whittaker (nee Warner) at: rodderwhittaker@btinternet.com or Sheila Wood (nee Staite) at: woodsheila@btinternet.com Please mail us to arrange a catch up!

Withington Hospital School of physiotherapy Spring 1971 - 1974

It will be 40 years this summer since we qualified and it would be lovely to catch up with the rest of the set and find out what others have been doing. If anyone else would like to try to meet up sometime later this year, please get in touch with either myself (Anne Downes) at: anne@worstead.co.uk or Morwith Minter (nee Davies) on tel: 01225 866594.

The Royal Hospital School of Physiotherapy, Wolverhampton, 63 set

One year late for a 50 year reunion - but let's meet up anyway. Many of us are still in touch and meet up every now and then but we thought it be good to see if any of you that have lost contact might like to join us for a get-together in September - date and place to be confirmed. If you are interested, please contact Jeanne Hartley (Evans) at: jeannehartley@hotmail.co.uk or Pam Stubbs (Mason) at: pamrog60@hotmail.com so that we can include you in the plans!

Pinderfields Hospital/Huddersfield Uni Reunion 1997-2000

15-year reunion

It will be 15 years next year that we qualified and were let loose on the world. To celebrate I am organising a meet up/meal out/few drinks in Wakefield. No fixed details yet I am just trying to get all the guys together. We have 22 of us already it would be great if we could track everybody down. So please get in touch! Thanks. Kate Mooney (nee Adams), email: gizmoo@hotmail.com

Sheffield Polytechnic 1978-1981

Some of us already meet occasionally and we wondered about extending the party. As a starting point, please let me know if you're interested. Nikki Adams (originally Bramson), email: n.adams@adamsneurophysio.org.uk Tel: 01924 782149.

Middlesex Hospital School of Physiotherapy 1986 - 1989

Anyone interested in meeting after 25 years? I missed the combined medical staff reunion prior to the Middlesex closing but I'm always looking out for a subsequent physio reunion on the *Frontline* noticeboard. As none seems to have been posted I thought I'd start

frontline

the ball rolling. I haven't kept in touch with anyone so it'd be great to catch up and see how many of us are still in the profession - or not. Contact Tracy Tomlinson (nee Allen) on: physio@moggy.me.uk

Bradford School of Physiotherapy year 1981-84

It's been 30 years since we all went our separate ways. We should get together while we can still remember each others' names! Anyone that would like to meet up contact Steve Derrick at email: cps_derrick@hotmail.co.uk

Cardiff School of Physiotherapy, CTI, 1991 - 1994

It's 20 years this year since we qualified and we have arranged a ball in Cardiff in June, but we still need to find some people: Rachel Harrington, Julie Sayce, Tara Hadden and Sharon Cunningham (went to Australia). Please contact Karen Belward (nee Rees) for more info at: karenandpeterb@sky.com or find me on Facebook. It's going to be a great party, lots of people are coming already and we would love to see you there.

Queen Elizabeth School of Physiotherapy 1981 - 84

Date announced

It's 30 years since we qualified and to celebrate a reunion get together has been arranged, a meal in Birmingham, on Saturday 18 October. If you've not been in touch already, but would like to join us, then please contact me at: hazelhorobin@gmail.com or via my Facebook page. It will be lovely to see everyone, to catch up and reminisce.

Northern Ireland School of Physiotherapy - Belfast 50th anniversary reunion

All physiotherapists who commenced training at the Northern Ireland School of Physiotherapy during the year 1964, please take note.

Believe it or not, it is now 50 years since we became physiotherapy students and we are planning a reunion of the two sets of physiotherapy students this summer.

We hope to have a dinner party celebration in the Crawfordsburn Hotel, Co Down, in late summer or early autumn. We will decide on a date to suit as many people as possible.

Please pass this information on to anyone else you know who may wish to attend.

Partners and friends are very welcome as some people will have to travel from abroad and may wish to make it a celebration trip.

If you are interested in attending, please contact Jenny Archer at email address: jarcherphysio@aol.com or tel: 02891 270932 for further information.

Middlesex Hospital, London

It is now 50 years since the 1964 set began training. Is there anyone interested in joining up again for a reunion sometime later this year - 2014? Please contact Jacqui (nee Forrest) at: jacqui.m.tanner@gmail.com

West London School of Physiotherapy

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

Newcastle Polytechnic 1978-1981

It is a very, very long time since we qualified at Newcastle Polytechnic in 1981 (32 years!). Before we all decide to retire how about meeting up? If you are interested, contact Sally Wilson (nee Gillespie) via email: sally.wilson@ntw.nhs.uk

St Mary's Hospital set B 1981-84

How time flies - it will be 30 years next year since we qualified and 10 years since our last gathering. So how about another get together in London in October 2014? Kathy, Tracey and I would love to see as many of you as possible to share a few drinks, a delicious meal and shared memories. Let me know if you would like to come, or want to share some news, by emailing: helenmee@nhs.net

Oswestry 'Set 50' 1988 - 1991

I am hoping to form a group email conversation with all our set that left Oswestry School of Physiotherapy in 1991. Maybe we could meet up for our 25th anniversary soon to come round? But first we need to get the contacts together.

