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The Editorial Board does not necessarily agree with opinions expressed in articles and correspondence, and does not necessarily endorse courses and equipment advertised.

Editorial

Once again it has come to that time of year when APCP's annual conference is just around the corner. This is a fantastic opportunity to meet colleagues and share ideas, along with having a great deal of fun.

The lectures offer many different insights into paediatric physiotherapy and paediatrics in general both from therapist's and those working with us. Often up-to-date ideas are explored along with older ones being re-investigated and totally new practices shared. Question time gives a chance for people to qualify points that have been made and initiate debate around the subject matter of the lecture, with the possibility of people being able to offer their own ideas and experiences to others.

Whilst at conference take the opportunity to meet members of the national committee and talk to them about what they do. In line with our new constitution our AGM this year will not be until we meet in October in Birmingham as a part of the Chartered Society's Congress and there are always national committee vacancies, you might be just the person to fill one of these. So if you are not sure what being a national committee member entails anyone of us currently in post will be happy to tell you a little about what we do. (Your regional rep will also be able to give you information). It is easy to say – Oh but I always have lots to do at work and can't afford the time or the national committee always seem a bit

scary. APCP needs every one of you to help us drive the association forward. Being a national committee member is just one way of doing this. Consider it – yes it does involve hard work and it can be a steep learning curve but it is fulfilling, supports your own CPD beyond measure, allows you the chance to influence the future of paediatric physiotherapy and support your friends and colleagues.

THERE IS STILL TIME TO BOOK YOUR PLACE AT CONFERENCE IN SWANSEA. Come along and share in the friendly and supportive learning environment and enjoy all the fun there is to had, including the welsh dragons, leeks and daffodils.

While we are on the subject of supporting and sharing with colleagues – near to my own heart - it is time once again to remind you that the journal is here for all of you. In order to for it to be used as an informative work, it needs you all to contribute. If you have a problem you need to solve or a piece of good practice you wish to share, the editorial board wish to hear from you. It is always really encouraging when people submit nice long articles and peer review is there to help make these a really high standard for us all but just little pieces go together to truly make it your journal and it is even more encouraging to receive these.

I look forward to meeting all those of you that go to conference and receiving all your journal contributions.

Sally Braithwaite

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must be with the editor by

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The editorial board reserve the right to edit all material submitted

Letters

Gail Nash,
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12/11/04

Dear Colleague,

We are an AHP Paediatric Therapy team exploring how we can integrate our services more effectively. We are looking at combined locality teams, integrated systems of working, mutual standards and a shared philosophy for the management of our Paediatric caseloads.

I would be grateful to hear of any other departments who have experience of similar projects and would appreciate any help that you can give. Thank you so much for your help.

Yours sincerely,
Gail Nash.

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Dear Sally

Our team is currently looking at how we give written information to parents of children with Erb's Palsy, specifically before they go home from hospital, to reinforce the advice given regarding positioning, handling and passive movements.

If anyone has a leaflet or information sheet that they have used successfully, we would appreciate any advice.

Yours sincerely,
Katherine Heffernan

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Dear Editor,

I read with great interest Ben Spooner's article in the December 2004 issue concerning serial casting practice within the United Kingdom. His report highlights disparity amongst practitioners and it is apparent that lack of evidence supporting this intervention is fundamental to this finding.

Like Ben, I feel that serial casting should be considered a significant intervention. I also agree that, as well as the potential benefits of casting, it is possible that there are detrimental effects, particularly loss of muscle strength. Children with spastic cerebral palsy have reduced triceps surae muscle bulk. Further loss of volume of the primary support muscles of the body, reported to occur following immobilisation, may be detrimental in the long term, despite short-term gains in ankle range of motion (Booth 1987).

From the research to date, serial casting has been shown to increase ankle dorsiflexion range and change the active response of the ankle plantarflexors (Brouwer et al 1998, Cottalorda et al 2000). The serial casting literature often hypothesises that this intervention increases plantarflexor muscle length by increasing number of sarcomeres within the muscle, quoting studies on animals (Holly et al 1980; Williams et al 1988). Whilst interesting, this may not be relevant to spastic muscles of the lower limb in children. The only papers that report measurements of muscle fibre lengths and morphology in children with CP are those of Shortland *et al* (2001, 2004). These papers show that muscle fibres are not short in the plantarflexors of these children, and that fibre length is changed by intervention. As Ben pointed out, we really don't know what serial casting is doing to the structure of the triceps surae muscle in children with spastic cerebral palsy.

Although a deterioration in the pattern of walking appears to be the major clinical reason for applying serial casting in these children, there is no strong evidence to suggest that this intervention has a significant impact on their gait.

At Guy's Hospital London, we are currently undertaking the first randomised-controlled study in serial casting in children with cerebral palsy funded by SPARKS. We are measuring calf muscle morphology using 3D ultrasound, a technique pioneered at our centre. Also, children are assessed for changes in their gait pattern using 3D instrumented gait analysis before and after casting. We hope to be able to improve our understanding of the physiological and functional effects of serial casting. The information that this study provides may help us to determine best practice in serial casting. I would hesitate to recommend the development of national guidelines at this stage before we have a deeper appreciation of the intervention on muscle properties and walking function.

If anyone would like more information regarding the study, they can contact either Dr Adam Shortland or myself at the Gait Laboratory, Guy's Hospital.

Sincerely,
Anne McNee

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Letters

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Dear Sally,

I am a physiotherapist working in the musculoskeletal team currently looking, along with colleagues in the neurology team, into our management of children referred as 'toe walkers'.

I read with interest the article on serial casting in the last issue.

We hope to audit our current practice and develop a care pathway to ensure best practice for this group of patients.

I have already posted a request on paediatric iCSP to any colleagues who have done any work on this topic and have had a very good response from around the country. I would be grateful if I could also appeal via this journal to any other colleagues who are also working on developing guidelines/ care pathway for toe walkers to contact me to share information.

Yours sincerely,
Claire Blackman

Dynamic Lycra Splinting: Development and Application of Local Clinical Guidelines

Ruth Ball, Senior Occupational Therapist
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INTRODUCTION

Therapists working within the Knowsley Primary Care Trust sought to identify the supporting evidence for the use of dynamic lycra splinting with children with cerebral palsy in order to develop clinical guidelines for the provision of this appliance. This article describes the supporting evidence and the development of local guidelines, which commenced in 2001.

EVIDENCE -BASED PRACTICE

Having identified the need for validated research evidence, the following clinical question was posed: 'Does dynamic lycra splinting improve the functional independence of children with cerebral palsy?' An analysis of the literature available examined the benefits and constraints of this treatment modality, suitability of client groups, and method of evaluation.

In support of dynamic lycra splinting, Hylton and Allen (1997) found that the stabilising pressure input provided by lycra compression bracing provided a support for functional improvement in balance, dynamic stability and movement control. Previously, when evaluating Upsuits, Blair et al (1995) found immediate improvements in postural stability, reduction in involuntary movements, and increased confidence in attempting motor tasks. These results support the principle that recognizes a functional relationship between proximal stability and distal control (Case Smith et al, 1989). Edmonson et al (1999) evaluated the effectiveness of the Kendall-Camp garment lycra suits and found

they improved posture and, in turn, handling of children with cerebral palsy. In particular children with athetosis, ataxia and hypotonia demonstrated functional gains while those with spastic diplegia demonstrated improved sitting balance.

Although there is some evidence that dynamic lycra splinting increases function constraints are also evident; these include difficulty in putting on the garment, reduced independence in toileting, and compromised temperature control especially during hot weather (Blair et al, 1995; Edmonson, Hanson and Fisher, 1999). Appropriateness of fit, and cost, are also issues.

None of the above studies utilised standardised measures to evaluate functional change, which questions validity and reliability of results. Edmonson et al (1999) used an unspecified assessment of gross and fine motor skills along with parent questionnaires. Blair et al (1995) used video recordings, parent interviews and diaries.

More recently Knox (2003) used The Gross Motor Function Measure (GMFM) and the Quality of Upper Extremity Skills Test (QUEST) to evaluate the use of lycra garments in eight children with varying types of cerebral palsy. These standardised assessments were found to have measurement limitations, namely that they cover only specific aspects of function. Furthermore, results were limited by the number of variables, for example, types of cerebral palsy, and variation in lycra garment design.

Two other studies used the Paediatric Evaluation of Disability Inventory (PEDI), in part, to measure functional outcomes. The first study evaluated the effectiveness of lycra garments on gait, but no significant changes were identified with the PEDI. However, it was suggested that this measure may have lacked sensitivity to detect functional change over a short time (Rennie et al, 2000). The second study assessed upper limb function and movement in children with cerebral palsy wearing lycra garments. Improvements on at least one of the scales of the PEDI were made by all twelve participants (Nicholson et al, 2001). Additional measures, namely 3-D gait analysis and kinematic motion analysis were also used in these studies. However in practice, the availability of assessments requiring such specialised equipment may be limited.

