STANDARDS COMMITTEE WORKSHOP FOR MEMBER ORGANISATIONS

GENEVA 2019

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- Previous focus on national and international processes central to IFOMPT International Monitoring
- Responding now to new issues for Member Organisations (MO)
- Supporting ongoing development and future processes
- Opportunity to apply to own MO and discuss

INTRODUCTION

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AIMS

1. To discuss processes required when a MO is requested to assess a new programme within the country
2. To discuss key areas identified from the questionnaire and feedback from MOs on the International Monitoring process
3. To discuss the implementation of the IFOMPT Standards into educational programme with a particular focus on manual therapy practical skills

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Two options if a new programme develops outside of the existing organisation:

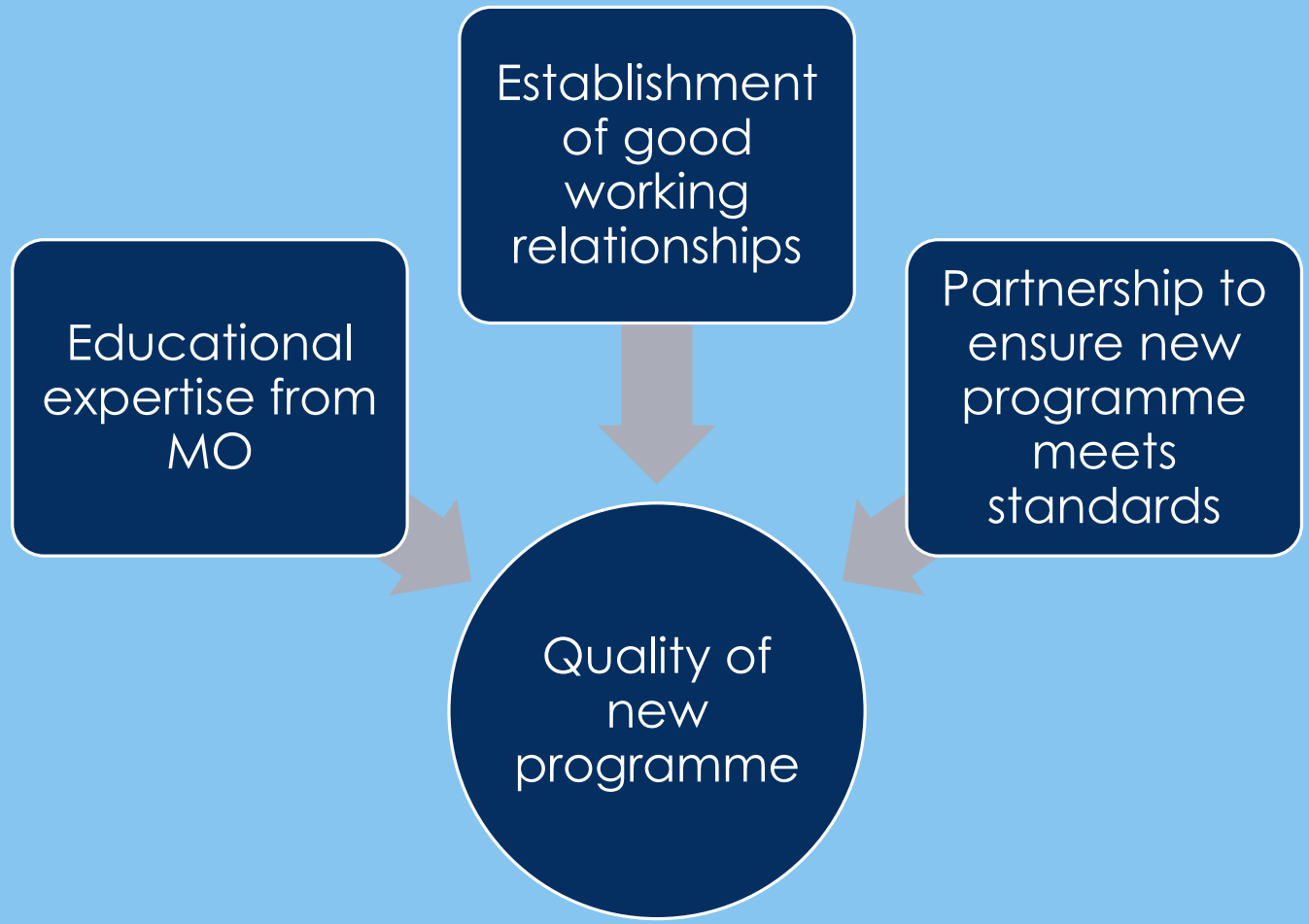
1. Review of new programme by MO (preferable, focus of this session)
2. Review of new programme by Standards Committee (RIG submits curriculum for evaluation)

AIM 1: MANAGING NEW PROGRAMMES

- New programme(s)?
- New RIG?
- Issues?/Concerns?

CURRENT SITUATION IN COUNTRIES?

