

**Osteopathic International Alliance (OIA)
Annual General Meeting Minutes
Hilton Austin Hotel – Salon A
Austin, Texas
11 January 2014
16:15-17:45**

Full Members Present

American Osteopathic Association (AOA-US)–Dr Norman Vinn, Dr Robert Juhasz, Dr Ronald Burns, Dr Boyd Buser, Ms Adrienne White-Faines
Australian Osteopathic Association (AOA-AU)–Mr Michael Mulholland-Licht, Mr Antony Nicholas
British Osteopathic Association (BOA)–Mr Maurice Cheng, Ms Marina Urquhart-Pullen
General Osteopathic Council (GOsC)–Mr Tim Walker
German American Association for Osteopathy (DAAO)–Dr Frank Mueller
German Association for Osteopathic Medicine (DGOM)–Dr med Johannes Mayer
German Osteopathic Association (VOD)–Ms Marina Fuhrmann
Medecins Osteopathes De France–Le Syndicat (ODFS)–Dr Jean-Michel Besnard, Dr Alain Wurtz

Associate and Partner Members Present

American Academy of Osteopathy (AAO)–Dr Jane Carreiro
American Association of Osteopathic Examiners (AAOE)–Dr James Griffin, Dr Jeremy Edmonds, Dr Ernest Miller
Australian and New Zealand Osteopathic Council (ANZOC)–Ms Rachel Portelli
AVT College of Osteopathic Medicine (AVT)–Mr Matthias Beck
Belgian Society of Osteopathy (SBO-BVO)–Mr Christian Gerrard, Mr Eric Dobbelaere
bvo, Bundesverband Osteopathie e.V. (BVO)–Mr Mathias Hartlep
Canadian Federation of Osteopaths (CFO)–Ms Gail Abernethy, Ms Chantale Bertrand
Consiglio Superiore d'Osteopatia (CSdO)–Mr Carmine Castagna, Mr Simon Duncan,
Japan Osteopathic Federation (JOF)–Mr Yoshiteru Hiratsuka
Institute of Osteopathic Medicine (IOM)–Dr Irina Egorova
Lincoln Memorial University/DeBusk College of Osteopathic Medicine (LMU/DCOM)–Dr John Williamson
Michigan State University College of Osteopathic Medicine (MSUCOM)–Dr William Strampel
National Board of Osteopathic Medical Examiners (NBOME)–Dr Wayne Carlson, Dr Dennis Dowling, Dr John Gimpel, Dr Janice Knebl, Dr Gary Slick, Ms Sandra Waters
Ontario Association of Osteopathic Manual Practitioners (OAO)–Ms Elizabeth Leach, Ms Catherine Cabral-Marotta, Ms Kari Hope
Osteopathie Quebec (OQ)–Mr Alain Bouchard, Ms Carole Dumais, Ms Velda Lulic
Osteopathic Council of New Zealand (OCNZ)–Ms Emma Fairs
Osteopathic European Academic Network (OsEAN)–Mr Raimund Engel
Registro Brasileiro dos Osteopatas (RBrO)–Ms Ana Paula Antunes Ferreira
Society for the Promotion of Manual Practice Osteopathy (SPMPO)–Ms Gail Abernethy
Student Osteopathic Medical Association (SOMA) –Student Doctor Lauren Fetsko
West Virginia School of Osteopathic Medicine (WVSOM)–Dr Zachary Comeaux, Professor Adrienne Belafonte Biesemeyer

Guests

CORPP (Belgium)–Patrick van Dun
Des Moines University College of Osteopathic Medicine/Council of Osteopathic Student
Government Presidents–Student Doctor Tara Hughes, Student Doctor Mali Schneiter
GNRPO (Belgium)–Mr Eric Dobbelaere
National Council for Osteopathic Research (UK)–Dr Dawn Carnes
Osteopathic Board of Australia (OBA)–Mr Robert Fendall, Dr Cathy Woodward
Osteopathic Research Center–Dr John Licciardone
St Barnabas Hospital, New York–Dr Elizabeth Caron

Board Members in Attendance

Mr Michael Mulholland-Licht, Chair
Dr Jane Carreiro, Vice-chair
Dr Peter Ajluni, Secretary-Treasurer
Dr William Burke
Mr Simon Fielding
Mr Charles Hunt
Dr med Johannes Mayer
Dr Karen Nichols
Mr Tim Walker