Scott-Tatum (2003) conducted research with a wider population of adults and children with movement disorders to evaluate functional gains associated with dynamic lycra splinting. Several measurement tools were utilised, including the Canadian Occupational Performance Measure (COPM). This standardised assessment showed that there was a

Dynamic Lycra Splinting: Development and Application of Local Clinical Guidelines

positive statistical significance in change in functional performance, due to use of the splints.

In general, these studies confirm that dynamic lycra splinting does improve functional independence in children with cerebral palsy. However there are several additional factors which provide the key to success; these include child and carer compliance (Blair et al, 1995; Edmonson et al. 1999) and the child's motivation (Blair et al, 1995). Further research is necessary to establish the most objective and reliable method of measuring functional outcomes with children with cerebral palsy.

DEVELOPMENT OF CLINICAL GUIDELINES

As with any treatment modality, the evidence supporting the use of an intervention, technique or appliance must be weighed up against cost, compliance and clarity in making clinical decisions. Therefore, in 2001, a small working party from Knowsley Primary Care Trust was formed to create clinical guidelines for the provision of dynamic lycra garments. This comprised of two occupational therapists and two physiotherapists from the paediatric team who had a specific interest in dynamic lycra splinting. From the paucity of available literature, individuals critically appraised evidence and feedback was given. In addition, the group contacted other paediatric services regarding their practice and protocols. Following this several draft guidelines were produced. During this time new research was published. This was reviewed and taken into account and the clinical guidelines were completed in February 2003.

Content of Guidelines

The guidelines were split into pre-assessment, assessment and post-application as outlined below.

Pre-assessment:

- Suitable client groups, with specific postural needs, are identified.
- It is ensured that both the carer and child have a positive approach to therapy.
- The use of other treatment modalities is considered.
- Clinical reasoning is established for using dynamic lycra splinting. Consultation with colleagues may be appropriate.
- The child wears a kimono belt, lycra trunk support, or tubigrip depending on whether the

support is required proximally or distally. This is to identify the child's tolerance to a close fitting garment and to assess for postural and functional change.

- Medical consent for funding is obtained.

Assessment process:

- The child's posture and functional activities, through use of baseline video, is recorded.
- Goals are agreed with carers, and, if appropriate, with the child.
- At assessment clinic, the reason for referral, and the assessment findings, are established.
- A dynamic lycra splint is measured.
- The child attends a second appointment for this to be fitted. Carers are given a diary sheet to record the ease of getting the garment on/off and the time worn. A wearing regime is discussed at this appointment.

Post-application:

- Therapy continues according to the child's needs.
- Three months post supply, a carer questionnaire is given for feedback regarding use of the garment.
- Six months post supply, the child attends clinic. Prior to this video recording is repeated, clinical findings are reviewed and a report is written.
- At clinic, the suitability of the garments is assessed and further requirements established.

APPLICATION OF CLINICAL GUIDELINES.

Following consultation with the local paediatric therapy team regarding the draft, minor amendments were made to the clinical guidelines. These are currently in use for new referrals. A clinic is held each term with an occupational therapist, an orthotist and the child's therapist.

The experience of critically reviewing a treatment modality and creating clinical guidelines has been very positive and in particular the following has resulted:

- The literature pertaining to the use of dynamic lycra splinting has been collated and has provided professionals, children and parents with information regarding the benefits and constraints of this treatment modality.
- Critical review of the literature has helped to accurately select the most suitable client group for this appliance.

Dynamic Lycra Splinting: Development and Application of Local Clinical Guidelines

- As a result of this evidence, therapists are able to provide impartial advice regarding the use of lycra splints and, as a consequence, the expectations of carers and child are not raised unrealistically.
- Feedback from the therapy team indicate that their clinical reasoning is enhanced, and a clear decision making process is ensured.
- There is now a clear rationale about the identification/assessment process.

In practice, therapists need to consider the lengthy assessment process and the identified lack of standardised assessment tools for this treatment modality. Thus, although not ideal, a local specific assessment tool has been developed to assess balance and upper limb functional abilities in four positions, by video recording. This is not validated, but has been designed so that basic observations between therapists are consistent.

CONCLUSION

Valid research evidence is emerging which supports the use of dynamic lycra splinting. This article describes the process by which one service sought to critique the evidence in order to create effective local clinical guidelines. The process of creating local clinical guidelines has demonstrated good collaborative working practice between occupational therapists and physiotherapists. Whilst critiquing the evidence, the need for a valid objective assessment of function became evident. In addition, a consensus doconcerning clinical guidelines for dynamic lycra splinting between therapy services may be beneficial. However, there may be variations in application due to service policy and funding.

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The authors would like to thank the paediatric therapy team in Knowsley Primary Care Trust for their helpful comments during the development of these clinical guidelines. Rachel Hipple, physiotherapist, was involved in the early drafts, and her contribution is appreciated.

Lycra Clinic - Continuing Development of Service

ALLISON MORRISON, MCSP
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Yorkhill
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Early in 2002, a small team, incorporating a Senior OT, a paediatrician and a Senior Physiotherapist started the planning of a Lycra Clinic for Yorkhill Hospital for Sick Children.

The business case was accepted by the Greater Glasgow Health Board in May 2002 and a recurring revenue budget of £20,000 was allocated to the provision of the service.

Since then, the team has developed the service and to date has successfully provided over 100 Lycra garments of varying types from a number of manufacturers to children with a wide range of conditions.

Continual Development?

Having established a monthly clinic, it rapidly became apparent that administrative support would be essential to continue the service delivery. The clinic now has one day of secretarial support a week which is invaluable in dealing with correspondence such as referral packs, to deal with appointments and room bookings and now increasingly to develop and maintain a robust database for the service.

It was also recognised early that, to maintain the quality of the service, we couldn't leave the review of issued garments solely to the local therapists. This meant initiating automatic processes to re-call patients, to check fittings, confirm aims of treatment and in many cases verify the benefits gained.

The Senior PT and OT have now, on several occasions, been asked to speak at a National level on the use of Lycra treatments and the development of the clinic. At present, the primary focus is to set up a network of therapists who are using, or interested in the use of Lycra splinting.

From the outset of the clinic an audit process has been implemented. Video footage is taken of the children and this is assessed using G.MFM and hand-function measures. Further, detailed examination is now required to analyse these and publish evidence of the efficacy of Lycra splinting.

The latest development that has been considered is the extension of the clinic to address other conditions that could benefit from Lycra splinting, these include, Neuro-muscular conditions and autistic spectrum children. It is hoped that this would attract additional funding and staffing but further documentary evidence would be required to enable benefits for patients across the UK.

Experience in Lycra splinting brings the realization that there is much more that we don't know about the modality. Excellent results are being achieved on children of mixed or low tone with athetoids seeming to benefit the most. Useful feedback on the use of Lycra garments from all groups is helping to develop the clinical thinking. However, it is apparent that these are "early days" and a significant amount of robust research is still required.

In the meantime, it is great that the funding has been given to form the clinic and allow therapists and their patients to experience the benefits of these treatments first hand.

School Physio Day 19.01.05 at Charlton School Equipment Group

NIKKI DANIELS

Research Therapist

The Assistive Technology Evaluation Centre

In 2003, physiotherapists working in special and mainstream schools attended two study days at Charlton School in South East London to look at issues which affect practice within education. Five key areas were chosen for discussion including activity programmes, caseloads, equipment, hydrotherapy, moving and handling and multi-disciplinary working. The discussion groups identified key themes relating to these topics and highlighted areas which required development of policies and procedures both at local and national level. In an attempt to action this development, a further study day was held on the 19th January, 2005.

At this follow-up day four discussion groups – Activity Programmes, Equipment, Hydrotherapy, Moving & Handling – were facilitated by local experts.

The following article is a summary of the thoughts and ideas of the eight delegates who participated in the 'equipment' group.

Discussions identified that a key area in which there are no agreed guidelines is the use of standing frames. Key topics in relation to standing were discussed and delegates proposed areas that require further action. The main area of concern was the lack of evidence available for consultation by therapists on the benefits of standing. Physiological aims such as maintaining or increasing bone mineral density, stretching tight muscles and avoiding dislocation of the hip joint appear to be the most common goals of therapists who prescribe this treatment and the areas in which the majority of research has focused. However, delegates were unsure of the depth and strength of the research findings relating to these goals. Additionally, evidence to support the various other goals which standing is believed to address is limited. Current evidence and published research was acknowledged through an up-to-date reference list devised by the group facilitator.

The range and diversity of goals makes the use of a generic standardised assessment difficult. Since the evidence that does exist suggests different regimes for achieving different goals the group agreed that it was important to have a clear goal in mind when beginning treatment. Delegates acknowledged that they did not use any form of objective assessment

tool to record the outcome(s) of standing programmes due to the lack of a suitable measure. Therefore, by not recording outcomes, therapists are unable to prove the effectiveness of treatment, which also prevents them from contributing to the evidence base for this practice. However, it was recognised that as more than one treatment modality may be used to achieve similar goals, for example stretch, it is difficult to establish if standing alone is having a positive effect.