IDEAL PROCESS – INVOLVED FROM THE START



MO INVOLVED IN PROGRAMME DEVELOPMENT

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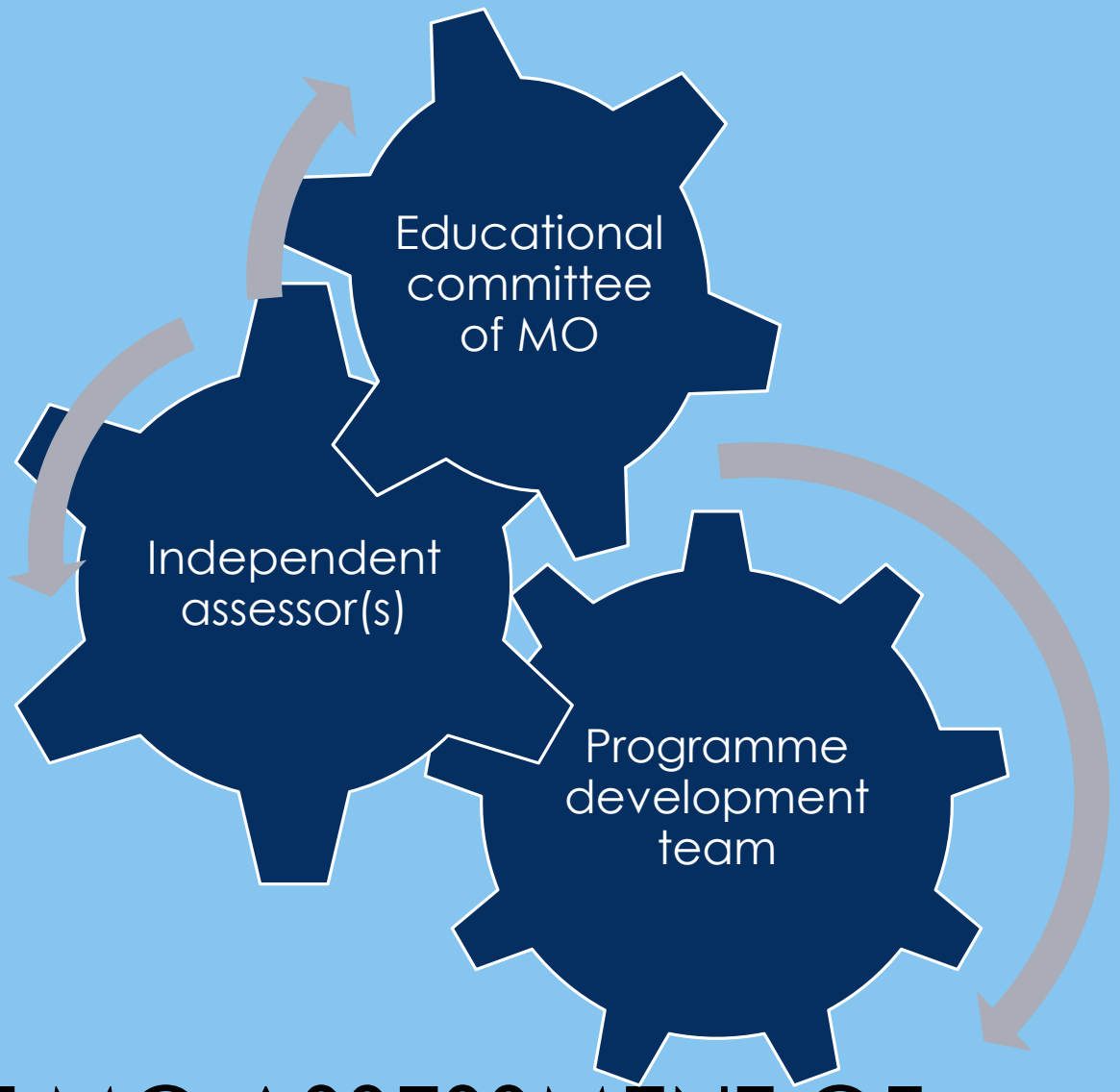

INDEPENDENT MO ASSESSMENT OF PROGRAMME

IFOMPT Standards Committee

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Confirm to programme that standards are met

Appointment of EA to evaluate ongoing quality

Include detail of all processes in next International Monitoring submission i.e. evidence of new programme meeting standards

ALLOCATION OF EA IF APPROVED AS A ROUTE TO MO MEMBERSHIP

- Experiences to date?
- Need to adapt processes to individual MO?

DISCUSSION

- Focus on quality
- Better to do collaboratively rather than programme develops a new RIG (that leads to umbrella group)
- Standards Committee available throughout to support and advise

- Any questions?