Staff

Ms Linda Mascheri, OIA Secretariat
Mr Joshua Kerr, OIA Secretariat

1 Board and Member Introductions

2 The chair opened the meeting with introductions of the OIA Board members and a welcome to the
3 attendees.

4

5 Approval of Minutes

6 **The Full membership moved, seconded and unanimously approved** *the minutes from the 2012*
7 *Annual General Meeting as presented.*

8

9 Board Reports

10 The Board of Directors presented their annual report to the membership from September 2012
11 through December 2013.

12

13 OIA Status Reports, Stages 1 & 2

14 Stage 1

15 The Status Report on Osteopathy, Stage 1 was published in March 2012 and is available on the
16 OIA's website, presenting an in-depth look at the osteopathic profession. The document covers
17 osteopathy/osteopathic medicine in its historical and current context, osteopathic core
18 competencies, existing regulatory models, and educational standards worldwide. The report was
19 developed by the OIA Board of Directors, with input from its member organizations and in concert
20 with the World Health Organization (WHO).

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Stage 2

Osteopathy and Osteopathic Medicine: A Global View of Practice, Patients, Education and the Contribution to Healthcare Delivery describe the current state of osteopathy and osteopathic medicine globally and how these disciplines interact with national health systems across a range of countries. A survey carried out for Stage Two produced an audit of current osteopathic practice, based on a global ‘snapshot’ of patients; the data from this survey have been used in the preparation of the report. *Osteopathy and Osteopathic Medicine: A Global View of Practice, Patients, Education and the Contribution to Healthcare Delivery* complements the OIA’s existing research by drawing together data from around the world to describe the extent and role of osteopathic practice. While some national studies exist, this is the first such analysis incorporating an international perspective. The OIA invited Dr Zhang Qi, coordinator, Traditional and Complimentary Medicine Unit of the World Health Organisation to provide the introduction and offer input on the set-up of the document.

The report addresses some key questions: Who are the practitioners, and is the composition of the profession changing? How many people seek osteopathic treatment and for what main conditions? Who pays? To what extent is osteopathic practice integrated within national health systems? And how do the various regulatory and accreditation systems for osteopathy and osteopathic medicine function around the world? The target audience includes: national and international policymakers; health ministers; government departments; nongovernmental organisations; educators and students; health media; and interested members of the public. The report aims to inform readers about the current scale of osteopathic practice and how patients served by national healthcare systems also use osteopathic treatment.

World Health Organisation

The OIA has moved forward its relationship with the World Health Organisation (WHO) since our Paris Conference. OIA representatives met with Dr Zhang Qi, coordinator, Traditional and Complimentary Medicine Unit, in Geneva in May 2013. Further, Mr Mulholland-Licht was invited to attend the launch of the WHO Traditional and Complementary Medicine (TM) Strategy, 2014-2023 and participate in WHO High-Level Meeting on the Implementation of WHO TM Strategy in Macau, China in October 2013. The OIA provided several statistics from its Stage 2 document to the WHO, which were included in the TM Strategy document, which has been published and is available for download from the WHO website. The OIA is currently in a working relationship with the WHO with the aim of progressing to an official partnership after another 12 months of cooperation.

OIA Meetings

Chicago Board Meeting – 19-20 October at the AOA-US Headquarters

The Board of Directors met in Chicago at the American Osteopathic Association’s (AOA-US) headquarters. The 2013 Fall meeting focused on strategic planning and preparing for our Austin Conference. The Board’s major actions included the development of a 2014-2016 strategic plan to inform annual operational & business plans; finalization of the Status Report on Osteopathy, Stage 2; and continued facilitation of the development of a research network, which is meeting during the Austin Conference and will explore the potential for strategic partnerships.

Strategic Planning

1 The OIA Board held a strategic planning session at its Chicago meeting, in October in order to
2 develop a new, more focused plan for 2014-2016. Following drafting of the new plan, the Board
3 sent it to members for comment. The Board is now working under the new plan.
4

5 **International Osteopathic Awareness Week**

6 International Osteopathic Awareness Week was launched 14-18 April 2013. The Board encouraged
7 all of their member organizations to share any documents that they use to discuss the osteopathic
8 profession in their country. A larger global osteopathic awareness week will be planned for 2014
9 with better lead time to prepare. The OIA received promotional material on osteopathic awareness
10 week from the American Osteopathic Association, the Australian Osteopathic Association and the
11 Swiss Federation of Osteopaths. The 2014 International Osteopathic Healthcare Week will take
12 place 13-19 April.
13