There was a consensus amongst delegates that the apparent limited evidence to support the use of standing frames is preventing clear guidelines on aspects of treatment, such as frequency and duration of use, from being developed in relation to specific goals. Guidance that has been given in relation to standing times (Stuberger 1992, APCP 2001) was discussed by therapists. However, barriers to achieving this such as limited resources or lack of staff or time were identified. Delegates concluded that the need to continually provide an evidence base for practice requires action to be taken to remedy this situation. This should include the identification and use of appropriate objective assessments by all clinicians who use this intervention.

Examples of good practice were shared amongst delegates. One therapist was successfully using standing diaries to record the frequency and duration of standing sessions in school. This approach facilitated monitoring of the actual amount of time that children spend in the standing frames – often much less than that anticipated by the therapists. It can also highlight reasons why standing sessions are not carried out or completed so that appropriate action can be taken to increase a child's standing time. Using digital photographs to record a child's optimal position was suggested as a method to train classroom staff how to correctly position a child in their frame. Reports of services such as postural care teams dedicated to standing were also given as examples of good practice.

Delegates were informed of the recent establishment of a national 'Standing Network'. This group was formed to centralise research being carried out in relation to standing and to facilitate communication amongst researchers and clinicians. Network members, who are actively carrying out research in this field, meet regularly to provide support and encourage dissemination of findings. The 'Standing Network' aims to act as a central resource for relevant research both published and unpublished which clinicians at national level can access.

In conclusion, this group recommended a number of actions:-

- They called for an increase in the evidence available to support the benefits of standing through robust research, which in turn would support

School Physio Day 19.01.05 at Charlton School Equipment Group

national guidelines on the use of this intervention in meeting specific treatment goals.

- The development of objective measures by clinicians to record outcomes was considered essential to monitor individual treatment programmes and to contribute to the existing evidence base.
- The development of guidelines for training carers – education/therapy assistants/parents – in safe ways of using standing frames and methods to monitor competencies.
- The establishment of the ‘Standing Network’ was welcomed. The group felt that this was a resource from which clinicians could benefit and a central source to which both researchers and clinicians should be encouraged to contribute. This joint collaboration of both researchers and clinicians could also facilitate the further research that is required to take forward recommendations such as those suggested during the ‘School Physio’ day.

In addition to the discussion groups Nikki Daniels (Research Therapist with the MHRA) gave a presentation on the findings of a recently published report entitled ‘An evaluation of standing frames for 8 to 14 year olds’ produced by the Assistive Technology Evaluation Centre, Derby on behalf of the Medicines and Healthcare Regulatory Agency. This evaluation was carried out through user trials, professional appraisals and the technical testing of eleven standing frames selected to represent the various features of the frames available on the UK market. The report is designed to enable therapists, carers and users to identify the features of a standing frame which are most relevant to their needs and the environment(s) in which a frame is to be used.

INFORMATION:

For further information on the ‘Standing Network’ or to register current research in this field, please contact:-

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- ‘An Evaluation of Standing Frames for 8 to 14 year olds’ can be accessed via www.mhra.gov.uk or by contacting Nikki Daniels, Derby Assistive Technology Evaluation Centre nikki.daniels@derbyhospitals.nhs.uk
- An e-mail database has been established to facilitate information sharing amongst the delegates. If you would like further information about the Study Day, the up-to-date reference list for use of equipment or the other three discussion groups please contact annmartin775@hotmail.com .
- The summary of the other three discussion groups will be submitted for publication in the June edition of the APCP Journal.

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News from National Committee

National Committee met in Glasgow on 14th January, following the custom established in recent years of holding the first meeting of the year on the Chairman's home territory. The weather was kind on the day with no last minute travel problems for committee members. There were a few new faces with Stephanie Lawrence and Gill Wildon attending as alternative regional representatives and Chris Sneade as a newly co-opted committee member.

I continue to receive regular requests for information about our website, mostly by email and for information about APCP and membership. Very little correspondence is received from members using pen and paper. It is not surprising therefore that national committee once again devoted time to discussing the Website proposal, presented by Gill Holmes. Gill and Mary Harrison continue to be our link with CSP for Web-site issues.

Committee Business included:

- Progress regarding review of evidence based guidelines was discussed at the editorial board meeting. Amendments to the Hips guideline will be printed in loose leaf form in the March Journal. Existing guidelines will contain an insert with amendments.
- Fiona Down will clarify the process for groups wishing to become affiliated groups. Gill Holmes will represent the National Committee at a proposed meeting to develop the neuromuscular interest group as an affiliated group of APCP.
- Sarah Crombie attended a meeting on behalf of APCP of the working party developing a monitoring protocol for children with Downs syndrome. The group would like APCP to give advice on the motor component of the guideline. The timescale for the working party is approx 2 years.
- Communication difficulties between APCP and CSP have resulted in APCP now having a one day programme at Conference in Birmingham on October 7th 2005. CSP have offered three sessions; 9.30- 11.00 am 2.00-3.00pm and 3.30-5.30pm.
- Peta Smith received correspondence from Ralph Hammond detailing the recruitment process for moderators for the iCSP network.
- There was discussion regarding the role of the CIG's in supporting their members. Issues included the role of APCP in supporting the development of a career pathway and working with CSP to identify skills and competencies. Peta Smith commented that the National Skills for Health competencies are a good framework for development work. These issues will be developed at an APCP working weekend in 2006. APCP were asked by CSP to look towards endorsing appropriate courses.
- The Botulinum toxin guideline group met on 3rd December 2004 in London. Rob Shaw (Bristol group), Dawn Blackaby (Leeds) and Jill Davies (Wales) also attended. There was agreement on the scope and format and discussion regarding levels of evidence and the information collected to date. Laura Wiggins asked National Committee to fund a proposed questionnaire to determine current physiotherapy practise relating to treatment with Botulinum toxin injections. This was agreed. The group will arrange a further open meeting with presentation of the work to date.
- Arrangements are being finalised for conference in Swansea and have commenced for congress in Birmingham, October 2005 and in Glasgow in November 2006.

The next National committee meeting will be held on Thursday 31st March at 8.30am, in Swansea. Your regional representative can raise issues on you behalf at national committee.

Laura Wiggins
Secretary

Research and Education

Research Meeting:

Unfortunately this occasion was cancelled due to lack of applicants! My thanks to those four who expressed an interest to be involved and hopefully from this small start something will grow and flourish. I did spend a lot of time wondering if it was the timing but three weeks after Christmas gives everyone time to recover, the kids are back at school etc etc. Then I remembered that the last attempt to hold a research study day failed too!

Three of us did meet on the day to discuss how to take things forward. It has been decided to hold another meeting on Monday April 18h 2005 in the physio department at Hammersmith Hospital from 2pm-4pm. At this meeting we are going to discuss how to formulate a research question and also to discuss our own research, particularly areas where we are struggling. For me that will be around stats – no matter how hard I try I really do have a problem with number crunching etc. So if you're interested come and join Marion Main, Sally Durham, Nicky Thompson, Elaine Scott and me at the Hammersmith. Tea and cakes and friendly faces will be provided. Please let me know if you are either interested in coming or would like to be informed of future meetings.

Research Bursaries:

At the last National Committee meeting it was decided that the next Bursary awards would be in early 2006. Those of you who are in the process of applying (and those of you who are considering) need to get your applications in for December 1st 2005. Please contact me if you need an application form and please do feel free to ask if you need help with your research proposal. I know from experience that it can be very useful to get someone else to look it over before its submitted – it can save valuable time and rewrites if like me you are a last minute person. If you are not sure whether your project idea would be suitable for a bursary please do contact me for an informal chat.

Other funding opportunities:

If you need to think about funding your project sooner than 2006 then consider:

- *Physiotherapy Research Foundation Awards.* These are allocated each September. Contact Marion Attew at the CSP e-mail: attewm@physio.org.uk. Marion is very helpful and will advise you which funding band you should apply for, depending on the type of project you are interested in pursuing and also on your previous research experience.

- *Department of Health:* This site can be a little daunting (*all* DoH funding and policy initiatives) but there are useful links to other sites which may be relevant to your needs. <http://www.doh.gov.uk/research/>

Research Group Register:

If you look towards the back of this Journal you will notice a whole page given over to the ACP Research Group Register. As I ease myself into this job, by getting through all the pieces of paper etc I inherited from Sarah, I now realise that not a lot of you have registered your research interests with us (including me, but I will do today just to set a good example). Please do consider it. We cover an enormous range of paediatric specialities and interests between us all and I am sure that there is some fantastic research going on – only we don't know about it. Letting us know what is going on could help you with your project if you needed anyone who has looked at the same subject to discuss your ideas and it may save unnecessary time and duplication. From my own perspective I seem to be sent questionnaires from various people to fill in regarding, for example, Perthes disease – perhaps whoever is interested in Perthes disease would be grateful to know what has already been done so that the questions asked could become more specific rather than general. Networking can be so useful.