KEY MESSAGES

- To discuss key areas identified from the questionnaire and feedback from MOs on the International Monitoring process

AIM 2: MO FEEDBACK ON INTERNATIONAL MONITORING PROCESSES

MO QUESTIONNAIRE INTERNATIONAL MONITORING PROCESS

PURPOSE:

1. To explore the benefits and challenges of the IM process for MOs
2. To gain insight from the MOs on their experiences with the IM process
3. To inform future development of resources, workshops and mentoring to facilitate the IM process

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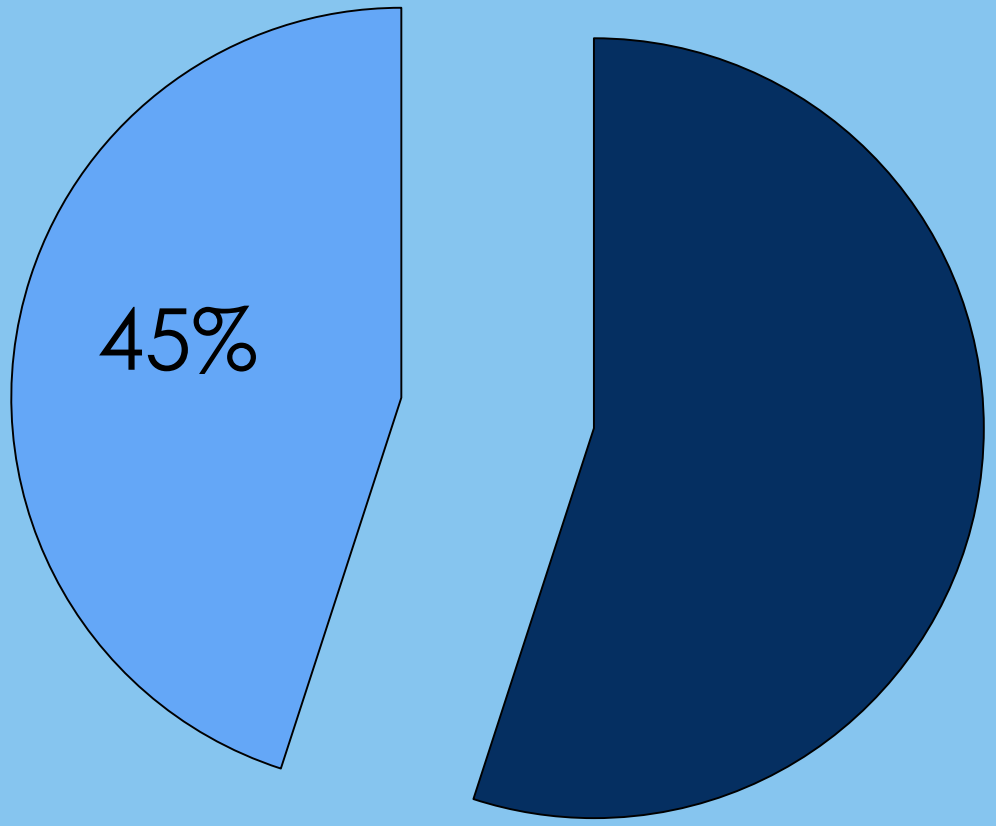
MO QUESTIONNAIRE RESPONSE



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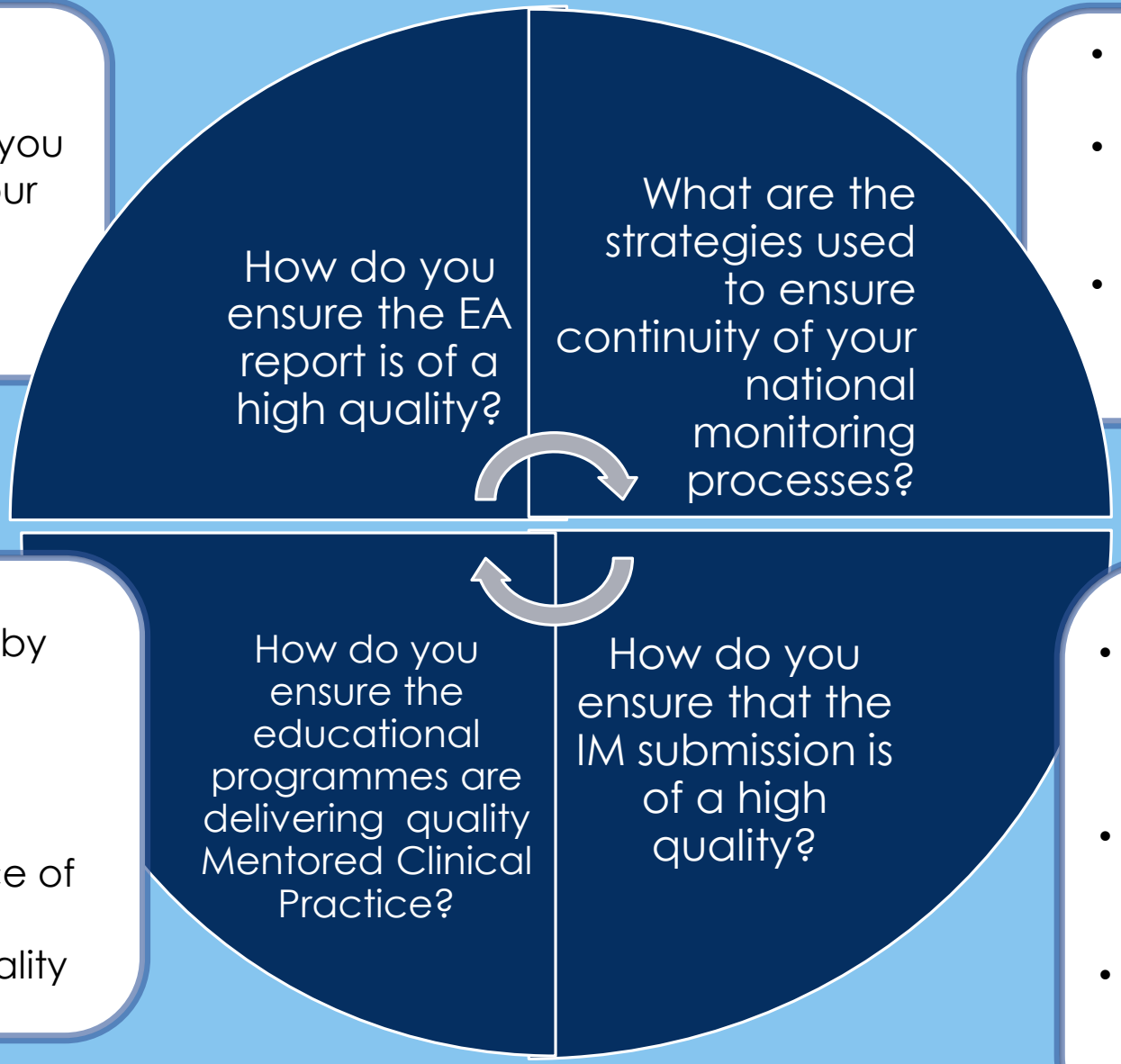
- Do you provide training?
- What criteria do you use to choose your EA?
- Are they independent?

