

DECEMBER 2012

WLCSP
Newsletter

The Word From the Top
Fozzy's Forum
Continuing Professional Development
Insurance Matters

The word from the top

I am writing this following the successful regional meeting at Scarborough on the 12th October. There was a good turnout although it was disappointing that more members didn't join the group. These days it is so important that peer groups get together to discuss the current issues affecting practice.

To join in on sharing treatment approaches, reflecting on techniques and accumulating evidence to support activities is becoming essential. I spend much of my time providing medico-legal advice for a range of healthcare specialities including for members of the LCSP. Mercifully problems are relatively rare for the membership but, when criticisms are levelled at practitioners and their activities, one important component of refuting any allegations is the demonstration that there is peer evidence to support techniques utilised in treatment. If, in response to complaint or claim, it is possible to demonstrate that something that a particular practitioner did was in line with similar approaches adopted by colleagues, then the defence becomes easier. Where practitioners are isolated, it is often the case that their history taking, examination and treatment lag behind their peers. Peer review meetings of all types can meet the requirements to qualify for CPD.

Starting today we shall include tips about risk management in the magazine to help keep you all safe in your practice.

May I wish you all a very happy Christmas.

Dr. Paul Lambden

President



SAFETY TIP

These days consent is very important. Make sure you get it! For consent to be acceptable it must be valid. That means you must explain what you recommend, the risks and benefits and side-effects of the proposed treatment, other options and the consequences of having no treatment. Consent may be verbal or written; if verbal the notes should show that the consent issues were discussed and the patient agreed, if written you must be satisfied that the patient actually understood what they were given. It is a nuisance to write it down every time but it keeps you safer.

**Safety
First**



WEBSITE STATISTICS:

**Month of October 610 Unique visitors,
3200 pages viewed, average duration
3.5 minutes.**

Work continues to be done on the website to make it more public friendly, and thank you to the members who have contacted us with some concerns that have been addressed to make this more efficient. With the traffic numbers ever on the increase to the site it is proving to be a valuable free advertising tool for members, as such we are still offering you the opportunity of having an 'Enhanced Profile' on the site free of charge. This gives you a much greater opportunity to expand on the services you offer, include a photograph which is important as we are very much a people and personal business and generally give far more information to the prospective patient who is searching for a therapist in your locality. Make use of this, it costs you nothing and you can only stand to gain further patient referrals. Contact Jeff Gray at 'No Worries Marketing' who will deal with this for you.

2013 SUBSCRIPTIONS

It's good news time!

As an organisation we are continuing to invest in the future and are actively seeking marketing and promotional activities to benefit both the public by making our name and services more widely available and accepted, and supporting the individual members in their respective business developments. Naturally these activities have a cost implication to the Register, however, we are as a Board mindful of the present financial situation within our business sector and the Country generally. Therefore we have taken the decision to absorb these development costs within the Register for the forthcoming year. This means that for you as a practitioner member there will be NO INCREASE in any membership subscription rates for the year 2013.

I am sure that will come as a welcome relief to you all in these difficult times and I assure you that the whole Board will continue to promote, develop and advance the LCSP Register to our fullest capacity.

ALSO IN GOOD NEWS CORNER!

We are in the process of arranging a new deal with Locktons, one of the biggest insurance brokers in the world and specialists in Medical Malpractice Insurance to provide a comprehensive Insurance package for the LCSP Register membership. This will involve the Register itself purchasing a block membership scheme for the members. All the present cover levels you have will remain and there should be hopefully a fairly seamless transition over the renewal period at end of February. Prior to this all insured members will be contacted and asked to fill in a simple declaration to enable the insurers to build a database of our members requirements to ensure that full cover is maintained. There are other benefits available through this new partnership that offer security and protection that other companies do not. As your Secretary I am fully aware that there are cheaper insurance options and providers in the marketplace and I make no apology that our cover is more expensive, however I will state very clearly that whilst 'we do not do cheap. What we do, we do properly' Negotiations for the exact renewal figures for next year are still ongoing but we are optimistic that should there be any increase it will be at an absolute minimum.

It is the intention that both the membership subscription and insurance fee will be paid to the LCSP Register direct, so we will not have the inconvenience of sending two different amounts to two separate addresses as before and to further make the whole system easier and to allow for budgeting it is the intention to allow direct debit payments over a 10 month period to ease members cash flow.

BUDDY SCHEME

Thank you very much for the response received in my request for experienced practitioners to serve as a 'Buddy' for

new members, concerned members or indeed newly qualified members. If any other practitioners wish to assist please let me know and then we can roll out this additional facility and support tool to the wider membership.

NEW E-MAIL ADDRESS

All the members for whom we have electronic addresses will have received over the past month several prior warnings that the LCSP Register contact e-mail address will change from the 1st December this year, the new contact details are admin@lcsp.uk.com Simple reason for the change is that it gives us continuity with the website and overall gives a better professional image. Please amend any of your documents accordingly. Whilst we are talking about address changes, we all have times when we move either house practice or general contact details and I know that alerting everybody required can be an arduous task. We tend to be vigilant with utility companies and the like but it would appear that we at the Register office often get missed out. Please if you change any contact details then please let us know so we can amend our details accordingly. If we are asked for a therapists contact details, (which happens frequently) we can only give out the ones we have on file or available on the web and if these are not up to date then there is a possibility that it could lead to a potential lost patient. So please keep us in the loop.