14 **Olympic Initiative**

15 Mr Walker reported that the OIA Board of Directors surveyed and collected information from
16 member organisations regarding osteopathic practitioners treating Olympians, past and present. The
17 Board polled members about which practitioners treat or have Olympians; in which sports; and if
18 the athletes won medals. This information was collated and prepared for a press release that was
19 released to publications in North America, Europe and Australasia, as well as being made available
20 to our member organisations during the 2012 London Olympic Games.
21

22 **5-Year Reviews**

23 In 2013 the OIA completed its first 5-year review process. The information received will help the
24 OIA ensure that its members are still in the correct membership category and, for Full members; it
25 will determine membership dues for the next year. Mr Fielding reported that the following
26 organisations are scheduled for a 5-year review:
27

28 Full Member:	German Osteopathic Association (VOD)
29 Associate Members:	Canadian Federation of Osteopaths (CFO)
	Consiglio Superiore di Osteopatia (CSdO)
31 Partner Members:	Centre International d'Osteopathie (CIDO)
	College Osteopathique de Provence (COP)
	Osteopathic Council of New Zealand (OCNZ)
	Osteopathie Quebec (OQ)
	Sutherland Cranial Teaching Foundation Belgium (SCTF Belgium)

37 **OIA Membership and New Benefits**

38 As of 1 January 2014, there are seventy-one (71) members of the Alliance.

- 39 • Nine (9) Full members – AOA-US, AOA-AU, BOA, DAAO, DGOM, FSO/SVO, OFSD,
40 SAGOM, VOD
- 41 • Nine (9) Associate members – SBO-SBO, CFO, CSdO, JOF, NAO, RBrO, ROB, ROR, UNRO
- 42 • Fifty-two (52) Partner members – thirty-four (33) schools, seventeen (17) national/regional
43 organisations and two (2) international organisations.
44

45 Mr Mulholland-Licht and Mr Walker presented a chart of the new membership benefits noting
46 that all OIA members have the ability to:

- 47 • Make an impact on the global osteopathic profession,

- 1 • Connect with more than 70 organisations that represent over 11,000 practitioners in nearly
- 2 30 countries,
- 3 • Have the opportunity to host an OIA Annual Conference,
- 4 • Nominate individuals for the Board of Directors,
- 5 • Receive quarterly OIA Newsletters,
- 6 • Have access to the Status Reports Stages 1 & 2, and
- 7 • Benefits of the OIA’s partnership with the World Health Organisation

8

9 **OIA Secretary-Treasurer Report**

10 Dr Ajluni reported that 89% of OIA’s 2014 projected dues have been received. However, this does

11 not include expenses incurred from this conference. Registration for the conference totalled 72

12 attendees at the conference. This includes registrants, Board, speakers, leadership and staff.

13

14 Mr Mulholland-Licht ported that the OIA Board revised its Memorandum of Understanding to the

15 AOA-US that will increase the amount of its payment to US \$25,000 per year for administrative

16 services in 2014, then increase by US \$5,000 per year to a maximum of \$35,000 in 2016. This

17 agreement includes staff support, IT and telecom services, website revisions and office occupancy

18 costs for the day to day functions of the OIA.

19

20 Stage 2 Document: Dr Ajluni reported that the final costs for the development of the document and

21 accompanying publications totalled US \$32,054.

22

23 The **Full membership approved** *the 2013 Secretary-Treasurer Report as presented.*

24

25 **Committee Reports**

26 **Governance Committee:** Mr Walker explained that this committee was charged with reviewing

27 the bylaws and policy and procedures manual for updating. The proposed change was approved by

28 the Board and now presented to the membership for consideration.

29

30 **Proposed OIA Bylaws Changes**

31 Mr Walker presented the proposed bylaws changes to the members:

Current Bylaws Wording	Proposed New Wording	Rationale
Article V: Section 3. Number, Term, and Qualifications		