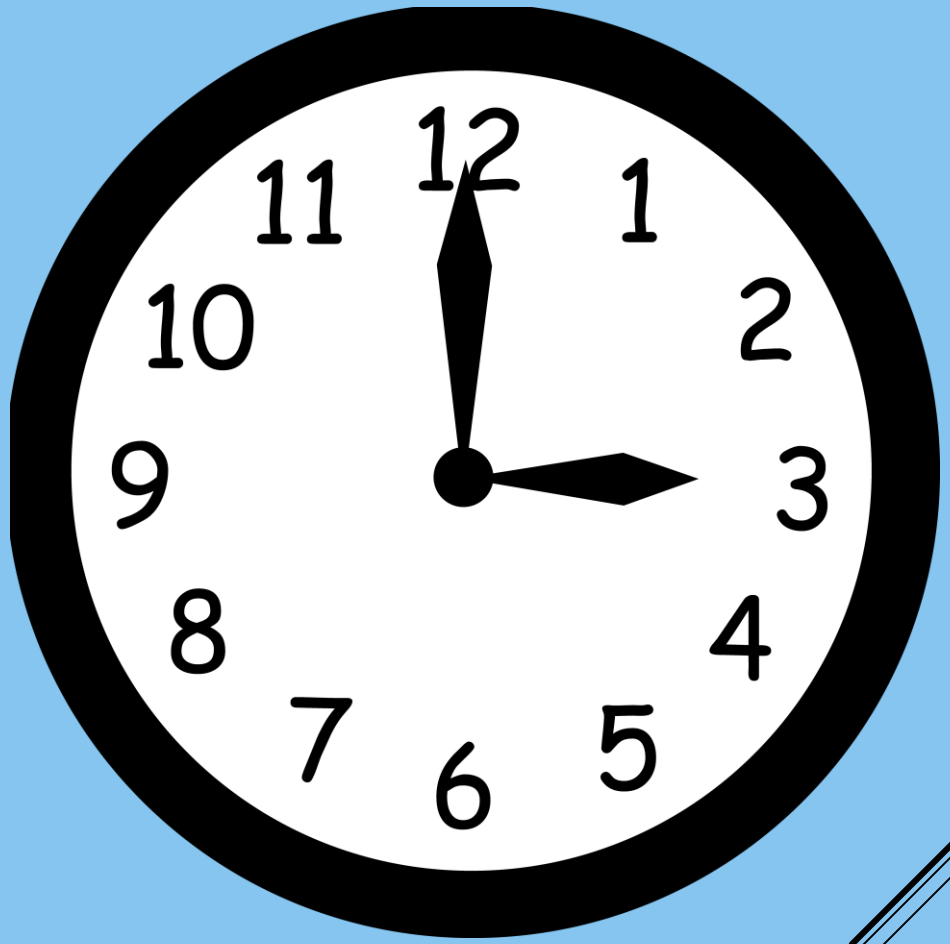


- Who collates, reviews the report?
- How are the recommendations fed back to the programmes?
- How to ensure transition of the knowledge within your organisation?

