



The International Association for Physical Therapists working with Older People

Newsletter 16

Website www.iptop.wcpt.org

March 2010

This newsletter is to update everyone on the association. It is sent direct to special interest groups as they become known. The idea for an association began in 1993 at an international course in Malta; was discussed at WCPT Washington in 1995 and at WCPT Yokohama in 1999 where a shadow committee and steering group were formed. The Foundation Meeting was held in Birmingham, UK, 2002. At WCPT Barcelona 2003, IPTOP was accepted as a WCPT subgroup. General meetings have been held in Barcelona 2003; Dublin 2004, Melbourne 2005, Istanbul 2006, WCPT Vancouver 2007 and Ankara 2009. Membership currently stands at 17 countries representing around 8,000 physical therapists in elderly care. The efforts of the association are directed towards member associations and their individual members working with older people through excellence, research, practice and clinical specialisation. Officers travelling to international conferences are self funded. This newsletter is published on our website six months after distribution to members. A summary is published in WCPT news.

Message from the chairperson.

Dear Colleagues,

I participated in a symposium in June entitled “New Professionalism and Health Education” at the School of Health in Enschede, Netherland. This was a multidisciplinary program for health professionals. There were informative lectures and interesting workshops for physiotherapists. The scientific program was designed to give a very good model of seamless a service in international health care.

The Turkish Geriatric Physiotherapy Association, hosted the 2nd National Geriatric Physiotherapy Congress with International Participants” held in Ankara in November (see p2) where IPTOP also held its executive and general meetings (see p14). We confirmed that IPTOP will participate to the scientific program of 2011 WCPT Congress in Netherlands, organise a general meeting and social events. I participated in the WCPT teleconferences regarding these issues.

The IPTOP Committee is starting to think about a 2 day educational event or study day preceding the Congress that might suit attendees (see p 8). If you have any thoughts about what would be of use to you, please let us know.

We continue to be open to all kinds of recommendations and new ideas for the activities of IPTOP.

Yours sincerely

Filiz Can, PT, PhD, Prof.
Chair of IPTOP chair@iptop.wcpt.org

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Back row Jan, Nuray, Bhanu, Van, Ulaş
Front row Olwen, Amanda, Feliz, Jill,

Main Feature

Ankara conference---11-13 November 2009

Amanda Squires and Bhanu Ramaswamy



This conference was the 2nd hosted by the Turkish Association incorporating IPTOP. The very full programme of lectures, discussions and workshops over 3 days in 2 halls with additional poster displays and exhibition was developed by the organising committee led by Prof Dr Nuray Kirdi.

The Congress commenced with an inaugural ceremony and was formally opened by Suleyman Demirel, 9th President of the Turkish Republic. He described ageing as part of the adventure of life. He emphasised that much of the world remained poor and hungry and this threatened world peace. He documented the UN Millennium Declaration which focussed on the eradication of extreme poverty through education, training and investment.

This presentation, in front of a very illustrious audience including government officials and health ministers, was followed by a presentation by our own Nuray Kirdi who outlined the historical development of departments of elderly care and emphasised the need for interagency communication.

Presentations during the conference included various aspects of ageing; various consequence of ageing; and various pharmacological, surgical and physical treatments for ageing.

The presentations were by various international members of the interdisciplinary team including Yelverton Tegner, Michael Callaghan and David Beard as well as politicians and academics and discussions were in depth and challenging. Simultaneous auditory translation was invaluable!

The ongoing theme from the conference was the need for interagency communication and collaboration to maximise the efforts that all disciplines are making in research and practice.

As always, our hosts were attentive and there was nothing too much to ask of them as an 'international guest'. In addition to the actual Congress, we had an opportunity to visit the Physiotherapy Department at the university, a number of museums and on our penultimate day were taken on a trip to a nearby village to sample Turkish life. To top it all, we were in Ankara on the week of the anniversary of the death of Atta Turk (the father of Turkey), and bore witness to the mourning and celebrations enacted revering his life and death.

Clinical feature

Footwear Assessment

Olwen Finlay

The importance of assessing foot health and footwear needs in older people has been well documented as inappropriate footwear can have an indirect but substantial effect on health (Finlay et al, 2000). An unsuitable product can increase the risk of an accident (Finlay 1996) with possible increased cost for health care.

