



**Continuing
Professional
Development**
for Osteopaths

**OBJECTIVE
ACTIVITY**

Case study: Case-based discussion

Carlisle Osteopathic Group

Case study – Case-based discussion through role play – Carlisle osteopaths

Summary

The group used role play to explore scenarios that members had encountered in practice.

This created a learning experience for all those present. Patient confidentiality was maintained throughout.

Planning

The session worked best by setting aside about two-and-a-half hours for a group CPD session, inviting up to 10 osteopaths to attend a clinic to observe and discuss the role play. It helped for osteopaths to bring their own case history sheets.

What did the participants do?

- Osteopath A chose an interesting case they had experienced (ensuring that identifying details remained anonymous). Other participants were not aware of the details of the case beforehand.
- Osteopath A played the part of the patient during the case history taking, while the group watched. It was helpful to give a brief physical description of the 'patient', including any obvious visual clues such as mobility, whether they looked well or not, any evident disability etc.
- The case history was taken by Osteopath B, who had no prior knowledge of the case. The role players (Osteopaths A and B) tried to replicate a typical clinical encounter.
- Following the case history, other participants in the group were asked if there were any additional questions they would like to ask.
- At this point, participants were invited to suggest possible differential diagnoses. There could be discussion as to how these were arrived at. Such discussion and related learning points should be recorded by all.
- Osteopath B, who took the case history in the role play, then switched roles to play the part of the 'patient'. Osteopath A – who saw the original patient – performed the physical examination as originally carried out.
- Observer participants were asked if they would perform any other tests and if they had revised their differential diagnoses. Discussion took place regarding the next course of action. Again, the discussion and related learning points should be recorded by all.
- Osteopath A explained the original course of action and the eventual patient outcome.
- General discussion covered the case. Again, all participants recorded their own observations on the case, feedback and learning points.
- At the end of the session, participants took a few moments to reflect on what they had learned and whether there was any additional CPD that they might benefit from. It was also helpful for all participating osteopaths to consider which themes of the *Osteopathic Practice Standards* had been covered during the discussion. It was common for all the themes – of communication and patient partnership, knowledge, skills and performance, safety and quality in practice and professionalism – to be covered in the case-based discussion.

How long did it take?

The session took about two-and-a-half hours in total.

Would you do it again?

Yes. The group's experience is that generally everyone learns something about their own practice as a result of the role play. Identifying just one learning point and the relevant CPD to address that point can be sufficient to meet the requirement for objective feedback and can contribute to discussion as part of an osteopath's Peer Discussion Review. More importantly, this can contribute to enhanced quality of care.

Role playing case histories as a group learning experience

Example template to support the session

Case history

Gender / Age / Height / Weight:

Presenting complaint:

Recent history:

Past history:

Aggravating factors:

Relieving factors:

Medical history / General health:

Family history:

Medication:

Systemic (CVS / RES P / GI / GU / NEURO):

Any additional case history questions:

Differential diagnoses at this point:

Physical Examination

Which tests were originally performed? (demonstrate):

Any additional examination / testing suggested?

Any change in differential diagnoses?

Next course of action?

Practitioner's original diagnosis and/or course of action?

Eventual outcome?

Discussion

Learning points

Which themes of the *Osteopathic Practice Standards* were covered?

Communication and patient partnership

Knowledge, skills and performance

Safety and quality in practice

Professionalism