- What are the challenges faced by the programmes?
- Share innovative strategies used by your programmes
- Describe one piece of evidence demonstrating quality MCP

- What format do you use to report how you have addressed the prospective conditions?
- How do you ensure all components are covered?
- Give an example of good quality evidence that demonstrates integration of BPS into a programme

- Time required for SC to review the submissions



USE OF RESOURCES – IM SUBMISSIONS

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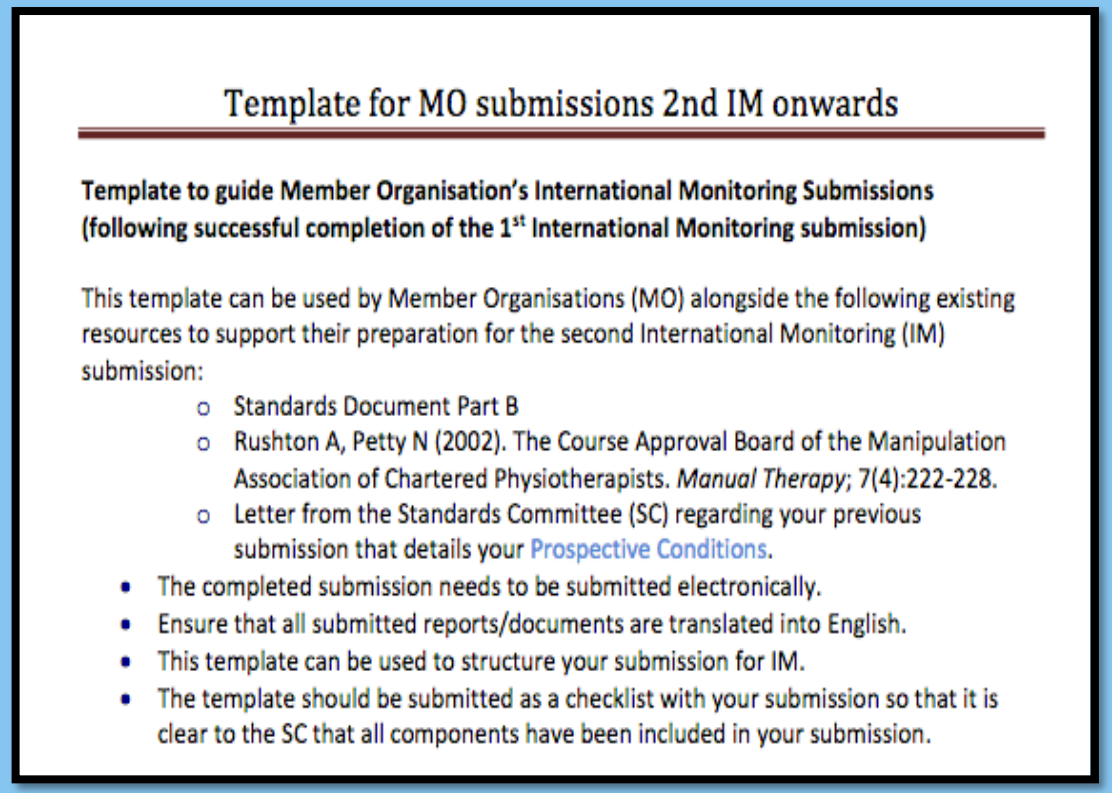

Template for MO submissions 2nd IM onwards

Template to guide Member Organisation's International Monitoring Submissions (following successful completion of the 1st International Monitoring submission)

This template can be used by Member Organisations (MO) alongside the following existing resources to support their preparation for the second International Monitoring (IM) submission:

- Standards Document Part B
- Rushton A, Petty N (2002). The Course Approval Board of the Manipulation Association of Chartered Physiotherapists. *Manual Therapy*; 7(4):222-228.
- Letter from the Standards Committee (SC) regarding your previous submission that details your Prospective Conditions.

- The completed submission needs to be submitted electronically.
- Ensure that all submitted reports/documents are translated into English.
- This template can be used to structure your submission for IM.
- The template should be submitted as a checklist with your submission so that it is clear to the SC that all components have been included in your submission.

2ND IM SUBMISSION

IFOMPT Standards Committee

Overview of MO process of monitoring educational standards

- **maximum of 2000 words** +/- other supporting documents that the MO uses
- to include details of quality issues relating to the educational with **cross referencing** to items identified by the EA report and MO national monitoring processes during the specified time period
- to include a **response to Prospective Conditions** from the previous IM process
- Include the checklist

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Any questions/comments?

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To discuss the implementation of IFOMPT standards into educational programmes, with a particular focus on manual therapy practical skills