Correct fitting comfortable and safe shoes are essential for mobility and the well being of the older person. It has been found that people are often unwilling to walk if their feet hurt (Finlay 1995), Research has also shown there is a complex interaction between walking, footwear and balance (Nuffield Institute for Health, 1996) and for this reason footwear is often cited as a contributory factor for instability and falls in older people (Gabel et al 1985, Finlay 1986, Edelstein 1987, Dunne et al 1993, Chartered Society of Physiotherapy 1998 and Lord et al 1999). Inappropriate footwear can affect a persons' walking speed, often affecting their confidence and possibly their safety (Finlay et al 2000, Hoxie & Rubenstein 1994, & Robbins et al 1992, 1995).

Before making any recommendation it is essential that the physiotherapists should check the patient's footwear, evaluating the fit, the safety of the product and at the same time assessing the effect a recommended product would have on the gait pattern and the lifestyle of the individual. It is therefore essential to have an efficient method of responding (Finlay & Fullerton 2002). Guidance can be found on which measurements of the foot should be recorded (Finlay & Fullerton 1996) however little information was available as how to access or audit the actual problems in the footwear. It therefore appeared that an effective screening tool could be of value.

The purpose of a check list is to draw together qualitative risk factors collated in a meaningful manner allowing recommendations to be made on the evidence helping to ensure the user is aware of current problems in their footwear.

Olwen Finlay MBE, Co-founder and past chair of IPTOP olwen.finlay@btinternet.com

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Name or Identification Number.....

New referral History of falls Risk of falling (Tick as appropriate)



Circle as appropriate

Factors	Not Acceptable	Acceptable
Type of Shoe	High Heels Slip-on (No fastenings) Sling back styles	Walking shoe Flat shoe with fastening Surgical Footwear
Shoe Fitment	Ill fitting Too long, too short or Too narrow.	Footwear that permits normal foot function and free movement of the forefoot. Sufficient width to facilitate widening of the foot during full weight bearing (Uccioli & Giacomozzi 2009)
Fixation or Fastening	None	Fastenings should hold the foot well back into the shoe. (Finlay 1986) Laces provide maximum accommodation((Equipment for the Disabled. 1981)
Heel Height	High > 3.6cms - (Gould 1982) No heel -Finlay (1997)	< 3.6 cms (Gould 1982) < 2.5 for rheumatoids (Broadley 1974)
Heel Width	< 5.5cms - (Finlay 1986)	> 5.5 cms - (Finlay 1986)
Heel Shape	Tapered - (Finlay 1986)	Straight Wedge
Toe Box Depth	Insufficient room and depth for toes. Pressure marks, Corns or callosities present.	Room for free movement of toes. No pressure on toes
Shape of Toe Box	Triangular (Coughlin 1998)	A box that accommodates the forefront of the foot.
Shoe Interior	Any roughness Stitching	Smooth like a velvet glove (Carotenuto & Bullock 1982)
Heel Counter Stiffness	> 45% Soft None	Firm < 45%
Sole Rigidity	< 45% Soft	> 45%
Sole Composition	Plastic,	Composition Leather may be advantageous to the early parkinsonism patient
Sole Pattern	Smooth Worn – Neale Deeply cleated Uneven wear	Slightly ridged
Sole Composition	Soft Rigid Thick	Firm
Sole Flexion	<45%	> 45%
Wear, Tear or damage	Any decomposition of the compounds	Good compounds
Weight	Light weight	



Recommendations

Advice Sheets supplied. (Please specify if any).
Advice accepted / Advice rejected (Circle as appropriate)

Signature

Compiled by Olwen Finlay MBE, FCSP, DMS, HT

World Roundup

Switzerland Catherine De Capitani (Switzerland@iptop.wcpt.org)

For the last two years our special interest group has been working on the description of physiotherapy in geriatrics. Physiotherapists representing the German and French region of Switzerland were actively involved. The specialists - practitioners as well as researchers - aimed at attaining a consensus describing the key features of the geriatric physiotherapist.

A short pamphlet introducing the full version "Berufsprofil Physiotherapie in der Geriatrie" was hot off the press for the bi-annual congress of the Swiss Society of Gerontology in Fribourg, Switzerland, October 2009. The document describes those aspects of physiotherapy which are specific for the treatment of older persons. The topics range from interdisciplinary teamwork, geriatric assessment and ethics to evidence based physiotherapy in geriatrics.

The aim was to create a paper which would be of use on several different levels. For the practicing physiotherapist, it describes the wide range and importance of our specialised field of work. For those developing continuing education courses, it figures as a guide for topics in ageing pertaining to physiotherapy. Additionally, we hope it will help strengthen the position of the geriatric physiotherapist within the profession and within interdisciplinary teams. With this groundwork paper as a first step, we look forward to future projects incorporating its contents.