Help with student projects:

Thanks to all you folks who have kindly offered in the past to help students with their projects. I have now managed to collate all your info onto my computer so that if I get an enquiry asking for help in a particular region then its all there and easy to send out. However now this has been 'regionalised' I can see that there is only one volunteer in North Wales, and the North East and Northern Ireland volunteers are a little thin on the ground! Lancashire volunteers far outstrip Yorkshire – I feel a War of the Roses coming on but please you Yorkshire people do think about volunteering to help. I know that filling in forms and putting them in the post may be a bridge too far but if you want to e-mail me all offers will be gratefully received.

If you want to volunteer electronically these are the things I need to know.

- Name
- Address
- E-mail
- Area of clinical interest
- Grade (I have been asked for just clinical specialists by a couple of students and so far we haven't collected this info)

Research and Education

- Whether you are willing to be sent a questionnaire Y/N
- Whether you are willing to be involved with a short telephone interview Y/N
- Whether you would be willing to take part in a discussion group Y/N

Supporting students may get them to think kindly on paediatrics when considering their career options! Please do think about helping. Thank you.

Research and Children: involving and informing.

Last summer there were a series of road shows to the Trusts in North Central London sector to discuss the importance of informing and involving children in research projects. This was all part of the Great Ormond Street Hospital and the Institute of Child Health Research Strategy and Research Governance Implementation Plan. There were a number of poster presentations showing examples of research, which had involved children, and research that had resulted in changes in practice. These posters are available on the GOSH website if you would like to see them:

http://www.gosh.nhs.uk/gosh_families/research/projects.html.

Well that's it for now. I do hope to see lots of you at APCP conference in Wales!

Jeanne Hartley
Research Officer

EDUCATION

Courses to assist CPD

Introduction to paediatrics will be held in Belfast in March, this course has been commissioned specifically to meet the training needs of Paediatric physiotherapists in the region and therefore places are being limited. We plan to run the next Introductory course in Nov/Dec 2005, this course will be available to any APCP member, throughout the UK. If you would like this course to come to your region, please get in touch with your regional representative.

Advanced courses.

Advanced course in Cerebral Palsy management. This course is running in February. It has been commissioned by the Derbyshire confederation and so places are again limited. If you would like this

course running in your region, contact your local representative.

Outcome measures

The outcome measures file is now in the hands of the printers, a draft copy being made up for final proof reading prior to final printing. It is planned that the final print will be available for release at APCP conference in Swansea. The cost will be £20 for the core document and the developmental measures pages. These will be loose leaf, hole punched sheets to go in an A4 file, this will help you to easily collate additional sections as they become available.

New teachers/mentors

Have you got a passion for your specialist area?

Do you enjoy helping others to learn?

Do you have at least 18 months experience in a spectacular area of paediatrics?

APCP needs you!

Due to the expanding CPD role within the APCP more tutors are needed to help with associations courses. These courses range from introductory level to advanced and Masters level courses. APCP are seeking to support new tutors within local networks as well as finding experienced tutors who haven't been involved so far. Anyone new to teaching with the APCP will be supported via:

- an APCP teaching pack,
- mentorship
- teaching observation
- and email support.

APCP will pay tutor fees according to the agreed rate and in return ask a commitment from tutors to teach at least 2 days a per year.

If you would like to get involved, please contact Adele Leake at a.c.leake@shu.ac.uk or on 0114 225 2381 for an informal chat.

Adele Leake
Education Liaison Officer.

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Continued overleaf

Supporting Matter:

(List items enclosed. Please ensure these are marked clearly with your name and subject.)

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Proposed use of prize money:

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Please list any other sources of funding for this project:

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For further information you may also contact Jeanne Hartley, Research Officer
for the APCP Tel: 0207 405 9200 Ext. 5144

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Regional and Sub-Group Reports

SOUTH WEST

This report starts with me blowing the SW trumpet for the specialists in our area!!! I would like to publicise the fact that two of our SW neonatal physiotherapists attended the advanced Prechtl course in Pisa in October. The outcome of this was only 4 passed with a grand score of 100%. Helen Robinson and Sally Jary, the only two UK physiotherapists and the only Brits to be there, were part of this fab 4. "Never again" might be the cry from them but what an amazing feat and I think we should all be proud of their representation of our profession.

As for regional courses...mmmm. Last year did not seem to happen with the speakers we had planned but we are holding a hydrotherapy course in May in Southampton and a sensory integration one in Salisbury towards summer. As I write this I am trying to bring together a CP or not CP day, with metabolics, genetics and fidgety movements, but it is quite hard to get the speakers and venue all on the same day. It may or may not have happened by the time this hits print.

I hand over as chairperson this year after serving my 4 year term as a post-holder, but will continue to serve on the National Committee as a member and then probably treasurer. This does mean that there will be vacancies as Clare steps down from regional treasurer also. Please think about your representation on the committee to provide a good specialist mix and the opportunity to network. It is 4 days a year plus a bit of extra work, and we pay expenses and provide tea, coffee, and various biccies and buns!

Thank you to all on the committee for their support for both Clare and I. I also thank Clare for being my right hand man on a number of occasions and I look forward to a slightly easier time!

RUTH DAVIES

SCOTLAND

The regional committee will meet for the first time in 2005 on Friday 4th February at The Craighalbert centre in Cumberlald near Glasgow.

This is to be an all day meeting—10am to 3pm. The morning will be devoted to planning for the APCP Conference in Scotland in 2006. The Conference title is around Nature and Nurture and the agenda for this meeting is to finalise and confirm the venue,

proposed audiovisual support and start to structure the Conference Programme. If members have any ideas, projects, presentation or posters please contact your local area APCP representative.

Over a working lunch we will discuss committee business and plan for the AGM and next study day of this year. The venue, date and programme content will be decided.

ALISON GILMOUR

NORTH EAST

Recently, I sent out nearly 300 flyers to members and lapsed members about our next study day in April. Hopefully, many of you have already applied or are in the process of doing so. The closing date is 18th April. The study day on 'Postural Management', facilitated by Terry Pountney will be well worth attending, especially if you are having difficulty persuading managers to fund essential equipment to aid such management as you will have all the necessary evidence to support your need.

The Study Day with our AGM will be held in the Postgraduate Centre of York District Hospital on Wednesday 27th April. Further details can be found on the flyer also in 'events' on ICSP Paeds Network. I sent an application form with the flyer that should be copied for future use. The form can also be downloaded from page 6 of the document section of Paeds ICSP.

Details for our autumn study day have not been finalised but should be available in the June Journal. It is hoped that the topic will be DCD.

Finally, it is not too late to renew your membership for those of you who have forgotten to do so. Well worth considering direct debit, then no worries about not getting your Journal etc. Last year's eventual membership for the North East region was 237 – a huge increase.

Looking forward to meeting up with many of you at our study day + AGM and hopefully before that in Swansea at our National Conference.

MARY HARRISON

LONDON

Happy New Year to all our members in London region. We are delighted so many of you have renewed your membership. We hope this means you value the network and you are getting access to peer support and training as well as the excellent journal. Our numbers are down from last year so encourage your colleagues to join and remember students and assistants pay a reduced rate.

Regional and Sub-Group Reports

The committee would like to thank you for supporting the evening lecture format. In the Autumn we held very well attended meetings on 'Drug management of paediatric spasticity' and 'The Ponseti approach to managing talipes'. The feedback to the speakers was very good.

During the spring lectures are planned on Night-time postural management with Terry Pountney, Paediatric obesity, and HIV – speakers to be confirmed. Details will follow by flyer and email.

Lesley Katchburian has acted Chair for the last 2 meetings following Kate Beattie's resignation and has expressed an interest in taking this on permanently. Christina Rafter and Sarah Prior are doing excellent work as secretary and treasurer respectively. We currently have 3 vacancies on the committee we need to fill - please don't be shy. The committee is a mixed group with all levels of experience. Why not come along to the AGM (date to be advertised) and find out more or get in touch with me.

Christina reports a good response from members contacting her with e-mail details. An e-mail list will enable us to cascade information through from national and regional meetings and send details for courses rapidly. If you wish to receive information this way get on line to Christina Rafter on raftec@gosh.nhs.uk

Looking forward to seeing you at further meetings.

STEPHANIE CAWKER

SOUTH EAST

Firstly we have successfully run the School Physio Follow-Up study day at Charlton School for physiotherapists working within educational establishments. The day, which ran as workshops facilitated by local experts in Hydrotherapy, Moving & Handling, Activity Programmes and Equipment, was well attended and greatly enjoyed. The decibel level was high throughout the day with lots of networking going on. I hope to have completed the collation of all the discussion group information within the next 2 weeks. If you are interested in any of the information it will be available from me via my e-mail address (see back of Journal).

Talking of e-mails - at the study day we collected the e-mail addresses of all the participants to make dissemination of information much easier. If you feel it would be beneficial to develop a database of e-mails for APCP in the SE Region please let me know. Such a database would make it easier for the

committee to contact members with information – course flyers, application forms etc – and could act as an information resource for members wishing to contact other paediatric physiotherapists – for example for research purposes. My e-mail address is at the back of the journal.