If you are interested in knowing what we have all been up to and would like to join in a group conversation, we would love to hear from you. Please contact me on email: helenbalcombe@hotmail.co.uk

Bath School of Physiotherapy (BSOP) Reunion

Ex-students and members of staff of the former BSOP are invited to join our closed Facebook group, where a reunion is being organised, together with memories and photographs being shared.

Teesside Polytechnic 1985-88

It's 25 years since we qualified. If you are interested in meeting up to celebrate contact Christine McGlone (nee Wallace) on tel: 0191 387 5804, or email: christine_mcgclone@sky.com Look forward to hearing from everyone.

Salford School of Physiotherapy, Hope Hospital 1974-77

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

West Middlesex Hospital School of Physiotherapy 1967-70

It is a long time since we left Isleworth. Some of us have met up some of you have never been heard of since we parted. If you are interested in a reunion or just a catch up by email please get in touch with Vicki Owers (formerly Wilson née Parker) at: vjowers@hotmail.com

Bristol School of Physiotherapy/Avon College of Health 1990-93

Can't believe it's 20 years since we qualified. Abi was wondering if anyone fancied catching up this summer. Let me know at: absfabslee@aol.com

Edinburgh Royal Infirmary 1963-66

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

Thinking of having a reunion?

Need to contact old friends via the Noticeboard?

Email: directory@csp.org.uk

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

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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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Tutor: Mike Stewart. See www.physiouk.co.uk/knowpain2 or call **0208-787-5963**

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miscellaneous

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28/02/2015 – 01/03/2015

Falkirk, Scotland

14/03/2015 – 15/03/2015

Manchester

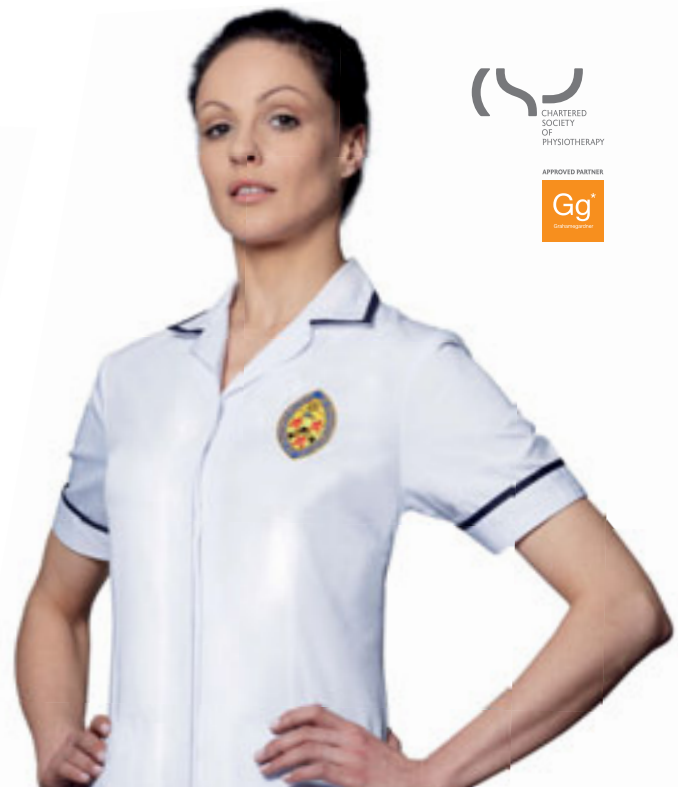
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neurology

'STUCK ON THE HARD SHOULDER?'
 This one day course will explore common barriers to recovery in the treatment of shoulder conditions and consider effective evidence based strategies to address them.
Tutor: Jo Gibson MCSP MSc
Aims:
 1. To review the latest literature regarding dynamic stability and pathology of the shoulder complex and consider the implications for treatment.
 2. To explore barriers to recovery in treatment of the shoulder complex.
 3. To apply advanced clinical reasoning to complex presentations to enable the design of simple, effective management strategies
Date: Sunday 16th November 2014
Venue: The Wells Physiotherapy & Sports Clinic, Tunbridge Wells, Kent.
Cost: £120
 Please email: wellsphysiocourses@gmail.com or telephone: **01892 525065**