<p>The maximum number of Directors shall be nine (9), as established by resolution of the Board.</p> <p>Representatives of all member organizations in good standing shall be eligible for election as directors. Six (6) positions shall be allocated for Full members, and the remaining three can be filled by Associate or Partner members. Of the six seats allocated for Full members, two (2) positions on the Board shall be reserved for Representatives of the Osteopathic Physician organization with the greatest number of votes, and one (1) position on the Board shall be reserved for a Representative of the Osteopaths' organization with the greatest number of votes.</p> <p>One (1) to three (3) lay members may be elected to the Board for a three year term. No more than three (3) lay members in total may serve on the board at one time (including representatives of full members). All Directors shall hold office for a term of three (3) years from his/her selection and can be elected to a second three (3) year term but cannot serve more than two (2) consecutive terms. Each Director shall continue to hold office until his or her successor has been elected.</p>	<p>The maximum number of Directors on the Board shall be nine (9), as established by resolution of the Board.</p> <p>Two (2) seats on the Board shall be allocated for the nominees of the osteopathic physician or osteopath organisation with the greatest number of members, and one (1) seat on the Board shall be allocated for the nominee of the organisation with the greatest number of members from the other stream of the profession.</p> <p>Six (6) further seats on the Board will be filled by election at the AGM.</p> <p>No less than six (6) members of the Board shall hold a qualification that makes them eligible to practise as an osteopath or osteopathic physician.</p> <p>Terms of office for all Directors are three (3) years. All Directors are eligible for re-election or re-appointment to the Board but cannot serve more than two (2) terms in succession.</p> <p>Each Director shall continue to hold office until his or her successor has been elected or appointed.</p>	<p>The Board agreed to the following principles for the composition of the Board, which are reflected in the new proposed wording:</p> <ul style="list-style-type: none"> • A board of nine members • The organisations making nominations should be in good standing • There should be two board seats reserved for the biggest osteopathic physician or osteopath organisation • There should be one board seat for the biggest organisation from the other stream of the profession • One to three members of the board may be either non-osteopaths/osteopathic physicians or from outside the OIA membership (i.e. lay by any definition) • Terms of office are three years • Directors can be re-elected for a second term • Directors can return to the board but only after a break • Directors hold office until their successor is elected
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The **Full membership unanimously approved** *the proposed bylaws changes as presented.*

Note: This bylaws change will be implemented with the London Conference.

Membership Committee: Mr Fielding reported that, since the Paris Annual General Meeting, the committee recommended and the Board approved the following 4 new Partner members and 1 Full member converted to Partner membership. The committee is awaiting additional information on 2 applications and 1 Full member was dissolved.

New Partner members:

- Australian and New Zealand Osteopathic Council (ANZOC)
- IMT – Instituto de Medicina Tradicional (IMT)
- Ontario Federation of Osteopathic Professionals (OFOP)
- Osteopathy Board of Australia (OBA)

Change from Full to Partner Member:

- General Osteopathic Council (GOSc)

Member Relations Committee: Mr Hunt reported that this committee's primary project is International Osteopathic Healthcare Week. Last year's event was held 14-18 April 2013 and several members participated by providing their members and patients with information about the osteopathic profession and its benefits. During 13-19 April 2014 the committee is encouraging

1 members to educate the public about the profession, and to donate money or care to organisations
2 or patients in need.

3
4 **External Relations Committee/WHO Editorial Committee:** This report is covered within
5 the WHO update.

6 7 **OIA Status Reports – Stage 2**

8 The Stage 2 document was published in April 2012 and is available on the OIA’s website to present
9 the broad range of the osteopathic profession, including both streams: osteopathic physicians and
10 osteopaths worldwide. The report has been developed by the OIA Board of Directors, with input
11 from its member organisations and in concert with the World Health Organisation (WHO).

12
13 The OIA is now focused on Stage 2, an epidemiology survey of the osteopathic profession that will
14 create a snapshot of the practice of the profession. The OIA worked in cooperation with the WHO
15 to create the survey, which aims to answer questions such as: what are we really doing, what are our
16 educational standards, what kind of complaints we treat, what diagnoses we find, what methods we
17 use, what roles the profession plays for income and what place osteopathy/osteopathic medicine has
18 in health care. The survey was distributed to osteopathic physicians and osteopaths all around the
19 world and offered in a half dozen languages.

20
21 **Presentation of the OIA Website Redesign:** the OIA created a new website that has been
22 developed by the board of Directors and the Member Relations Committee. All members are
23 invited to look over the website and provide comments to the OIA staff.

24
25 **Conference Organising Committee:** Mr Mulholland-Licht noted the outstanding work that
26 this committee has been doing. Dr Nichols noted that the OIA is an organisation of organisations
27 and not of individuals. For this reason, the Organising Committee has had numerous discussions to
28 determine the appropriate focus for its conferences that would provide content value that would
29 meet the needs of the individual associations’ members. Therefore the OIA conferences will
30 present programming for the member organisations and will encourage the co-sponsoring
31 organisation to feel free to include techniques and training sessions to meet the needs of their own
32 individual members.