Finally,

As it is now December it only remains for me to wish each and every one of you a very special Christmas season and may 2013 be filled with health and happiness.

Fozzy



Continuing Professional Development



We all have our 'box' of skills, I believe what is so wonderful about bodywork is that each therapist connects with different skills, and applies them in their own unique way; however the science behind it is the same.

One of my most useful tools is Muscle Energy Technique, so I thought I would use these pages as a beneficial review.

Whilst there is lots of debate in literature about how MET works. Some focus on the Golgi tendon organs, whereas some authors focus on the muscle spindle. It is best to have a clear understanding of the essential neurologic role of the muscle spindle

MET works the conscious, voluntary contraction of isolated muscles. Creating an isolated voluntary contraction is different from the muscle contraction we use in everyday life. Because the higher

brain centres are used to isolate muscle contraction, this is a unique neurologic effect, compared to those accomplished in everyday functional activities.

- Extradental fibres, these provide the force of muscle contraction and are innervated by alpha motor nerves.
- Intrafusal fibres, also called muscle spindles. These are activated by the gamma nerves, which act as sensory receptors to help control the tone and length of the muscle.
- If a muscle contraction is sustained over a length of time, this can either be unconsciously or involuntarily tightened. It is thought that the gamma motor neuron activity has set itself an abnormally high firing rate. This then keeps the muscles tone too high (hypertonic), so when it is resting, it is too short.
- Voluntary isometric contraction makes the fibres at the belly of the muscle shorten, loosening the intramural fibres and unloading the muscle spindle, switching it off temporarily. As isolated voluntary isometric contraction requires only alpha motor nerve activity, the gamma motor

nerve is not firing to the muscle spindle.

- ❑ When muscles relax after voluntary isometric contraction, the alpha motor nerve switches off and the belly of the muscle lengthens. As this relaxation takes place, the gamma motor nerve switches on to re-set the muscles resting tone. In theory, because gamma motor nerves have just been turned off, the new rate at which they are firing has been reduced, decreasing the resting tone of the muscle.

Mechanical Basis of Muscle Relaxation Using MET

Muscles that are in an adaptive, shortened position or held in a sustained contraction have an increased stiffness. Relaxation after isometric contraction increases muscle temperature and reduces this stiffness because of the thixotropic (solidifies when cold or still / more fluid when warmed or stirred) property of the muscle.

How Muscle Energy Technique can lengthen muscle and reduce trigger points.

- ❑ Muscle contraction increases muscle temperature because the stored energy from the contraction is released as heat, as the muscle relaxes. The heat increases the elasticity and extensibility of the connective tissue (the fascia of the muscle tendon unit) and decreases the viscosity within the muscle.
- ❑ When a muscle contracts isometrically, the muscle fibres shorten and the connective tissue lengthens to keep the muscle at the same length. This lengthening dissolves abnormal cross-links in the collagen, allowing more normal gliding of the fibres and permitting the muscles to be stretched to a new length.
- ❑ The muscle spindles are allowed to be set to a new length-tension relation after an isometric contraction.
- ❑ The pain and dysfunction associated with trigger points is relieved when the muscle is restored to its full length.

Therapeutic Principles of Muscle Energy Technique.

There are many styles of MET. The style listed below has proved most effective clinically.

- ❑ One of the most important things to remember with the MET is that it should never be painful. Should it be even mildly painful, STOP. Less pressure should then be used until a comfortable resistance is found.
- ❑ If it is still painful, use RI (reciprocal inhibition). If you find the contraction still elicits pain, work with any muscle related to the associated joint that is not too painful.
- ❑ Perform MET on the hypertonic or shortened muscles first, as those tissues inhibit their antagonists. After you have released the hypertonic muscles use MET to strengthen the weaker ones.
- ❑ Take the muscle to its mid-range position half way between its fully stretched and fully relaxed position. In this position it is the most accurate measure of its strength, and is usually the most comfortable. If a muscle cannot be placed in its mid-range position, it is placed at its pain or resistance barrier.
- ❑ It is important that the therapist communicates clearly with the patient as to how much pressure they exert; otherwise some patients believe their strongest effort is required, which could cause them to strain themselves, or even overwhelm the therapist.
- ❑ The therapist typically applies only a modest pressure that requires only 10-20% of their strength to resist the therapist's force. In acute conditions, it only takes a few grams of pressure to create a neurological change. In chronic conditions you may have to use up to 50% resistance to create the heat in the muscle to gain any sensory awareness to that area which has been unconsciously hypertonic.