Our next study day is the AGM in September 2005. We have invited Kath Thacker to talk to us about Pain Management in Paediatrics. The date is 15th September 2005, time is 3pm – 5pm, content includes lecture, AGM and social, venue is Bluewater ... so a great opportunity to do some shopping, take in a film or go out to dinner with friends and colleagues after the APCP meeting. Get out your diaries and put it in NOW so you don't miss all the fun!

Talking of AGM - you may remember the questionnaire which was circulated in September 2004, prompted by the disappointing attendance at last year's AGM. A big Thank You to the 49% of the membership who responded – all your responses and comments have been included in the collated findings.

If you would like a full copy of the results please contact me. However, in brief:- those who responded felt that the best days for courses were Thursday (66) and Wednesday (64), November was the most popular month (62) followed by October (59). Full day courses were far and away the most popular (93) and Brighton the most popular venue (47) with Croydon a close second (46). Practical courses (49) run by Inhouse experts (45) were the most popular choices, with tea, coffee and lunch (72) the overwhelming choice for catering. 68% of respondents felt that cost was definitely a deciding factor with £25 for a half day, £50 for a full day and £100 for a weekend considered reasonable charges.

You may well ask why, with all that information available, the next course is a 1 hour lecture, in September, at Bluewater, in the evening???? I can only say that the planning was underway before the results were known – we'll try to match your requirements better next time!

Finally, a few items from the recent National Committee meeting:-

- Jenx Award for Innovation in Paediatric Physiotherapy (application in the December Journal). Have you done something new and exciting which is benefiting your service? Apply now for the chance to win £1,500. It would be nice to keep it in the region – last year Claire Poole's team at the Mary Sheridan Centre, Canterbury, won the award for their Fizzy project.
- Down's Syndrome – does any one have information, protocols, check lists etc which are

Regional and Sub-Group Reports

parent-friendly and easy to use? Sarah Crombie (previously Regional Rep and then Research Officer) is producing a pack to help parents identify their child's needs and would welcome any information. Please e-mail it to me and I will forward it on to Sarah.

- ACP CP CONFERENCE 2007 – this will be held in SE Region. Get your thinking caps on now! If you have any ideas about great venues, themes or speakers please let me know asap. We will need to start organising this soon. If you want to volunteer to help to organise the conference that would be great. Just let me know!

Hope to see lots of you at Conference in Wales.

Happy Easter

ANN MARTIN

EAST ANGLIA

Firstly, the East Anglia committee would like to thank Selin Bridges, who has resigned from the committee, and no doubt will easily fill her time with her new baby, due within the next few weeks. We would like to thank Selin for her work on the committee over the last four years, (as well as for the use of her house as a venue for our regional meetings!).

As I write, we are busy organising our study day on Independent Wheelchair Mobility, which will have taken place in Norwich by the time this journal is published – we have had a great deal of interest so far, and I hope that everyone finds it useful.

Unfortunately, Mary Ann Haughton is unable to come to speak on a Pilates study day for us until next year, so we are planning to cover an alternative topic for a planned study day in Spring – among the possibilities we are investigating are Goal Setting, Chronic Fatigue and Chronic Pain. We will send out announcements as soon as we can. We are still planning to run the Pilates study day, but this will now be early in 2006. If any members have topics that they would like us to cover, or have attended study days locally on topics which they feel would be of interest to other ACP CP members, please let me know.

Plans are ongoing for a two-day course on Managing Complex Needs with provisional dates booked for 16th and 17th November 2005, at the University of Hertfordshire.

Just a reminder that the ACP CP Conference this year is in Swansea at the end of March. In addition,

ACPCP will be joining the CSP Congress in Birmingham on 7th October with a programme of speakers, and will hold our national AGM on that day.

SUE COOMBE

WALES

As you can imagine, the Wales ACP CP committee have been up to their ears in Conference matters over the last few weeks – when you read this there will only be a few more days to go before the closing date for registration on March 11th. This just gives anyone who still wishes to join us in Swansea a last chance to book the whole Conference package or maybe a day or half a day package. Do give it some thought – the program is fantastic!

Also when you read this ACP CP Wales will have held their AGM for 2005 and there will have been quite a considerable change of personnel. I do hope you will give your fullest support to the new committee as they embark on a new year with many new ideas for further education. The results of our questionnaire will also be known and we will be acting promptly on the ideas put forward by the members.

If, in the unlikely event of you not receiving a questionnaire, please contact the secretary for a copy as we need the thoughts, the ideas and complaints of all our members.

I would like to wish all members a happy and successful 2005 and all those coming to Conference a fantastic day/days of education, exchange of views, good company and good food!

Finally, don't forget your membership renewal for 2005 – still time to join or just to renew.

JILL WILLIAMS

NORTH WEST

It has been a fairly quiet time for the North West over the past few months and there isn't too much to report on.

In the autumn we held two very successful study days. The first was the Hydrotherapy Day which was in fact repeated again on the following day due to the response we had. Heather Epps was the main facilitator, along with Sue Booth from our local committee. The feedback was very positive. Thank you to Sue Booth for all the hard work involved in organising the days.

The second day was the one we ran in conjunction with NAPOT on PEGS, the verbal feedback I've received has been positive. Again thank you to the course organisers.

Regional and Sub-Group Reports

At present we have a full committee but we are always looking for new people who have an interest in getting involved in the region – please give it some thought. Committee last met in December and will be meeting again in March. We are looking at Study Days for later in the year and are hopeful that Gill Holmes will be running one for us on Muscle strengthening in the summer. We are also exploring further options for the autumn. Any ideas for future study days you would like to see in the region.

Our AGM will be held again this year on March 4th in Warrington, by the time you receive this edition of the journal it will already have taken place. Hope you attended. Don't forget that we are able to offer a number of bursaries each year, you can apply by writing to the committee with an outline of what you would use it for. All we ask in return if you are successful is that you submit a short report to us on what you gained from your course etc.

ELAINE LLOYD

NEONATAL CARE GROUP (Affiliated to the APCP)

First of all I would like to wish you all a very happy and healthy new year. I can hardly believe how fast time is racing by.

The most recent events for the group, is that a selection of the committee met up in Nottingham at the beginning of December to take part in a table top discussion looking at Competences which had been drawn up by 'Skills for Health'. We were able to look at the 4 most relevant competences relating to the neonate. The day proved to be an extremely productive and interesting exercise. Peta Smith, our Chair, received a positive response and we were thanked for our input.

With regard to the BLISS Leaflets, these should be available around the time of the annual APCP Conference in Swansea at the end of March. We are hoping that PAMPERS are also funding the leaflets and so this should assist a quick solution to this project. There is a possibility that the committee will take the opportunity to meet whilst at the conference in Swansea. I look forward to seeing as many of you there as possible and also to meeting new members. And a final reminder that if you want to remain on the data base for the group you need to complete your details and send them to our secretary Nicky McNarry.

BARBARA HAEDERLE

APPLICATION FORM FOR A.P.C.P. PUBLICATIONS

Dated July 2004

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2002

Paediatric Physiotherapy Guidance for Good Practice£5.00

Obstetric Brachial Plexus Palsy

A Guide to physiotherapy management£10.00

Hip Dislocation in Children with Cerebral Palsy

A guide to physiotherapy management£7.50

Evidence Based Practice

- Management of Obstetric Brachial Plexus Palsy£3.00
 - Hip Subluxation and Dislocation in Children with Cerebral Palsy£3.00
- OR£5.00 for the pair

Paediatric Manual Handling – Guidelines for Paediatric Physiotherapists£10.00

Human Postural Reactions – Lessons from Purdon Martin by Dr J Foley£5.00

Baby Massage£1.50

The Children Act 1989 “A synopsis for Physiotherapists”£1.00

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Book Review

Children with Severe Disabilities and the MOVE Curriculum. Foundations of a Task Oriented Therapy Approach
East River Press: New York
ISBN 0-9759183-0-3

Gilbert Thomson, PT

The MOVE (Mobility Opportunities via Education) "curriculum" offers an approach to working with children and young adults with severe disabilities through functional activity. This book offers an in depth rationale to support the MOVE approach. It introduces the MOVE approach and the children to whom the approach is aimed. It describes the theoretical movement classification which is based on Gentile's work. Several chapters are devoted to aspects of the neurological basis of movement including control, development, learning and plasticity. These sections offer a wealth of information on all of these areas, are well-referenced and are worth reading even if you have no plans to use MOVE. Some sections are very lengthy and require persistence but are well worth reading. The references are in very small type and challenging to decipher. The sections on the theoretical underpinning lead to a sound rationale for the use of the MOVE "curriculum" being capable of achieving functional improvements. This rationale would also support many other therapeutic approaches. The final chapters explore MOVE as a task oriented approach and consider the practicalities of implementing the programme.

The text is supported by diagrams, clinical points and active learning exercises which help the reader understand concepts from the text. The quality of diagrams was variable and in some cases superfluous. The only weakness in the book's content was the lack of an in depth consideration of adaptations to the musculoskeletal system.

Overall this book provides a sound basis for the MOVE approach, the provision of therapeutic interventions, examples of working with other team members to achieve change and a positive approach to working with children with disabilities. The complexity of the material in the book suggests that it is aimed at therapists and doctors.