33
34 Dr Nichols reviewed the OIA Conference Host Criteria document. She explained that the OIA
35 Board appointed an organising committee to ensure continuity of its conference and programme
36 planning. The Committee will include the past-programme chair and the local chairs for future
37 venues. This will provide past planning experience and ensure the continuity of the format.
38 Through review of members’ feedback from previous conferences the committee identified four
39 topic areas (pillars) of greatest interest and value to attendees and their organisations: Education,
40 Regulation, Research and Association Management. An honorary chair will be appointed from the
41 host country to work with the committee.

42
43 The following conferences have been scheduled:

44 London Conference: 3-5 October in partnership with the British Osteopathic Association

45
46 Montreal Conference: 25-27 September 2015 in partnership with Osteopathy Quebec.
47

1 **2013 Nomination Task Force:** Dr Nichols stated that the task force would provide a full
2 report during the Candidates Forum.

3
4 **Nomination Committee:** In accordance with the OIA bylaws, the Board chair has appointed a
5 three-person Nomination committee to carry out the next elections to the Board of Directors. The
6 Full membership will vote on the three (3) seats – one (1) by acclamation – up for election at the
7 Austin, Texas, USA AGM. Each seat's term is three-years (3), limited to two (2) consecutive terms,
8 which begin immediately following the OIA's Annual General Meeting.

9
10 The Nomination task force is comprised of the following members:

11 Dr Karen Nichols, Chair

12 Dr Peter Ajluni

13 Prof Marina Fuhrmann

14 (Mr Michael Mulholland-Licht, Board Chair and ex-officio member)

15
16 The current OIA Full member organisations and their total votes are:

17 American Osteopathic Association (AOA-US) – 6 Votes

18 Australian Osteopathic Association (AOA-AU) – 2 Votes

19 British Osteopathic Association (BOA) – 3 Votes

20 Osteopathic Physicians of France – Le Syndicat (ODFS) – 2 Votes

21
22 2 Votes shared between the Swiss Delegation:

23 Swiss Federation of Osteopaths (FSO-SVO)

24 Swiss Organisation of Osteopathic Physicians (SAGOM)

25
26 3 Votes shared among German Delegation:

27 German-American Academy of Osteopathy (DAAO)

28 German Association for Osteopathic Medicine (DGOM)

29 German Osteopathic Association (VOD)

30
31 The total votes stand at 18, with no delegation holding more than 33%.

32 33 **Qualification Guidelines**

34 **Bylaws Excerpt:**

35 **Article V – Board of Directors – Section 3. Number, Term, and Qualifications.**

36 The maximum number of Directors shall be nine (9), as established by resolution of the Board.

37 **Representatives of all member organizations in good standing shall be eligible for election**
38 **as directors. Six (6) positions shall be allocated for Full members, and the remaining three**
39 **can be filled by Associate or Partner members.** Of the six seats allocated for Full members, two
40 (2) positions on the Board shall be reserved for Representatives of the Osteopathic Physician
41 organization with the greatest number of votes, and one (1) position on the Board shall be reserved
42 for a Representative of the Osteopaths' organization with the greatest number of votes.

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44 One (1) to three (3) lay members may be elected to the Board for a three year term. No more than
45 three (3) lay members in total may serve on the board at one time (including representatives of full
46 members). All Directors shall hold office for a term of three (3) years from his/her selection and

1 can be elected to a second three (3) year term but cannot serve more than two (2) consecutive terms.
2 Each Director shall continue to hold office until his or her successor has been elected.

3
4 **The three (3) Board positions that are up for election in September are:**

- 5 1. **Mr Simon Fielding, Lay member**
- 6 2. **Dr med Johannes Mayer, At-large member from the German Association for**
- 7 **Osteopathic Medicine**
- 8 3. **Mr Tim Walker, At-large member from the General Osteopathic Council**

9
10 The designated osteopath seat, reserved for the largest Full member osteopath organisation, will be
11 filled by that organisation's designee, by acclamation, according to the bylaws.

12
13 Mr Fielding and Dr med Mayer are completing their second terms and are therefore not eligible for
14 re-election at this time. Dr Jane Carreiro thanked these Board members for their tireless
15 contributions and service on the Board.

16
17 **There will be one (1) seat filled by acclamation by the largest osteopath organisation and the**
18 **election of two (2) additional representatives from the list of nominees collected by the**
19 **Nominating committee.**

20 21 **Voting procedures**

22 Dr Nichols summarised the voting procedures, noting that each delegate would be given one ballot
23 for each of their allotted votes.