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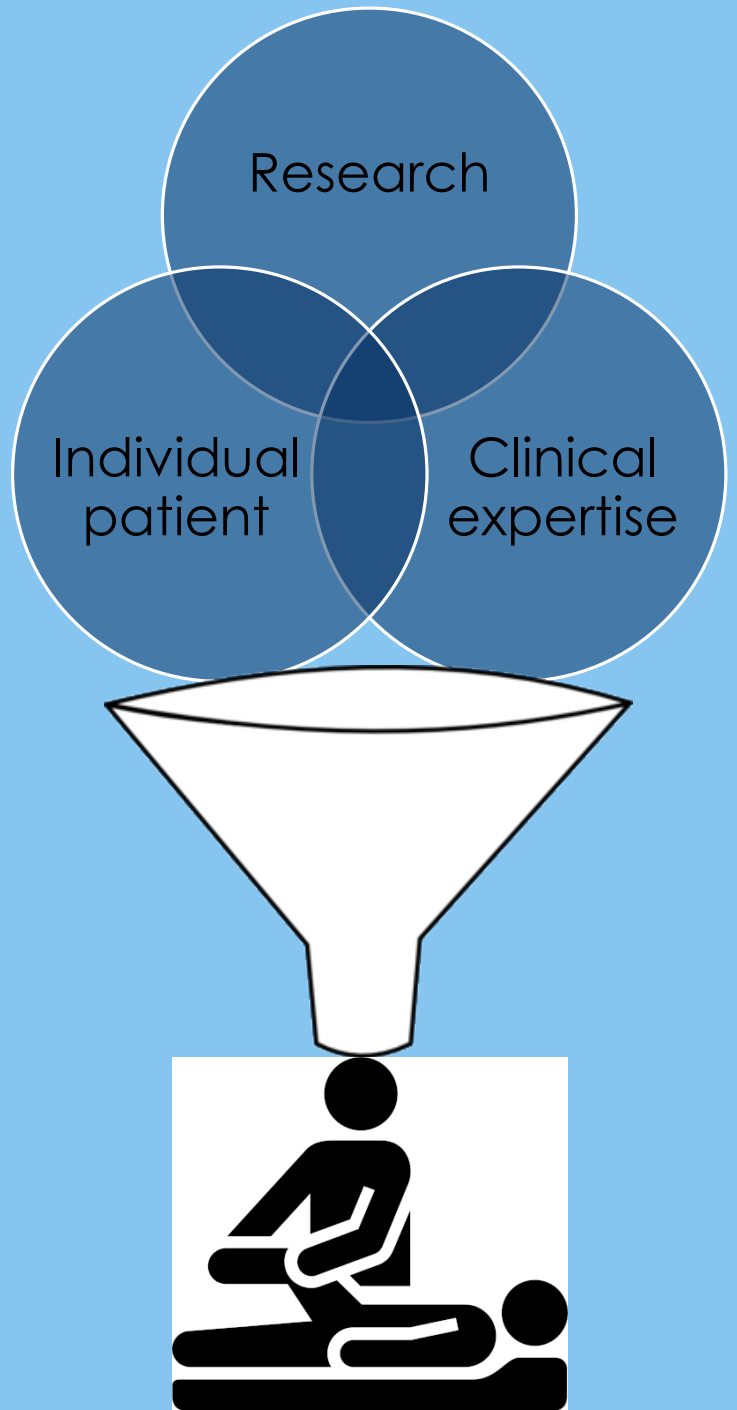

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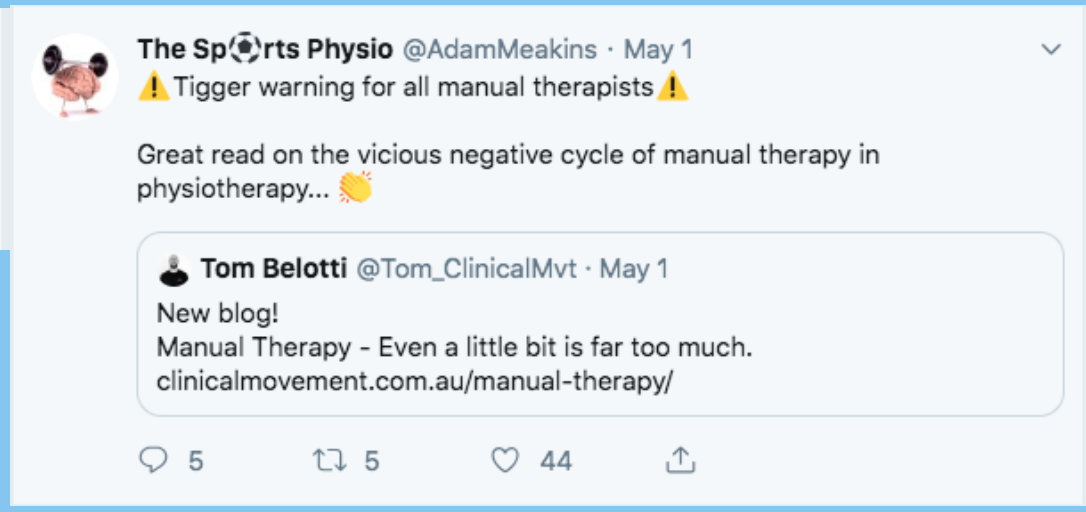

Aim: To collect your views on some of the issues around teaching practical MT skills in your programmes.

Go to www.kahoot.it

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Dimension 1: critical & evaluative evidence informed practice

Dimension 2: critical use of a comprehensive knowledge base of the biomedical sciences

Dimension 3: critical use of a comprehensive knowledge base of the clinical sciences

Dimension 4: critical use of a comprehensive knowledge base of the behavioural sciences

Dimension 5: critical use of a comprehensive knowledge base of OMT

Dimension 6: critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders

Dimension 7: advanced level of communication skills enabling effective assessment and management of patients with NMS disorders

Dimension 8: advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders

Dimension 9: critical understanding and application of the process of research

Dimension 10: clinical expertise and continued professional commitment to the development of OMT practice

WHERE DO MANUAL THERAPY SKILLS FIT?