Terry Pountney PhD MA MCSP



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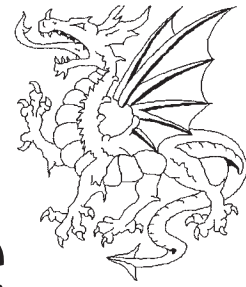
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A.P.C.P. Conference Wales 2005



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to
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Courses

ASSOCIATION OF PAEDIATRIC CHARTERED PHYSIOTHERAPIST NATIONAL CONFERENCE 2005 UK

FAMILY CHOICES – CHILDREN'S VOICES

THURSDAY 31st March 2005 – Consent Chair : Phillipa Ford MCSP Policy Officer for Wales

01.15 – 1.30 p.m.	Welcome in Welsh and English
01.30 – 1.50 p.m.	Peter Clarke "The role of the Children's Commissioner for Wales"
01.50 – 2.35 p.m.	Geraldine Hastings LL.M BSc MCSP Physiotherapy Lecturer Cardiff University - Consent
02.35 – 3.15 p.m.	Carolyn Dunford MSc Clinical Specialist OT – Perceived Efficacy Goal Setting System
03.15 – 3.45 p.m.	Tea – Exhibition and Posters
03.45 – 4.45 p.m.	Professor Priscilla Alderson Social Science Research Unit, Institute of Education, University of London – How we gain consent from Children
04.45– 5.15 p.m.	Professor Richard Williams, Professor of Mental Health Strategy, Welsh Institute for Health and Social Care, University of Glamorgan. Topic to be confirmed
18.00 – 19.00	Cheese and Wine exhibition.

FRIDAY 1st April 2005 – Participation Chair Dr Eva Bower PhD, FCSP.

08.45 – 09.45 a.m.	Dr Peter Rosenbaum MD, FRCP(C) Professor of Paediatrics, McMasters University, Ontario Canada Research Chair in Childhood Disability. CanChild Centre for Childhood Disability Research – Family Centred Services
09.45 – 10.45 a.m.	Mary Law PhD, OT(C), Professor and Associate Dean (Health Sciences) Rehabilitation Science, Co-director, CanChild Centre for Childhood Disability Research, McMasters University, Ontario- Participation
10.45 – 11.15 a.m.	Break and Exhibition and Posters
11.15 – 11.45 a.m.	Liz Atter Senior Physiotherapist Specialising in DCD - Moving into Leisure Centres
11.45 – 12.15 p.m.	Consultant Orthopaedic Surgeon Naomi Davis Manchester Children's Hospital and Dawn Clabon Clinical Specialist in Casting and Orthotics - Ponsetti approach to treating babies with Talipes
12.15 – 01.15 p.m.	Lunch and Exhibition

FRIDAY 1st April 2005 – Participation Chair Lynne Horrockes MCSP MSc

01.15 – 01.45 p.m.	Jon Morgan Director of the Federation of Disability Sport Wales -Sports Disability
01.45 – 02.30 p.m.	Mother and Child – Experiences of Healthcare

Practical Workshops 2.30 – 3.30 p.m.

PEGS	Carolyn Dunford
Plastering Neurological	Dawn Clabon and Olga Bisby
Manual Handling	Wendy Williams
Rebound	Wendy Gadd and Vikki Stevenson
Sports Disability Development Officer	Jon Morgan
Problem Solving with Lycra	Martin Matthews
Consent	Geraldine Hastings

Practical Workshops 4.00 – 5.00 p.m.

PEGS	Carolyn Dunford
Plastering Talipes	Dawn Clabon and Olga Bisby
Manual Handling	Wendy Williams
Rebound	Wendy Gadd and Vikki Stevenson
Sports Disability Development Officer	Jon Morgan
Problem Solving with Lycra	Martin Matthews
Consent	Geraldine Hastings

3.30 – 4.00 p.m.

Tea – Exhibition and Posters

7.00 Reception

7.30 Dinner with Roy Noble as the Dinner Speaker

SATURDAY 2nd April 2005 - Choices and Voices Chair Viv Williams Grad Dip Phys.

09.00 – 09.40 a.m.	Bernie Henderson IT Specialist in Education - Alternative Communication
09.40 – 10.40 a.m.	Steffan Berweck and Florian Heinen co-authors of Treatment of cerebral palsy with Botulinum toxin, clinical practice, Atlas Choices in botulinum toxin administration.
10.40 – 11.10 a.m.	Coffee – Exhibition and Posters
11.00 – 11.50 a.m.	Jenny Carroll Director of Bobath Cymru Physiotherapist – Topic to be confirmed
11.50 – 12.20 a.m.	Snap Cymru
12.20 – 12.45 a.m.	Poster competition winner
12.45 – 01.00 p.m.	End of conference address – National Committee

This programme may be subject to change



Association of Paediatric Chartered Physiotherapists Annual Conference

University of Wales Swansea

31st March – 2nd April 2005

Name:

Address:

Delegates Joining Instructions

Thank you for submitting a registration form for this Conference. A campus map and travel directions may be accessed using the following link: www.swansea.ac.uk click 'the university' then 'maps' in the left-hand column. If you made a postal application, a map is enclosed.

Registration for the Conference will take place in the foyer of the Taliesin building (number 32 on the campus map) on Thursday 31st March from 11.00am to 1.30pm. Subsequently, the registration desk will be open on Friday 1st and Saturday 2nd April between 8.30am and 10.00am. The desk will be staffed during refreshment breaks for information and assistance.

There is no provision for lunch on Thursday so please make your own arrangements. There are a number of catering outlets on campus. Entry to all sessions, meals and conference events is by badge and/or ticket only (to be found in your Conference Pack). Please therefore, ensure you wear your badge at all times.

There will be a Welsh Cheese and Wine Reception with entertainment between 5.30pm and 6.30pm on Thursday evening. No dinner has been arranged on campus after this event and delegates are expected to make their own arrangements. Details of local restaurants can be found at www.visitswanseabay.com and go to 'what to see and do' then click on 'food and drink' or enquire locally at the Conference Registration Desk.

You are invited to attend the Conference Dinner on Friday evening, at an additional charge. Entrance to the Conference Dinner is by ticket only (to be found in your Conference Pack). If you wish to attend the dinner you will need to register and pay in advance.

The first session of the Conference commences at 1.15pm on Thursday 31st March, in Taliesin Theatre (number 32 on the campus map).

Ensuite accommodation is in Preseli Residence (number 20 on the campus map). Keys to all rooms will be issued from the central desk in the ground floor of Preseli. Rooms will be available from 2.00pm on the day of arrival. On Thursday 31st March every effort will be made to allow delegates to access their rooms earlier. A luggage store will be provided in the Preseli Residence from 11.00am for delegates unable to access their rooms.

There is 24-hour porter cover for the central reception desk in Preseli. Please tell us if you anticipate a very late arrival. Guests are requested to vacate their rooms by 10.00am on the day of departure. A luggage store will be provided on Saturday 2nd April, please enquire at registration.

If you are travelling by car you may bring your vehicle up to the halls of residence for loading and unloading but you must then take your vehicle to the car park at the bottom end of campus, second car park on the right hand side. To park on campus a notice should be displayed clearly on the inside of each vehicle. These can be collected from the Gate Porters, the reception desk in Preseli Residences or from the Conference desk. If the car park fills to capacity there is overspill parking nearby; about 2 minutes walk to the west of the campus or 7 minutes walk to the east side, both are pay and display. Vehicles can be moved to the car park to be left overnight.

Courses

Speakers – If you are flying into Cardiff International Airport, please contact Sue Hudspeth on Tel: 01633 274832 or Email: suehudspeth@gwent.wales.nhs.uk and confirm your flight details, so that arrangements can be made to meet you at the airport.

National Committee Members – The programme starts on Wednesday 30th March with meetings from 12.00pm-4.00pm. On Thursday there will be a meeting in Digital Technium from 9.00am-12.00pm. For residents, keys will be available on Wednesday from 2pm from the Reception Desk in Preseli.

We have recorded the following information regarding your registration. Please let us know promptly of any inaccuracies, or if we can be of further assistance. If you require a receipt or proof of attendance, please ask at the Conference desk when you register.

We look forward to welcoming you to Swansea for the Conference.

Conference Services

Conferences@swansea.ac.uk

Tel: 01792 513126/295665

Fax: 01792 295675

Delegates Information		
Affiliation:		
*Category (see below for explanation):		
Special Needs:		

#Package Details:		
Nights and number of bed & breakfast booked:		
Wednesday	Thursday	Friday
Meals and numbers booked		
Friday		
Lunch	Conference Dinner	

Amount Due:	Amount Received:
--------------------	-------------------------

*Categories M = Member
 N = Non-Member
 S = Speaker
 C = National Committee Member

#Package Type Residential
 Non-Residential
 D1 = Thursday pm
 D2 = Friday am/pm
 D3 = Saturday am

CONFERENCE DINNER & ENTERTAINMENT

A TASTE OF WALES

Menu

Poached Tawe Sewin
Served On A Bed Of Mixed Leaves
Drizzled In A Lemon Vinaigrette
Peppered With Fresh Penclawdd Cockles

~~~

Baked Lamb Fillet  
Served With Braised Buttered Leeks  
Accompanied With A Rich Port Sauce

~~~

Half Pineapple Filled With Fresh Fruit Salad
Served With Welsh Whiskey & Honey Laced Cream

~~~

Coffee, Petits Fours & Welsh Cakes

~~~

Vegetarian Option

Leeks & Caerphilly Cheese Served In A Filo Nest

£35.00

Welsh Male Voice Choir

ROY NOBLE – *After Dinner Speaker*


and

Dancing to the early hours with

Y Mabon

a Welsh Folk/Pop Group

Don't forget to book your place – see conference booking form.