- ❑ This contract-relaxation cycle is typically repeated 3-5 times; however it may be repeated as many times as 20 in chronic conditions.
- ❑ It is often helpful to add a contraction to the opposite muscle (antagonist) after the contraction of the agonist. This is especially helpful after the PIR (Post Isometric Relaxation), as it not only adds a deeper level of relaxation, but also "sets" the involved muscle in a relaxed state in its lengthened position. This is accomplished through reciprocal inhibition.

The basic therapeutic intentions of Mets for acute conditions:

- ❑ Reduce muscle spasm.

- ❑ To create a gentle pumping action to reduce pain, swelling, encourage oxygenation of the tissue, enabling removal of any waste product.
- ❑ Offer neurological contribution, to lessen muscular inhibition.
- ❑ To help sustain as much pain free joint motion as possible.

The basic therapeutic intentions of Mets for chronic conditions.

- ❑ Reduce muscle spasm.
- ❑ Strengthen muscles, lengthen muscles.
- ❑ Increase ROM of joints and increase in lubrication.
- ❑ Restores neurological function.
- ❑ Decreases excessive muscle tension.

Insurance Matters





Lockton has been involved in the chain of parties delivering the insurance services to members of the LCSP for a number of years and is now delighted to be chosen as the sole Broker to develop an improved facility.

Our aim is to work closely with the LCSP management team in an effort to improve your experience with an easy to deal with process and first class service. We intend to introduce new products for commercial surgery and risks associated with ownership of "multi therapy" and "multi therapists" clinics.

Your personal insurance needs such as motor, household etc will not form part of our mandate at this stage, but it is something we hope to explore in the future. The major change that you will experience is the amalgamation of membership fees and professional liability insurance. This allows the LCSP to ensure that those who are not excused from having LCSP insurance by virtue of CSP status or similar, will automatically benefit from appropriate and adequate cover as part of the membership renewal process. The change from "individual purchase" to a "group facility" will bring about positive synergies and we will ensure a seamless transition.

We would like to update all members requirements with regard to extensions of cover for adjunctive risks and additional qualified services; to achieve this we will contact all members via the LCSP office with a request to complete a short questionnaire.

The plan is to make the whole process of dealing with the renewal and continuation of insurance as simple an experience as possible. At the same time the service platform that we intend to create will be based on offering the best help and advice available with direct access to people who understand your profession, patient management and related issues. We are excited with the opportunities presented and we will be in touch soon with details of developments and where we need help from you.

Date	Venue	Course Info	Provided by:	Cost
2 nd - 5 th February 2013	Britannia Hotel, Leeds	Hendrickson Method Practitioner Programme	 flexible healing A POSITIVE APPROACH TO INJURY	Three day workshop £445.00
8 th - 10 th February 2013	Britannia Hotel, Leeds	Extend and Enhance the Hendrickson Method	 flexible healing A POSITIVE APPROACH TO INJURY	Two day workshop £375.00
22 nd February 2013	Holiday Inn, Oxford	Regional Meeting	 LCSP Register	FREE
2 nd - 3 rd March 2013	Holiday Inn, Leamington Spa	Assessment and Treatment of Lower Back Pain	 flexible healing A POSITIVE APPROACH TO INJURY	Two day workshop £230.00
13 th April 2013	Britannia Hotel, Leeds	Assessment and Treatment of Knee Pain and Dysfunction	 flexible healing A POSITIVE APPROACH TO INJURY	One day workshop £115.00
11 th - 13 th May 2013	Britannia Hotel, Leeds	An Introduction to the Hendrickson Method	 flexible healing A POSITIVE APPROACH TO INJURY	Three day workshop £360.00
16 th - 19 th May 2013	Britannia Hotel, Leeds	Hendrickson Method Practitioner Programme	 flexible healing A POSITIVE APPROACH TO INJURY	Four day workshop £445.00
28 th September - 1 st October 2013	Britannia Hotel, Leeds	Hendrickson Method Practitioner Programme	 flexible healing A POSITIVE APPROACH TO INJURY	Four day workshop £445.00

With regards to courses run By NJD Sports Injury Clinic, we are currently in the process of rescheduling the courses from Mondays to weekends and once dates are confirmed the details will be available on the LCSP website and future issues of the newsletter.

For more information or to book, please contact the course provider on the details below:



Presented by: **Nicholas Dinsdale** BSc (Hons), MSc Sports Injuries & **Nicola Dinsdale** BSc (Hons), MSc Sports Injury Rehab (ongoing)

Bookings and Cheques to "Nicholas Dinsdale" 36 Moorland Crescent, Clitheroe, Lancs. BB7 4PY

If you need more information on any of our workshops, please

contact us by: Tel: **01200 427 457**

Email: nick@njdsportsinjuries.co.uk

Web: www.njdsportsinjuries.co.uk



Presented by **Sue Bennett FLCSP (Phys)**

Bookings and cheques made payable to "Flexible Healing"

Flexible Healing 45 St David's Road, Otley, West Yorkshire, LS21 2AW.

If you need more information on any of our workshops, please contact

us by: Tel: 01943 461 756

Email: info@flexible-healing.co.uk

Web: www.flexible-healing.co.uk

