

# Emirates Osteopathic Conference

September 28–29, 2018  
Dubai, United Arab Emirates



# Association panel

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CHALLENGES AND METHODS FOR AFFECTING CHANGE:

**SCEPTICS** (TACKLE THE CAUSE, NOT THE SYMPTOMS)



# Maurice Cheng

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CHIEF EXECUTIVE

INSTITUTE OF OSTEOPATHY



# The Symptom: Sceptic campaign

- 2015: 30 advertising related complaints per month raised with GOsC
- Basis of complaint: non conformity with Advertising standards equals to unprofessional conduct
- 400 complaints raised in sustained campaign
- Advertising Standards Authority drawn into issue

- ASA agrees that:
  - Cranial osteopathy is a part of osteopathy
  - Osteopaths are trained to treat all patient groups including pregnant women, children and babies
  - Osteopaths can refer to conditions for which medical intervention should be sought
  - They should review the threshold for evidence
  - They will add to The List as further evidence is provided

# Two years on..

- ASA copy advice team manager has left
  - Copy advice beginning to be inconsistent again
- Senior managers responsible for liaison has moved onto other projects
- Promised review of evidence thresholds has not yet happened
- Some osteopaths demanding more 'wins'

- Describing our approach to conditions not on The List
  - Treatment of symptoms around core condition
  - ‘Impressionistic’ claims
  - Use of small scale studies to support approach
- Developing the evidence for the changing of evidence thresholds
- Gathering new evidence to add to The List