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orthopaedic and rheumatology

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RNOH SHOULDER ARTHROPLASTY UPDATE

21st November
 The aim of this day is to provide up-to-date evidence regarding the management of primary and complex revision surgery from pre-admission, surgery and to their later rehabilitation phase. Suitable for Band 5 and 6 physiotherapists, therapy technicians, and allied health professionals working in an acute, community, or outpatient setting.
 To book or register your interest please email: physiocourses@rnoh.nhs.uk
 next course title TBC May 2015

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pain management

A BIOPSYCHOSOCIAL APPROACH TO TREATING PAIN

24th - 25th January 2015, Northumbria University, Newcastle upon Tyne.

Based on current best scientific evidence and developed by leading pain specialists.

This course aims to empower clinicians with biopsychosocially based pain relevant knowledge and evidenced approaches in treating and managing patients with acute and chronic pain. Strong emphasis is placed on the crucial interplay between the biological, psychological and sociological factors involved in the experience of human pain states and how these can be modified with appropriate therapy.

Topic areas include; exercise therapy and rehabilitation, neurobiology, psychological interventions (including yellow flags and mindfulness meditation), sleep hygiene, explaining pain, pharmacology, demystifying core stability and the role of manual therapy.

This course is essential for all clinicians treating patients with pain.

£200 per delegate.

Course tutors: Steve Robson, David Bell and Diarmaid Ferguson
For more details email aspen.physio@zen.co.uk or call **01661 830980**.

sports medicine

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or call **0208-787-5963**

LASER THERAPY TRAINING 2014

Please refer to advert in Electrotherapy section

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"INJURY PREVENTION AND MANAGEMENT ACROSS THE ATHLETIC LIFE CYCLE"

Thursday, 20th November 2014

Venue: Moorgate, London

Book online: www.vitalperformancemanagement.com

SPORT AND DANCE CONFERENCE

"STRETCHING THE TRUTH: THE FLEXIBILITY AND STRENGTH CONTINUUM"

Thursday, 29th January 2015

Venue: Moorgate, London

Book online: www.vitalperformancemanagement.com

LASER THERAPY TRAINING 2014

Please refer to advert in Electrotherapy section

ANATOMY TRAINS - THE DEEP FRONT LINE

Tuesday 25th November 2014

10am - 5pm Tavistock Physio Clinics at Lamerton, Tavistock, Devon PL19 8QA. £85 incl lunch. Contact **01822 617722** email info@tavistockphysio.co.uk.

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South East Hampshire

Clinical Hand Specialist

Job Ref: 449-APC022a

Salary: Band 8a 39,239 to 47,088 pa

An opportunity has arisen for a Band 8a Clinical Hand Specialist within the new Solent Specialist MSK Service. The post will cover clinics across the locality of South East Hampshire, including Southampton, Fareham, Gosport, Havant, Petersfield and Bordon.

You will be expected to undertake highly specialist assessments, interpreting the relevant clinical findings of complex patients with hand wrist or elbow pain, and where appropriate request and interpret diagnostic imaging to assist in their management. Injection qualification and experience is essential.

It is expected applicants are working at current extended scope level or actively working towards qualifications for both diagnostics and injection therapy.

If you wish to discuss the post please contact:
janis.cummins@solent.nhs.uk (MSK Operational Lead).

Closing Date: 29 October 2014

To view the job description and make an application, visit www.jobs.nhs.uk and search under the Job Ref number.

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Physiotherapist - Nissan

You, what we need!



Hours - 32 hours per week (over 4 days)

Location - Sunderland

Environment - Manufacturing (Automotive) - Nissan

Essential Skills

- 3 years clinic management of musculoskeletal experience
- Multi-disciplinary team experience with a focus on

Desirable Skills

- Manufacturing exposure
- Experience with Occupational Health setting
- Acupuncture qualifications/trained
- Ergonomics qualifications/trained

Where you will work!

Nissan is the largest car manufacturer in the UK and physiotherapy is seen as a vital resource with in a multidisciplinary team delivering early intervention care to help maintain a healthy workforce. You have the opportunity to assess and treat all types of musculoskeletal injuries with referrals coming directly from the workplace. GP, Consultant, post operation, and onsite via the OHN and OHP. For complete patient care you also have direct access to the workplace therefore being able to assess jobs and advise on appropriate rehabilitation returning patient back to work.