The full version can be downloaded from our website: www.physiotherapie-geriatrie.ch. For the time being it is only available in German. A French version is being planned.

The FPG continuing education program for 2010 includes one day courses dealing with the topics "basal stimulation", transferring theory into practice when working with the elderly, "physiotherapy for incontinence in older persons" and "falls training for geriatric patients" The three day course "The challenge of age - physiotherapy from the gerontological point of view" will be offered again this year. The courses are held in German. More information about the program can be found on our website www.physio-geriatrie.ch or directly: <http://www.sgg-ssg.ch/cms/pages/de/fachgruppen/fpg--physiotherapie/fortbildung.php>

UK: Ms Bhanu Ramaswamy and Mandy Tyler (Unitedkingdom@iptop.wcpt.org)

In the last IPTOP Newsletter (No 15), we provided information regarding several ongoing meetings across the UK and Europe as well as many resources for the readers to tap into. For this Newsletter, we have chosen to feedback on two amazing Conferences attended (the National AGILE Conference and the International Geriatric Physiotherapy Congress). I will also mention where we are with regards to collecting information on Clinical Standards for physiotherapists working with older people, and finally some thoughts in preparation for the upcoming World Confederation of Physical Therapists Congress in 2011.

Firstly, the **AGILE Conference in Glasgow** on 3rd and 4th October 2009 on the subject of Parkinson's disease. As with all of the AGILE National Conferences, we enjoyed the mixture of education, networking and meeting up with friends and colleagues. A full report has been provided for the AGILE members' journal with key take home messages, but below are some of the highlights. If anyone would like to see the full report, please email your request.

Dr. Donald Grosset, a Consultant Neurologist started the weekend with a lecture on '**Current trends and future developments**'. He provided an overview of the neuro-anatomy and mode of action of dopamine. His presentation explored the aspect of medication compliance noting from one research trial that only 80% of people on medication reported satisfactory adherence. This obviously has an impact on physiotherapy carry over and outcome making it more difficult to achieve a desired therapeutic effect. Dr Grosset reviewed non-motor features of PD including cognitive impairment and sleep, exploring what is now becoming increasingly accepted as a continuum between cognitive elements and motor aspects of PD.

This presentation was followed by three sessions that provided a theoretical prime for a set of practical workshops to follow each presenter. The first was by Melanie Brown who spoke on **Conductive Education (CE) in Parkinson's disease**. She made plain the distinction of training, which, unlike most of our physiotherapy interventions does not view a motor disorder as a deficit model, but merges the health model with an educational model. Then came Fiona

Lindop who presented a session on **Outcome Measures in Parkinson's disease** reminding the audience of the different measures for aspects of motor function that we normally tend to measure e.g. gait parameters, balance, transfers and posture, compared to non-motor symptom measures. And finally, Lynn Rochester on **Cueing to improve gait and mobility in PD: evidence and implementation**. The session highlighted the complexity between both the motor and cognitive aspects of PD with a review of the role of the Basal Ganglia. Lynn presented in depth the current evidence base in physiotherapy and cueing, giving examples of visual (spatial) cues such as step size, and auditory (rhythmical) cues such as timing / cadence, placing them in context of the International Classification on Function. Using this model, a physiotherapist can more appropriately choose what cue they might use for a particular feature of the disease

Dr. Graeme McPhee started the afternoon sessions with a lecture on **Compulsive behaviours**. His presentation made clear the distinction and overlap between both impulsive control disorders (mainly due to dopamine agonist overmedication) as opposed to compulsive behaviour (from the dopamine replacement drugs). I had not hitherto considered them as different conditions or that they originated as a consequence of different medications.

The next day started with Victoria Goodwin's presentation on **Falls and Parkinson's disease**, reviewing risk factors and the main psychological consequences – mainly from fear of falling. Her session was followed by Daiga Heisters, from the **UK Parkinson's Disease Society** who spoke about the current work and developments from the Society. By reviewing the aims of the Society, she was able to focus on areas they were facilitating the work of the health professionals. This includes their input in enabling production of the Quick Reference Cards (UK) – the UK version of the evidence-based cards produced for physiotherapy clinicians working with PD.

The next presentation was on **Nonmedical prescribing and Parkinson's disease** and it was good to have this session follow that of Donald Grosset and Graham McPhee, as the aspects of medication they had discussed during their sessions made it was easier to focus in on issues a physiotherapist might be alert to, whether then to bring up with another specialist, or to correct as a prescriber.