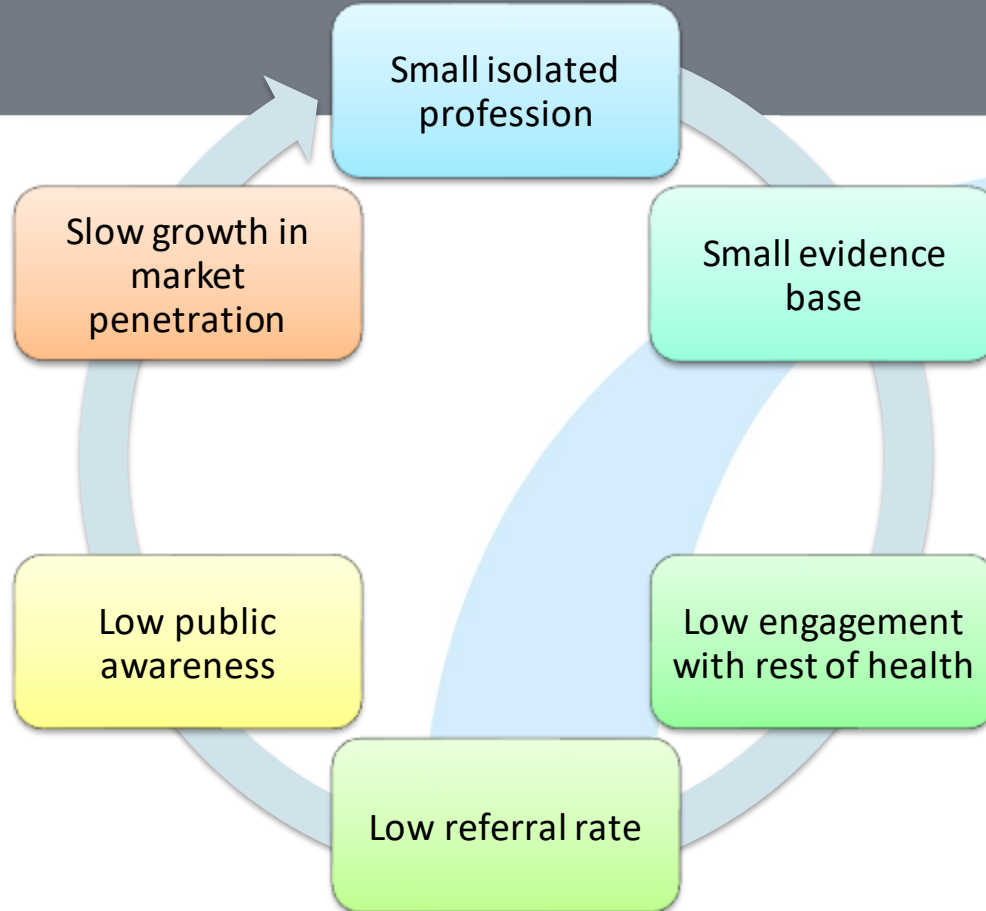
# Diagnosing the cause

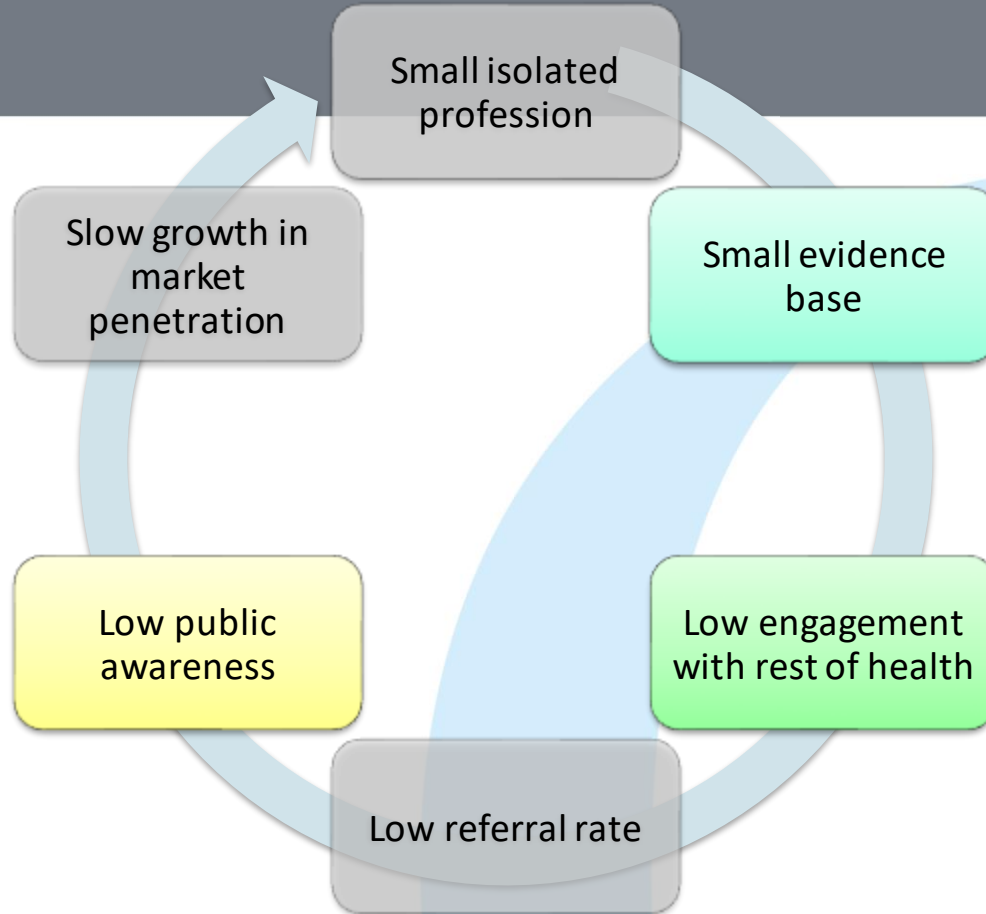
- A century of osteopathy in Britain
  - BOA established 1913; BSO established 1917
  - First regulation near miss 1935 (private member's bill)
  - Osteopaths' Act 1993; General Osteopathic Council 1998
  - BSO becomes University College of Osteopathy 2017
- 2 percent of population use an osteopath each year
  - 10 percent have ever used (YouGov poll 2014)
  - Patients like osteopaths a lot; Non patients know little (GOsC 2014)
- 2 percent of UK osteopaths work in the NHS (iO Census 2014/7)
  - Majority of GPs know little, some actively discourage patients



# A century of isolation

- GPs/Rest of Health do not understand osteopaths
  - No understanding = No referrals
- Osteopaths do not understand Rest of Health systems
  - No understanding = Reduced opportunity for employment or multidisciplinary patient care
- BUT we know that osteopaths get great results working in a multidisciplinary setting
  - Nottingham QMC Spinal Surgery Unit
  - Back Pain service in West of England





- Make public information about osteopathic practice and outcomes easy to understand: ‘Compendium’
- Change the conversation: ‘Brand Osteopath’
- Gather cost effective information: PROMs/patient narratives/case studies/others
- Broader, deeper engagement with
  - Rest of health
  - The osteopathic community



# Physiotherapy Works: help make the case for more physiotherapy

We're asking you to share it with the rest of the world



Log in or register to post comments

THE COMBINED COST OF HOSPITALS AND SOCIAL CARE FOR

**£2 billion**  
(£6 million a day)

(The National Hip Fracture Database National Research Programme in partnership with the British Orthopaedic Association with the Institute of Osteopathy)

BASED ON 2009/10 COSTS

**£10,170**

(Department of Health Payment by results guidance: [www.dh.gov.uk/en/publicationsandstatistics/Pages](http://www.dh.gov.uk/en/publicationsandstatistics/Pages))

Over the next three years the CSP will be working with the NHS to ensure there is more physiotherapy.

## IN THIS ISSUE

### Osteopathy For Health

Today's society places ever increasing demands on our time. With the pressures of juggling a career, domestic tasks, managing the finances, and caring for those we love, it can be difficult to concentrate on our own health. It is often only when our health begins to suffer and our body starts to send out alarm signals forcing us to slow down, that we truly begin to focus on ourselves.

Every time for yourself every day, to eat healthily, exercise and focus on your inner wellbeing, you will be developing a variety of serious health conditions. Not only will this benefit your health long-term, but you will be ensuring that you continue to be there for those you love for years to come.

