



**Continuing  
Professional  
Development**  
for Osteopaths

**COMMUNICATION  
AND CONSENT**

# Case study: Communicating risk

Northern Ireland osteopaths

## **Case study – Communication and consent (communicating risk) – Northern Ireland osteopaths**

### *Summary*

The Northern Ireland osteopaths CPD Group ran a CPD session where the group viewed videos about communication and consent, followed by a discussion. One video was of an osteopath, Steve Vogel (<https://www.youtube.com/watch?v=tiDxxonwl1U&t=25s>), and the other of a clinical psychologist, Pippa Bark (<https://www.youtube.com/watch?v=I3-Y4wd1y2Q>).

### *Planning*

The organisers planned the session to test whether viewing a video of an osteopath presenting the findings of a research project on managing clinical risk in osteopathy, and a video of a non-osteopath presenting the patient's perspective on clinical risk, provided a useful way to undertake CPD in relation to communication and consent.

### *What did they do?*

The videos were each about 45 minutes long. The organisers set up a laptop in a room with a projector and streamed the videos from the internet. The internet connection was not always good. Discussion took place while the videos played.

### *What did participants learn?*

The first video, of Steve Vogel, was about his research project on Clinical Risk in Osteopathy Management undertaken in 2011 and 2012. The research gathered data from osteopaths and patients, including information about the patients' reported pain levels before treatment, 48 hours after treatment, and 6 weeks after treatment.

Members of the Belfast Pathfinder Group were able to discuss the likelihood of patients responding favourably to treatment and/or having side-effects after treatment, which was helpful to set the context for discussion about communication and consent. One of the main messages from the research was that adverse events, although rare, do happen. However, the group noted that the risk of adverse events was more strongly associated with the characteristics of the individual patient and their history, than to the particular osteopathic treatment provided. For example, patients at risk of adverse effects were likely to report certain symptoms. Members of the group noted that osteopaths, therefore, needed to be particularly careful to ask the right questions of patients to ensure that they were given the right information to support the discussion about communication and consent.

Participants found the video of Pippa Bark extremely helpful as it allowed them to put themselves in the shoes of a patient and explore alternative perspectives. The group particularly liked Ms Bark's analogy of a dentist providing information about the risks involved in removing a wisdom tooth and her reminder about how little we would be listening to our accountant if we were sat in our underwear!

At the end of the session, the group was able to reflect on what had been learned about communication and consent in relation to members' own cases.

*What were the concerns/barriers and how were these overcome?*

Some participants felt a bit nervous about sharing anonymised cases but they gained confidence to do so through the support of colleagues. Hearing different opinions about how a situation might be handled gave everyone greater confidence in dealing with these issues in future. It was more interesting than expected.

The internet connection was a bit unreliable which was annoying and disrupted the flow slightly. Next time, the group would download the whole video before watching it, thereby avoiding the need for a good internet connection.

*How long did it take?*

About 3 hours in total.

*Would you do it again?*

Yes. We recommend that this is an activity to do with a small group of people who are comfortable discussing cases with each other. The key is for everyone to share difficult cases as this helps to build trust and shows participants that everyone can learn new things, no matter how long they have been in practice.