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WHERE DO MANUAL THERAPY SKILLS FIT?

Dimension 2. Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT

By the end of the programme of study, the successful student will be able to:

1. Critically apply knowledge of anatomy, physiology and biomechanics to enable evaluation of normal and abnormal function

2. Critically evaluate knowledge informing pathology, pathogenesis and pain mechanisms underlying mechanical dysfunction of the NMS system

3. Integrate and apply knowledge of examination procedures and differential diagnosis in the assessment of NMS dysfunction

4. Critically apply knowledge and advanced clinical reasoning skills to differentiate dysfunction of the NMS system from non-mechanical dysfunction in other systems

5. Critically apply knowledge of indications, contraindications, precautions

LEARNING OUTCOMES

Dimension 2. Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT

By the end of the programme of study, the successful student will be able to:

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5. Critically apply knowledge of indications, contraindications, precautions

LEARNING OUTCOMES

Dimension 3. Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT

By the end of the programme of study, the successful student will be able to:

1. Critically apply knowledge of the clinical sciences (clinical anatomy, physiology, biomechanics and epidemiology) to enable effective assessment of the nature and extent of patients' functional abilities, pain and multidimensional needs in relation to the ICF classification

2. Demonstrate appropriate selection of assessment techniques and tools through understanding of their diagnostic and evaluative qualities (including: reliability, validity, responsiveness and diagnostic accuracy)

3. Critically apply knowledge of effectiveness and risks to inform OMT interventions and accurately predict prognosis with realistic outcomes

4. Integrate and apply knowledge of prognostic, risk and predictive factors of relevant health problems to OMT management decisions to ensure the patient can make informed choices

LEARNING OUTCOMES

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4. Integrate and apply knowledge of prognostic, risk and predictive factors of relevant health problems to OMT management decisions to ensure the patient can make informed choices

LEARNING OUTCOMES

Dimension 5. Demonstration of critical use of a comprehensive knowledge base of OMT.

By the end of the programme of study, the successful student will be able to:

1. Retrieve, integrate and critically apply current knowledge of the theoretical basis and evidence base of OMT to inform assessment of the NMS system

2. Critically evaluate evidence based diagnostic tests and outcome measures to enable a clinical diagnosis and effective evaluation of OMT management

3. Critically apply current evidence informed theory and knowledge of safe and effective practice of OMT in the assessment and patient-centred management of the NMS system

4. Integrate, apply and evaluate principles of mobilisation, manipulation, motor-learning, exercise physiology, ergonomic strategies, and other modalities as components of multimodal evidence informed OMT Physical Therapy intervention, to optimise a patient's functional ability

LEARNING OUTCOMES

Dimension 5. Demonstration of critical use of a comprehensive knowledge base of OMT.

By the end of the programme of study, the successful student will be able to:

1. Retrieve, integrate and critically apply current knowledge of the **theoretical basis and evidence base of OMT** to inform assessment of the NMS system

2. Critically evaluate **evidence based diagnostic tests and outcome measures** to enable a clinical diagnosis and effective evaluation of OMT management

3. Critically apply current **evidence informed theory and knowledge of safe and effective practice of OMT** in the assessment and patient-centred management of the NMS system

4. Integrate, apply and evaluate principles of **mobilisation, manipulation,** motor-learning, exercise physiology, ergonomic strategies, and other modalities as components of multimodal evidence informed OMT Physical Therapy intervention, to optimise a patient's functional ability

LEARNING OUTCOMES

Dimension 8: Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders

By the end of the programme of study, the successful student will be able to:

1. Critically select and use appropriate practical skills and outcome measures to enable collection of high quality clinical data to inform effective clinical reasoning during patient assessment

2. Critically select and use as appropriate, a range of therapeutic OMT interventions including patient education, mobilisation, manipulation and exercise prescription with appropriate consideration of treatment timing, dosage parameters and progression of interventions

3. Apply all practical skills with precision, adapting them when required, to enable safe and effective practice

4. Critically apply a range of other interventions, as appropriate, to enhance patient rehabilitation (e.g. taping)

LEARNING OUTCOMES

Dimension 8: Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders

By the end of the programme of study, the successful student will be able to:

1. Critically select and use **appropriate practical skills and outcome measures** to enable collection of high quality clinical data to inform effective clinical reasoning during patient assessment

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3. Apply all **practical skills with precision**, adapting them when required, to enable safe and effective practice

4. Critically apply a range of other interventions, as appropriate, to enhance patient rehabilitation (e.g. taping)

LEARNING OUTCOMES

Discuss what approach to MT is most dominant in your country.

How have your programme(s) changed over time to reflect changes in contemporary practice?

MT changes in the past 10 years: Provide one example of a MT skill

- that you've stopped teaching
- that you have introduced into your teaching
- that is still taught, but with a different purpose/emphasis

Discussion: How do you ensure contemporary practice across your programmes?