As an osteopath, you are in a unique position to support the optimal environment for health in those we treat, by providing health guidance, manual therapy, tailored to the individual needs of those under our care. The following articles, written by osteopaths, offer tips on how by making just a few changes, you too can reap the rewards of a healthier life-style.

Information on these pages regularly. We would welcome suggestions on content that you would find useful from our osteopaths to support your health. Please email our team at [comms@Osteopathy.org](mailto:comms@Osteopathy.org)



### The Osteopathic Quality Account

By the Institute of Osteopathy

This document brings together existing research on the patient experience, clinical effectiveness and safety of osteopathic practice.



#### Get Active

As we live longer in the UK it is tempting to think that, over time, it is an important time to focus on our health, especially as the number of people over 65 is rising faster than any other age group. We share the essential tips for staying active.

We all know that keeping active is good for our bodies, our minds and has many benefits. Not sure where to start? Read advice from our osteopath on how much physical activity you should be aiming for, how to get started or become more active, and about the positive influence that physical activity can have on your health.



#### Sleep Better

Everyone knows the feeling after a bad night's sleep, often irritable and unproductive. Longer lasting sleep disruption can have a much more significant effect on both our mental wellbeing and our physical health. Find out more on how important getting a good night's sleep really is for your health and top tips to make you sleep better.

# Developing the osteopath brand

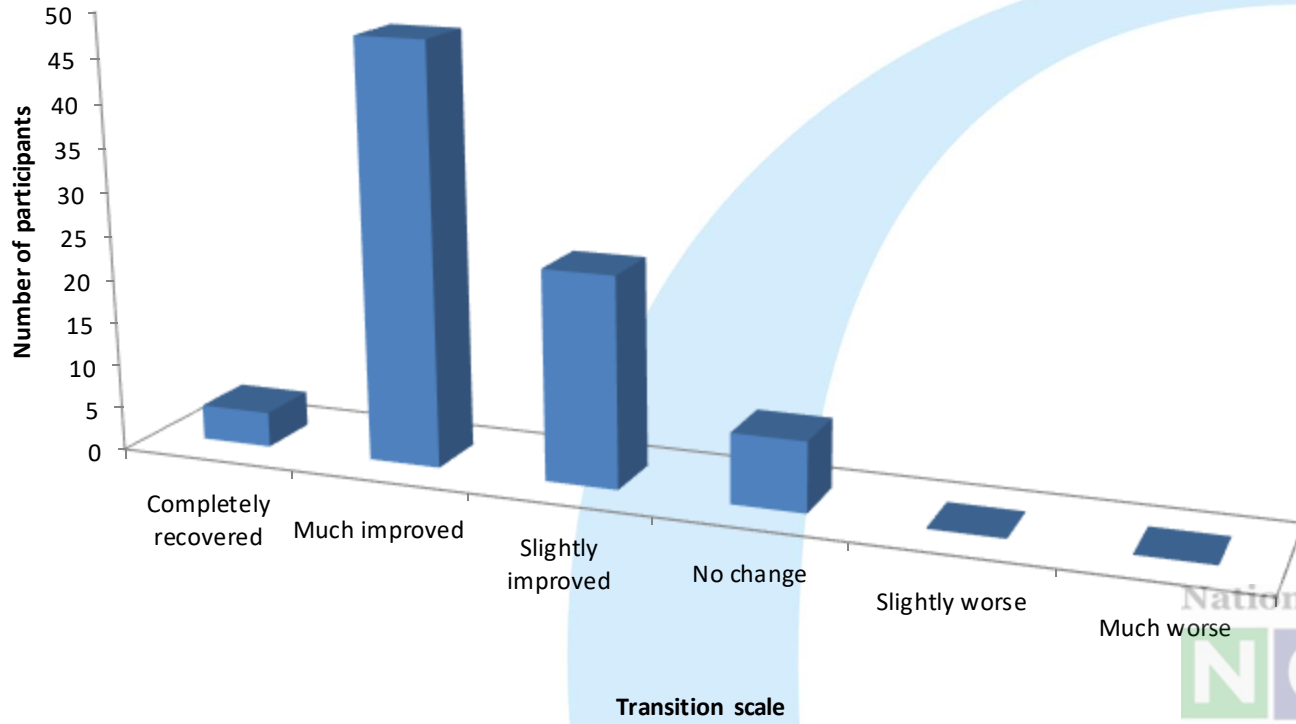


*“I love being able to interact with people, form bonds with patients and help them alleviate their pain.”*

~ Steven Chandler, DO



# PROMs: Overall change 1 week post treatment





# Working in collaboration

## Collaborative contribution to UK health

- Allied Health Professional status
- PHE AHP strategy board
- NICE Fellowship
- First Point of Contact practitioner roles
- Council of Deans of Health



*Health Education England*



Public Health  
England



**NICE** National Institute for  
Health and Care Excellence

# Socialising osteopathic change

- Osteopathic Development Group
- Colleges have seats on iO Council
- Regular presentations with osteopath communities
- Engagement with student
- Strategy Workshop 2018
- Strategy Roadshow 2019

Thank you

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