	<p>ASSOCIATION OF PAEDIATRIC CHARTERED PHYSIOTHERAPISTS (APCP) ANNUAL CONFERENCE</p> <p>UNIVERSITY OF WALES SWANSEA 31ST MARCH-2ND APRIL 2005</p>
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Delegate		
Title	First Name	Last Name
Place of Work (to appear on your badge)		
Address for Correspondence		
Email	Fax	Tel
National Committee Member	Y/N	APCP Number and Region
Please tell us if you have any special requirements (diet, mobility, etc)		

Please tick to indicate your package requirements ✓

PACKAGE 1 – RESIDENTIAL					
The full conference package includes accommodation on Thursday and Friday nights in student halls based on campus, all daytime catering plus entry to all lecture and workshop sessions on Thursday afternoon, all day Friday and Saturday morning. A limited number of twin rooms are available costs upon request.					
Please see attached Workshop list and indicate your choice					
	Early Bird – Before 28/1/05		Booking after 28/1/05		Amount to Pay
	Member	Non-Member	Member	Non-Member	
Single Ensuite	£280 <input type="checkbox"/>	£325 <input type="checkbox"/>	£310 <input type="checkbox"/>	£355 <input type="checkbox"/>	£

OR

PACKAGE 2 – NON-RESIDENTIAL					
Includes entry to all lectures and workshops on Thursday afternoon, Friday and Saturday morning, all meals but <u>no</u> overnight accommodation. *Please see attached Workshop list and indicate your choice*					
	Early Bird – Before 28/1/05		Booking after 28/1/05		Amount to Pay
	Member	Non-Member	Member	Non-Member	
Attending full conference	£150 <input type="checkbox"/>	£165 <input type="checkbox"/>	£165 <input type="checkbox"/>	£180 <input type="checkbox"/>	£

OR

PACKAGE 3 – DAY AND HALF-DAY RATES (Non-Residential)					
	Early Bird – Before 28/1/05		Booking after 28/1/05		Amount to Pay
	Member	Non-Member	Member	Non-Member	
Thursday – Afternoon (Entry to lecture sessions, plus refreshments)	£40 <input type="checkbox"/>	£50 <input type="checkbox"/>	£50 <input type="checkbox"/>	£60 <input type="checkbox"/>	
Friday – All Day (Entry to lecture sessions and workshops, plus lunch and refreshments – see attached list)	£75 <input type="checkbox"/>	£85 <input type="checkbox"/>	£85 <input type="checkbox"/>	£95 <input type="checkbox"/>	
Saturday – Morning (Entry to lecture sessions, plus refreshments)	£40 <input type="checkbox"/>	£50 <input type="checkbox"/>	£50 <input type="checkbox"/>	£60 <input type="checkbox"/>	£

Courses

OPTIONAL EXTRAS ✓ LIMITED AVAILABILITY. Please tick box and include fee with your application		Amount to Pay
Friday Evening – Annual Conference Dinner: <i>Tastes of Wales</i> £35.00 <input type="checkbox"/>		
<i>Vegetarian Option</i> <input type="checkbox"/>		

Please tick to indicate your preferred workshop ✓

Friday Workshops			
2.30-3.30pm		4.00-5.00pm	
PEGS <input type="checkbox"/>		PEGS <input type="checkbox"/>	
Plastering Neurological <input type="checkbox"/>		Plating Talipes <input type="checkbox"/>	
Manual Handling <input type="checkbox"/>		Manual Handling <input type="checkbox"/>	
Rebound <input type="checkbox"/>		Rebound <input type="checkbox"/>	
Sports Disability Development Officer <input type="checkbox"/>		Sports Disability Development Officer <input type="checkbox"/>	
Lycra an option in treatment <input type="checkbox"/>		Lycra an option in treatment <input type="checkbox"/>	
Consent <input type="checkbox"/>		Consent <input type="checkbox"/>	

	Amount to Pay
TOTAL AMOUNT (of all sections)	£

Payment options; please complete one of the following;
EITHER

I enclose a sterling cheque made payable to “University of Wales Swansea”.	
Cheque number	Amount

OR

I wish to pay by credit card. (We cannot process American Express or Diners Club)		
Name of Cardholder		
Amount	Card type (Visa / Mastercard / Switch)	
Card Number	Issue Number	Expiry Date

Please submit your registration form promptly to:

Conference Services (APCP Conference), Fulton House, University of Wales Swansea,
Singleton Park Swansea, SA2 8PP.

Email conferences@swansea.ac.uk (not secure)
Fax 00 44 (0)1792 295675 ☎ 00 44 (0)1792 513126/295665

Please ensure that your chosen method of payment is included with your registration form, as we are unable to process forms without payment.

Registration forms must be received by the final closing date of
11th March 2005

Cancellations will be refunded up until the closing date but subject to a £25 fee.
However, substitute delegates are welcomed at no extra charge.



CSP CONGRESS



Once again APCP will be joining the CSP
for congress in Birmingham

A date for your diary –

Friday 7 October 2005

APCP National AGM

With full lecture programme to be confirmed in the June edition
of this journal

APCP SOUTH WEST REGION

An Introduction to the Halliwick Concept – one day course

Course leader – Colin Stevens, Senior Halliwick Lecturer

17 May 2005

Venue – The Quays Swimming Complex, Southampton

PRACTICAL AND THEORY SESSIONS

Cost £50 members £75 non-members to include lunch and refreshments

Limited to 24 participants – first come first served – payment with application,
no reservation of places

For further information and application form please contact Clare Olsen 01489 784398
and leave a message on the answerphone or e mail colsen@v2lmail.co.uk

Closing date Tuesday 19 April 2005



TRENT REGION A.P.C.P. STUDY DAY

THURSDAY 26TH MAY 2005

10.00am - 4.00pm

Children with life limiting conditions - an holistic approach

To include: Symptom management, grieving, supporting the child
and their family presented by
Ruth Whitlock, a Macmillan nurse,

Discussion and questions,

Short AGM

FREE LUNCH

Physiotherapy management for the child with a terminal illness
Presented by Tracey Hewitt, Physiotherapist with the Diana Service

At St Francis School, Lincoln

Cost: members £20, non-members £25

Closing date: 6th May 2005.

NameAPCP membership number

Address.Tel no:

.....
.....

Please send cheque made payable to APCP for the correct amount to:
Shirley Hardy, Ash Field School, Broad Avenue, Leicester LE5 4PY
Tel 0116 2730485 - map and programme will be sent with receipt

Association of Paediatric Chartered
Physiotherapists (APCP): North West.



Study Days:
Muscle Strengthening in Cerebral Palsy.

Speakers:

Gill Holmes (M.Phil, MCSP) and Ian Roberts (MCSP).

Date:

Tuesday 28th June and Wednesday 29th June 2005.
From 9am until 5pm.

Venue:

Lecture Theatre and Seminar Room,
Institute of Child Health, Alder Hey Hospital, Liverpool, Merseyside, L12 8AP.

Cost:

£120 APCP members and £150 non-members.
Includes lunch and refreshments. Maximum places: 30.

Please send completed form with cheque payable to APCP: North West.

Please enclose a S.A.E. for course programme and receipt.

Course Organiser: Nicola Henderson, Senior I Physiotherapist, Physiotherapy Department,
Alder Hey Hospital, Liverpool, Merseyside, L12 8AP. (Please specify if you require any information
on local accommodation or have any special dietary requirements.) Tel: (0151) 2284811 Bleep 168.

Please Return by Monday 6th June.

Name:

Address:

.....

Post Code:..... Telephone No:

APCP No:..... APCP Region:

I would like a map of the venue.

I have special dietary requirements, please specify

I would like information on local accommodation.

APCP NORTH EAST

POSTURAL MANAGEMENT + AGM



TUTOR	Dr Terry Pountney PhD, MA MCSP Research Physiotherapist, Chailey Heritage
DATE	Wednesday 27th April 2005.
VENUE	Postgraduate Centre, York District Hospital
FEE	£50 members, £75 non members – includes lunch and refreshments
CONTENTS	Neurological and musculoskeletal postural management Changing management of hip dislocation in Cerebral Palsy Assessment, prescription and function using the Chailey Levels of Ability Biomechanical approach to assessment for and prescription of Postural Management Equipment Evidence base for postural management

Send application form (can be downloaded from document section in Paeds Network of ICSP) with cheque made out to 'APCP NE'. Send to Jan Kelly, Course Co-ordinator, The Vicarage, Church Lane, Woolley, WF4 2JU. Tel No 01977 606908 (W).