24 25 **Current Board members (terms not expiring this year):**

- 26 • Michael Mulholland-Licht, DO (AU), Chair, Nominated from the AOA-AU
- 27 • Jane Carreiro, DO (US), Vice-chair, Nominated by the AAO
- 28 • Peter Ajluni, DO (US) °, Secretary-Treasurer, Nominated by and representing the AOA-US
- 29 • William Burke, DO (US)*, nominated by the AOA-US (Full member - guaranteed seat)
- 30 • Charles Hunt, DO (UK), nominated by the BOA and GOsC from the BSO (Partner
- 31 member)
- 32 • Karen Nichols, DO (US)*, nominated by the AOA-US (Full member-guaranteed seat)

33 34 **Board members terms expiring:**

- 35 • Simon Fielding, DO (UK)°, OBE, Nominated by AOA-US, Lay member (no organisational
- 36 representation)
- 37 • Johannes Mayer, MD, DOM (DE)°, Nominated by the DAAO from the DGOM
- 38 • Tim Walker*, Nominated from the GOsC

39
40 Mr Kerr then reviewed the voting structure pertaining to Board elections. The structure is based on
41 membership numbers, where each country delegation has a minimum of two votes. One additional
42 vote is accumulated per every 2,000 members, with no organisation having more than 33% of the
43 total votes. Currently Australia, France, Switzerland, New Zealand delegations have two votes;
44 United Kingdom (delegation shared by the GOsC and the BOA) and Germany (delegation shared
45 by the DGOM, DAAO and VOD) delegations have three votes, and the American Delegation is
46 capped at eight votes, for a total of 21 votes.

1
2 **Austin election procedure:** The GOsC designated seat being vacated by Mr Walker will be
3 filled by the BOA designee (Ms Urquhart-Pullen), by acclamation, according to the bylaws. As
4 indicated in previous communications to OIA members regarding the nominations process, the
5 OIA bylaws state “the maximum number of Directors shall be nine (9), as established by resolution
6 of the Board. Representatives of all member organisations in good standing shall be eligible for
7 election as directors. Six (6) positions shall be allocated for Full members, and the remaining three
8 can be filled by Associate, Partner or lay members. Therefore, in order to remain in compliance with
9 the OIA bylaws, Dr med Wurtz must be elected to maintain the requirement of six board members
10 coming from OIA Full member organisations. The remaining seat will then be filled by the election
11 of one of the three remaining candidates (Ms Ferreira, Dr Gimpel or Dr Hilton).
12

13 **Candidates’ Forum**

14 **Candidates Comments:** Dr Nichols introduced the following candidates and asked each of them
15 to speak briefly to the membership about why they should be elected to the Board of Directors.
16

- 17 • Ana Paula Ferreira, DO (BR), nominated by the General Osteopathic Council from the
18 Registro Brasileiro dos Osteopatas (Associate member)
- 19 • John R. Gimpel DO (US), M.Ed., nominated by the National Board of Osteopathic Medical
20 Examiners (Partner member)
- 21 • Craig Hilton PhD, nominated by the Osteopathic Council of New Zealand from Unitec
22 New Zealand (Partner member)
- 23 • Marina Urquhart-Pullen DO (UK), nominated by the British Osteopathic Association (Full
24 member)
- 25 • Alain Wurtz, MD, DO (FR), nominated by the Ostéos de France/ Syndicate (Full member)
26

27 Dr Hilton was not in attendance but Ms Emma Fairs presented in his absence. Following the
28 candidates’ remarks, Mr Fielding and Dr med Mayer were presented with gifts and thanks for their
29 service to the Board and the osteopathic profession as their terms concluded.
30

31 **Board Election Results**

32 The Full member representatives were given their voting ballots. The elections resulted in Marina
33 Urquhart-Pullen (BOA) being elected by acclamation to her first term. In order to remain in
34 compliance with the OIA bylaws, Dr med Wurtz (Osteos de France/Syndicate) must be elected to
35 maintain the requirements of six board members coming from the OIA Full member organisations.
36 Ana Paula Antunes Ferreira (RBrO) will fill the remaining seat. All are three-year terms.
37

38 **General Questions and Answers**

39 The chair thanked the membership for its continued support of the Alliance, and acknowledged the
40 American Osteopathic Association (AOA-US) and the American Association of Osteopathic
41 Examiners (AAOE) for making this Conference a great success. And, thanked the staff for their
42 work and support of this conference.
43

44 The 2014 Austin Annual General Meeting was adjourned.