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We are looking for a self motivated, enthusiastic musculoskeletal physiotherapist with three or more years of postgraduate experience to join our friendly, well-established practice in Ashby de la Zouch, Leicestershire. Afternoon/evenings and some shared Saturday cover may be required. Some occupational health experience and AACCP memberships helpful but not essential. Please send CV and cover letter to: info@prophysiomidlands.co.uk All enquiries welcome.

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LONDON SE1 Private physiotherapy clinic looking for full-time senior musculoskeletal outpatient physiotherapist. Applicant must have experience

in outpatient/musculoskeletal physiotherapy. Acupuncture an advantage, but not essential. Applicant must be CSP and HCPC registered. Immediate start, salary 25K for 37.5 hours a week, with company benefits. Apply to: info@back2normal.co.uk Closing date 31 October.

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CONGLETON, CHESHIRE Associate physiotherapist (musculoskeletal) for busy high street practice. Facilities include treatment rooms and rehab/Pilates studio. Established caseload. Pilates and acupuncture training an advantage. Two evenings and alternate Saturday mornings (negotiable). CV or further details to Marie Robert-Blunn, email: info@norrisassociates.co.uk

15 October 2014

WE ARE LOOKING FOR a part-time enthusiastic, highly motivated and ambitious musculoskeletal physiotherapist for evening/Saturday/daytime post, within a well-established, expanding private practice. HCPC registered essential. Start date November/December 2014. To apply send your availability and CV with a covering letter to: info@mpsic.co.uk

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Jo Winton



AS A FELLOWSHIP-TRAINED UPPER LIMB ADVANCED PRACTITIONER, JO WINTON IS KEEN TO PROMOTE A RESEARCH-BASED CULTURE IN THE NHS

Tell us about the fellowship

The upper limb physiotherapy fellowship is an innovative new post that has been pioneered to reflect recent NHS reforms and the wider skill set demanded of advanced practitioners. Central to the purpose of the new role is engendering a culture of research; establishing routine collection of patient reported outcome measures alongside clinical practice; and to coordinate research activity within the unit. It is a three-year appointment that has resulted from the working partnership and shared vision of specialist physiotherapists, orthopaedic surgeons and industry sponsors. Through supporting the development of a physiotherapist as an advanced practitioner and clinical researcher, it emphasises the symbiosis between research and clinical practice that is essential for modern healthcare delivery.

What have you achieved personally?

This has been the most amazing opportunity of my career! I have been personally mentored by Jo Gibson, an internationally renowned upper limb clinical physiotherapy specialist, and a team of specialist orthopaedic consultants at the Liverpool upper limb unit. In addition, the role has enabled me to underpin clinical and research competency by completion of the MSc in advanced practice at the University of Liverpool. It has been a challenging and rewarding opportunity that has enabled me to develop both my clinical and research skills to a high level.

Has the team and trust benefited?

The Royal Liverpool and Broadgreen University Hospitals NHS trust has a wealth of clinician expertise and patient-rich resources that were not being utilised to their full potential due to the usual constraints of pressurised service delivery. The fellowship has been successful in creating a culture of research and establishing the infrastructure to make it possible. There has been a commensurate increase in research activity and ultimately the vision of clinician led research has become a reality. I am now the allied health professional representative in the north west surgical trials centre orthopaedic specialist group, ensuring that both the trust and the physiotherapy profession are at the forefront of research delivery.

And the patients?

My clinical role involves me treating a caseload of patients with complex shoulder and elbow pathologies. Many of them have undergone multiple courses of unsuccessful physio and have associated psychosocial issues compounding their recovery. The role has given me the time to develop my clinical reasoning skills and critically reflect on my practice. Mentorship from Jo and support from other specialist clinicians in the team, together with opportunities to network with regional and national specialist interest groups, has widened my treatment repertoire. It has been exciting to see positive outcomes in complex patient groups resulting from

modern evidence-based approaches to treatment. I endeavour to share this knowledge and skills with others.

Should more fellowships be created?

The development of this inaugural fellowship post has not been without its challenges. Its emergent nature has necessitated considerable dedication from the whole team here in the Liverpool upper limb unit to facilitate its success and we are learning from our mistakes as it evolves. We have developed a competency assessment framework for the post to provide an explicit structure for clinician development with measurable outcomes. The industry sponsors have been overwhelmed by its achievements and as a result have committed to continued funding and are keen to roll the model out in other trusts.

What's next for you?

I need to find a job! This is a three-year post with development at its core. The fellowship has opened up new avenues. In my heart of hearts I am a clinician, but through the fellowship I have developed a skill set that enables me to ensure that research is embedded into the core of clinical practice. I endeavour to help drive forward the physiotherapy research agenda and contribute to the expanding evidence base that the profession so desperately deserves. *fl*

Jo Winton is an upper limb advanced physiotherapy practitioner

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