NB Closing Date: 18th April 2005

OBSTETRICAL BRACHIAL PLEXUS PALSY

a 21st Century Approach

one day conference

Friday May 27th 2005

at Coventry University, Conference Centre, Puma Way, Coventry.

The emphasis of the day will be the Treatment of OBPP.

However, consideration will be given to psychological issues and long term effects on the body.

Speakers will include;

Professor Simon Kay, Plastic and Reconstructive Surgeon, St James's Hospital, Leeds

Sarah Taplin, Assistant Improvement Facilitator, Action on Plastic Surgery Project, Leeds

Di Coggings, MCSP, Head of Childrens Physiotherapy for Tower Hamlets PCT

Dr Karen Dodd, Clinical Psychologist

other speakers to be confirmed.

£40 to include Lunch and Refreshments £25 for students

For further information and a booking form please contact; Ruth Mansell, Erb's Palsy Group

50 Bassetts Way, Farnborough, Kent. BR6 7AF

Tel. 01689 811446 Email; steve.mansell@ntlworld.com

Early Booking Advised

Free parking in designated car parks

ELECTROTHERAPY INTEREST GROUP



APPLICATION FOR STUDY DAY

ELECTROTHERAPY AND PAEDIATRICS

**To be held on Wednesday, 20 April 2005
At Education Centre, Solihull Hospital, Lode Lane, B91 2JL
9.30 for 10.00 start**

(Block capitals please)

(Mr / Mrs / Miss)

SURNAME:

FORENAMES:

ADDRESS:

.....

TELE NUMBER:

I am a member of the Electrotherapy Interest (ACPIE)/Paediatric Interest (APCP) Group and enclose cheque for £30.

I am NOT a member of either Interest Group and enclose a cheque for £45.

Cheques should be made payable to Electrotherapy Interest Group.

Date: _____ Signature: _____

Please return to: Mrs S Finley (Tele 0121-424 5448)
Physiotherapy Department (Fax 0121-424 5447)
Solihull Hospital
Lode Lane
Solihull West Midlands B91 2JL.
(Email: Sue.Finley@heartsol.wmids.nhs.uk)

ELECTROTHERAPY INTEREST GROUP



ELECTROTHERAPY AND PAEDIATRICS

Lecture Theatre, Education Centre, Solihull Hospital

20th April 2005

Programme

09.30 – 10.00	Registration and coffee	
10.00 – 10.15	Welcome and Aims of the Day	Sarah Bazin Chair, Electrotherapy Interest Group
10.15 – 10.45	Developmental Background	Mary Dyson President, Electrotherapy Interest Group Contributor to Grays Anatomy
10.45 – 11.15	Application of Biofeedback in Children	David Maskell Brunel University
11.15 – 11.30	<i>Coffee</i>	
11.30 – 12.00	Paediatric Iontophoresis - An Evidence Based Approach to the Drionic Device	Michelle Wood Great Ormond Street Hospital
12.00 – 12.30	Diagnostic ultrasound – does it work?	TBC
12.30 – 13.30	<i>Lunch and Trade Exhibitors</i>	
13.30 – 14.15	Clinical Application of Gait Analysis	Nicky Thompson Oxford Gait Laboratory
14.15 – 15.00	Dangers and contra-indications – What is the evidence? <i>Session 1</i>	Tim Watson, University of Hertfordshire
15.00 – 15.15	<i>Tea</i>	
15.15 – 16.00	Dangers and contra-indications – What is the evidence? <i>Session 2</i>	Tim Watson, University of Hertfordshire
16.00	<i>Close</i>	

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The Impact of Nocturnal Ventilation in Duchenne Muscular Dystrophy On Survival, Symptoms and Quality of Life
Michelle Eagle, Research Practitioner and Clinical Specialist Paediatric Physiotherapist

Case Study – Dyspraxia
Donna Wilson MCSP

Report on Two International Conferences on Developmental Co-Ordination Disorder
Judith M Peters – Clinical Specialist Paediatric Physiotherapist

Development of Interagency Working Practices To Support Children and Young People with Disabilities and Their Families.
Linda Fisher, Paediatric Physiotherapist

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Conference Presentations

Making the Right Start
Helen Robinson MCSP Senior Paediatric Physiotherapist

Strength Training for Children with Cerebral Palsy
Dr Margaret J Mayston PhD MCSP Lecturer University College London

An Investigation into the Transmission of Gravitational Force During Standing in a Prone Standing Frame
Sue Bush MSc MCSP

Evaluation of Orthosis in the Management of children with Cerebral Palsy Who Walk with Frames
*V Yule PhD C Davey PhD MCS
PC Quinn MCS PP Honeycomb*

Serial Casting
Shelley Cox MCSP Superintendent Physiotherapist

Management of the Long-Term Ventilated Child in the Community
Barbara Noosfeld RGN RSCN PG Dip in HRD
Biomechanics and Prevention of Body Shape Distortion
John Goldsmith and Liz Goldsmith MCSP

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Measurement of Hip Dislocation with Postural Management
*Teresa Poultney MA MCSP Anne Mandy PhD
Elizabeth Green MD FRCPCH BA (Hons) and
Paul Gard PhD*

The Use Of Lycra Socks in Peripheral Sensory Deficit
*Faye Pitt BSc (Hons) MBAP0 and
Sally Braithwaite MCSP*

Case Study - from Introduction to Paediatrics Course
Author unknown

Habitual Toe Walkers - Questionnaire Results
Emma Day MCSP

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Improving Motor Skills & Learning Skills In Dyspraxic Children By Improving Postural Base, Stability and Nisual-Motor Control - A Pilot Study
*Kath Glendenning MCSP Anne Ryan DBO(D)
and Jenny Fonseca MSc BSc CHBiol MIBiol*

Issues Around Sports Participation In Disabled Children and Injury Prevention In The Young Wheelchair Athlete
Leigh Forsyth BSc Hons MCSP SRP

The Use of Ankle Foot Orthosis in the Management of Children with Cerebral Palsy
Robertt Grieg SB Orthotist / Prosthetist

Arthrogryposis - A Case Study
Sam Double MCSP

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MARCH 2004

A Review of the Evidence in Favour of and Against Multilevel Surgery in the Management of Childhood Disability
Pam Evans MCSP

Using Focus Groups to Evaluate Parental Satisfaction of Services for the Pre-school Disabled Child
Dawn Pickering MSc MCSP SRP

Postural Control of Hip and Pelvic Positioning in Seating
Terri Pountney PhD MA MCSP

Early Support Pilot Programme
Linda Fisher MCSP

THE APCP RESEARCH GROUP REGISTER

If you would like to be a member of the APCP research group, please fill in the form below and return it to **Jeanne Hartley, Research Officer, Physiotherapy Department, Great Ormond Street, London, WC1N 3 JH**. This information will be used to inform you of reseach study days and help us to learn more about our members' research interest.

Name

Contact Address

Post Code

Tel. No.

Fax No.

E-Mail:

What are your research interests?

Are you undertaking any type of research project small or large? **YES?NO**

If so please give a brief summary . . .

Would you be happy for other physiotherapists with similar research interests to be put in touch with you? **YES/NO**

Thank you for completing this form.

WYRE FOREST PRIMARY CARE TRUST

Worcestershire Specialist Children's Services
Ash Therapy Centre, Lea Castle Centre, Wolverley, Kidderminster

PAEDIATRIC PHYSIOTHERAPIST - SENIOR I

21 hours per week £23,265 - £27,770 p.a. (pro rata)

We provide a creative Paediatric Physiotherapy service across Worcestershire with bases in Bromsgrove, Worcester City and Kidderminster and within easy reach of Birmingham, Bristol and Oxford. Each geographical team is lead by a Team Leader and includes senior therapists and assistants.

We require a well-motivated and enthusiastic therapist to join the Wyre Forest Team based at Lea Castle Centre with opportunities to work in the community, schools and the child development centre. You will be responsible for the assessment and treatment of children with a wide range of problems and for developing training opportunities for parents, assistants and teachers.

Previous experience in paediatric therapy and treatment modalities is required. You will be expected to work within a friendly cohesive multi-disciplinary team.

For more information or an informal discussion please contact: Juliet Goodban, Superintendent Physiotherapist on (01562) 859020 or Jenni Stephens, Head of Specialist Children's Services on (01905) 681525.

For an information pack and to apply please see www.worcestershirehealth.nhs.uk or telephone (01905) 681633 (24 hour recruitment line) or e-mail jobs@worcs-ssa.nhs.uk quoting reference number 569/4139.

Closing date for applications: 16th March 2005.

"The NHS aims to employ a workforce which reflects the diversity of the local community" Job share applicants will be considered. We are a no smoking organisation.

REGIONAL & SUB-GROUP REPRESENTATIVES

EAST ANGLIA

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**Lycra Clinic – Continuing Development
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School Physio Day