The two day conference ended with a presentation by Julie Bilclough, a clinical specialist who spoke about **Service Developments** pulling information from each of the previous sessions to demonstrate areas where services might be expanded. She described the process a county in the north east of England underwent in merging and expanding its remit for PD services and the use of patient experience feedback to improve service quality.

Secondly was the **International Geriatric Physiotherapy Congress** Bhanu attended in Ankara in November 2009 – supported by IPTOP and hosted by the Turkish Association of Physiotherapists who work with older people. This is reported elsewhere in this newsletter (see p 2), but my personal reflection was that it provided me with a remarkable and thoroughly enjoyable opportunity with three purposes to my being at the Conference:

1. To attend the Association of International Physical Therapists for Older People Committee Meeting (as IPTOP's UK representative) and update the committee as to my particular project for the group
2. To attend and learn from the presentations at the Conference and
3. To present at the Congress, firstly as part of an International Panel, then to give a presentation about Non-medical Prescribing experience 3 years after qualifying as such.

With regards the collecting of information on **Clinical Standards for physiotherapists working with older people**, I have been in contact with the majority of IPTOP representative countries and begun the process of establishing which ones have actual clinical standards for geriatric clinical provision. I hope to have the work completed by the end of the coming summer with a report for the IPTOP Committee to review similarities and differences between existing standards.

AGILE is now busy planning the 2010 conference to be held in Cardiff on "**Gait- putting our best foot forward**" to be held on 25/26th Sep (Sat / Sun) at the Copthorne Hotel, Cardiff, Wales We are continuing to produce detailed information on an outcome measure each year. The last one we produced was for OA knee and the next one is the 4 square step test for dynamic balance. We are putting all our exercise information and outcome measures on a CD and they will be for sale. The AGILE web site has been updated so information can be found more easily. This year we have organised regional training for our members on Cognitive behaviour therapy for fallers. This was very successful and we had positive feedback. We are now organising 2010 regional training on soft tissue massage for the elderly. We are hoping that the regional training offers quality training to all our members and non members where there are spaces.

Stop press

I have been approached by the founder of 'Physiopedia' and 'Physiospot', Rachael Lowe, to help structure a section on older people that will be of relevance to physiotherapists.

Physiopedia is 'an ambitious project which aims to eventually offer an evidence-based knowledge resource for rehabilitation professionals throughout the world. Through utilising collaborative wiki technology Physiopedia is a place where all physiotherapists can participate by contributing, sharing and building knowledge to develop a global understanding. For educators Physiopedia offers an opportunity to involve their students in this knowledge creation process as part of an educational program.'

You can access the home page via <http://www.physio-pedia.com/index.php5?title=Physiopedia:About> where you will find a range of tabs such as well as topics on 'World focus', 'student projects', 'CPD programmes', 'featured articles' and a 'featured contributor' section too.

Rachel has also founded a sister site, Physiospot ("Physiotherapy in the Spotlight"), for therapists to keep up to date with current affairs related to the health care, physiotherapy and physical therapy professions. This site contains articles, new research, current news, recent publications, courses and jobs, again in the hope that people might learn and develop.

You can access the home page via http://www.physiospot.com/?page_id=2

In considering IPTOP's aims and vision against that of Physiopedia, our members could benefit from this opportunity to collaborate around the world and provide learning prospects for continuing education and professional development. In time, we could lead the discussions in the hope of promoting good evidence based patient care as well as the profession.

Watch this space

Norway Tien Huy Dang (Norway@iptop.wcpt.org)

For physical therapist working with elderly in Norway 2009 has been an eventful year. We held the annual meeting in March where a new leader and two new board members were elected. The board has decided to pursue and work further with several topics, among others collaborative reform which is proposed by the Norwegian government. For the time being this process is in the making and we know little about what this will entail for us, but want to participate for better to shape our services in the future.

Focus has also been on adding a new course to our course list for physical therapists who wish to specialize in geriatrics. Our goal is to give physiotherapists who work with the elderly more opportunities to specialize in this subject so that they are better equipped to meet the various challenges they meet in everyday life in the capacity of physiotherapist. As a professional group we want to focus on documentation of the effect of various measures initiated in the elderly.

The Physiotherapy Association in Norway is also working so that specialists in geriatrics are officially recognized, which is sadly not the case today.

The next annual meeting in our association is in March this year in Tromsø. Topics for the meeting will be stroke and dizziness in the elderly. We feel the program for the meeting is highly relevant and hope that as many as possible will participate.