Mulligan's mobilization-with-movement

Manipulation

Maitland

McKenzie

GROUP ACTIVITY

- Manual therapy – the theory, evidence, application and justification needs to remain contemporary
- IFOMPT Standards are not prescriptive – up to the individual country to monitor and lead the evolution
- Standards Committee available throughout to support and advise

- Any questions?

KEY MESSAGES

[CLINICAL COMMENTARY]

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CHARLES W. PENZA, DC, PhD[1] • COREY B. SIMON, PT, PhD[4,5] • STEVEN Z. GEORGE, PT, PhD[5]

Unraveling the Mechanisms of Manual Therapy: Modeling an Approach

J Orthop Sports Phys Ther 2018. 48(1)

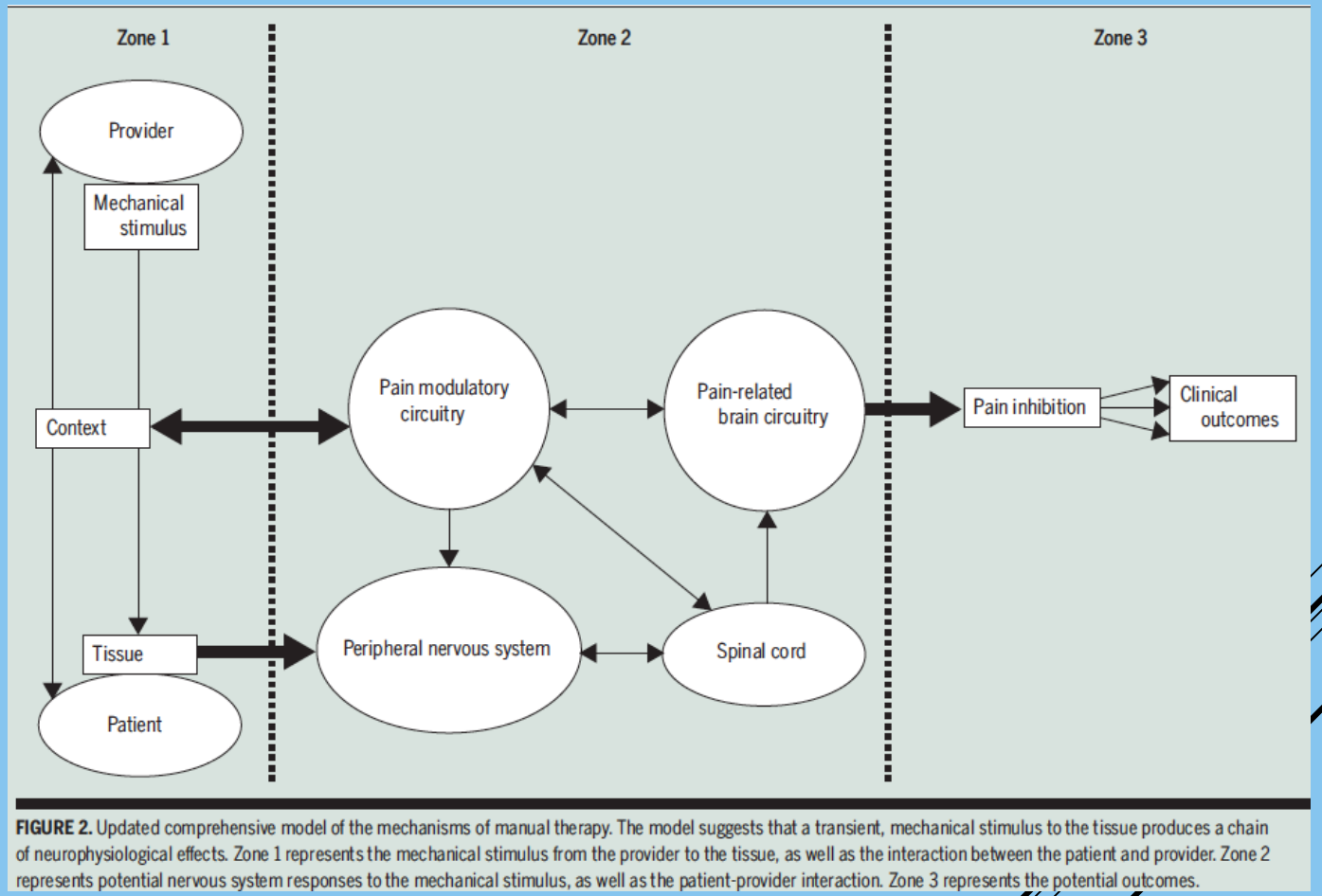

FIGURE 2. Updated comprehensive model of the mechanisms of manual therapy. The model suggests that a transient, mechanical stimulus to the tissue produces a chain of neurophysiological effects. Zone 1 represents the mechanical stimulus from the provider to the tissue, as well as the interaction between the patient and provider. Zone 2 represents potential nervous system responses to the mechanical stimulus, as well as the patient-provider interaction. Zone 3 represents the potential outcomes.

ARE WE TEACHING EBP IN OMT?

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