General Information

IPTOP web page

We now have our own web page within the WCPT website. It can be accessed direct through www.iptop.wcpt.org or via the WCPT website www.wcpt.org. Each officer (eg chair@iptop.wcpt.org) and each member organisation representative (e.g. germany@iptop.wcpt.org) has an IPTOP address with mail automatically redirected to personal e-mails. These are all listed on the front page of the site. Our web page has 5 sections: contact details; about IPTOP (our leaflet); Newsletters---current and past; Meeting notes; and Conferences. Please encourage members to visit the IPTOP and WCPT websites.

Officers and member organisation representatives are advised to install a Spam Catcher to block unwanted use of our IPTOP e-mail addresses.

IPTOP resources (please send your comments on this item to Leah Weinberg (Canada@iptop.wcpt.org))

Please use the following link to get to the Understanding Pain and Dementia site.
<http://www.painanddementia.ualberta.ca>

IPTOP research (please send your comments on this item to Jennifer Bottomley (vicechair@iptop.wcpt.org))

Linking Research and the Promotion of Active Aging

Jennifer M. Bottomley, PT, MS, PhD

Conference in Amsterdam to bring attention to increasing physical activity among our aging population

The World Health Organization has adopted the term active aging as a vital health objective. To identify how research can be utilized to support active aging, and to improve population health characteristics for older adults, IPTOP is exploring the possibility of hosting a conference entitled “**Promoting Active Aging: Connecting Researchers and Communities**” prior to WCPT Congress, Amsterdam in June 2012

The current 2010 Olympic Games provides an opportunity to encourage active lifestyles for everyone, including older adults. The overall objective for physiotherapist is to provide a forum for researchers, community members, and other stakeholders interested in the role of physical activity levels among older adults. We want to develop research and evaluation programs to measure the degree to which activity levels are affected at the individual and population level by the various programmatic efforts being developed in many locales around the world, and as part of the IPTOP initiatives to provide the latest in resources for our members.

The Amsterdam conference hopes to feature prominent speakers who will provide examples of direct experience, suggestions and best practices in promoting active aging. We would like to explore how governments are collaborating with multiple partners to create age-friendly communities around the world and address how programs and activities linked to the international groups can learn from other initiatives aimed at increasing active aging.

Through this conference, IPTOP is looking for participants and presenters willing to share their vision and strategies to promote physical activity and sport participation by playing key roles in four areas.

- Provide an opportunity for participants to learn about what work is being done at the research and policy level to promote active aging through research.
- Participants will have the chance to discuss, develop, plan, implement, and evaluate the opportunities provided by other therapists’ programming to improve the level of physical activity of older adults in their respective areas.
- Focus on tangible and successful research and evaluation projects and provide us with important information about the level of physical activity among the world’s aging population and
- Determine how to promote and support ‘active aging’ in our communities in the future.

The following are great Websites for resources on active aging:

SMART Database is a partnership between the Care for Elders Advisory Committee (UBC Department of Medicine, Division of Geriatrics) and the BC Network for Aging Research (BCNAR). It is a secure provincial database of older British Columbians (60+) interested in advising, participating and/or mentoring research and education on aging and age-related issues. The database serves researchers, trainees and older British Columbians interested in aging research and the research process. The website is: <http://www.bcnar.ca/resource/database/smart>

International Council on Aging Databases. The International Council on *Active* Aging (ICAA) was created to change the way we age by uniting professionals in the retirement, assisted living, fitness, rehabilitation and wellness fields to dispel society's myths about aging. ICAA connects an interdisciplinary community of like-minded professionals who share the goals of changing society's perceptions of aging and improving the quality of life for aging older adults within the seven dimensions of wellness (emotional, vocational, physical, spiritual, intellectual, social, environmental). The council supports these professionals with education, information, resources and tools so they can achieve optimal success. In addition to databases from research on aging throughout the world, internships and research funding opportunities are available and opportunities are frequently updated. The website is: <http://www.icaa.cc>

National Blueprint is a US initiative to increase physical activity among older adults aged 50 and older. The National Blueprint: Increasing Physical Activity Among Adults Age 50 and Older is a collaborative project composed of members from the following US organizations (click on the link to connect with each organization and explore their resources):

[AARP](#)

[American College of Sports Medicine](#)

[American Geriatrics Society](#)

[Centers for Disease Control and Prevention](#)

[The National Council on the Aging](#)

[The National Institute on Aging](#)

[The Robert Wood Johnson Foundation](#)

The national blueprint description is a wonderful model for other countries wishing to establish programs and policy initiatives to promote active aging: <http://www.agingblueprint.org>

CARDI – Center for Aging Research and Development in Ireland. CARDI was established to support the role that research on active aging plays in preparation for the demographic shift and increasingly aged world population. This website manages a database of researchers and research centers, their interests and present projects, and links to hundreds of publications and funding opportunities. The website is: <http://www.cardi.ie/>

AAMEE – Research Network. Active Ageing of Migrant Elders across Europe (AAMEE) is an international research network that underlines the need for academic research and the (scientifically supervised) exchange of good practice concerning the active ageing of migrant elders across Europe. You'll find focused areas on their website that provide databases in the following areas:

- Political and social participation of migrant elders and recommended exchanges and research of good practice.
- Quality housing concepts for migrant elders and the high importance of an international database of statistics, research and good practice.
- A look at the diverse migrant elders' community – and the need for comprehensive analysis of ongoing migration trends in a reshaped Europe, the need for indepth research into specific areas of migration policies (health, humanitarian, orientation, role of diaspora) and the specific phenomenon of retirement with its own challenges and opportunities in this population.
- Culturally sensitive health care and research concerning ethnic elders differences between countries. It highlights networks and projects concerning migrant elders provides avenues for sharing strategies and programs.

The website is: <http://www.active-aging-of-migrant-elders.eu>

Conferences (contributions to editor@iptop.wcpt.org)

IP TOP Conferences linked to Member Organisation Conferences (offers please to Filiz Can (chair@iptop.wcpt.org). To date we have had excellent joint conferences with Irish, Australian and Turkish member associations) (see below “IPTOP conferences – links to Member Organisation Conferences”)

2011 WCPT Amsterdam (June 20-23) <http://www.wcpt.org/congress/>

The symposia and satellite sessions are being finalised from submissions.

The call for abstracts is now open for:

- platform presentations
- poster presentations
- poster discussion sessions

For further details and to download a full copy of the call for abstracts and submission guidelines go to www.wcpt.org/congress/abstracts. The closing date for abstract submissions is 15 September 2010.

The IPTOP Committee is starting to think about a 2 day educational event or Study Day preceding the Congress that might suit attendees. If you have any thoughts about what would be of use to you and suggested speakers, please let Jennifer know. vicechair@iptop.wcpt.org

Registration for WCPT 2011 Amsterdam commences in June 2010, after which you can access accommodation, the most economical and convenient being taken up very quickly---so advice is to register early.

IPTOP conferences – linked to Member Organisation Conferences

IPTOP as an International organisation of Physical Therapists working with Older People encourages collaboration between its member organisations. Member organisations come from each of the World Confederation of Physical Therapists Regions and represent member organisations at differing stages of development when working with older people. The constitution requires a four yearly meeting to be held in conjunction with the WCPT congress.

To facilitate business progress and ensure members organisations in all regions have an opportunity to cost effectively participate in the organisation, IPTOP seeks invitations from member organisations willing to collaborate with IPTOP to include a meeting within their programme so members can attend a local annual conference and an IPTOP meeting.

The Purpose of this briefing: To provide guidance to member Organisations interested in adding an international dimension to their congress by holding it in collaboration with IPTOP.

Collaboration means: Some IPTOP involvement in the programme planning; Time for an IPTOP delegate meeting; IPTOP assistance in promotion.

Organisation: The organisation, funding and profit from the national conference remain that of the organising country. However, IPTOP may be able to provide help with organisation and will negotiate in advance a pro rata share of any profit.

Benefits to Host Organisation; increased participation---international delegates attend on same basis and for the same fee as national delegates; international profile; possibility of increased national profile; opportunity for local members to expand international contacts. Members of the host country get a unique opportunity to hear international speakers / papers

Benefits to IPTOP: Expand awareness of, and increase participation in, IPTOP; facilitates progress of business; helps to build the financial resources of IPTOP; IPTOP members may be international experts. National members also have the unique opportunity to meet and share professional knowledge both formally and informally with international colleagues.

Financial issues: negotiate a pro rata organisation fee to IPTOP e.g. % of the delegate fee (or perhaps the international delegate fee); seek sources of funding to assist delegates from organisations that would not otherwise be represented. Any financial help that the national organisers can obtain to enable IPTOP members from organisations, which normally could not afford to sponsor a delegate within its region to attend the conference, would be much appreciated, and equitable allocation would be managed by IPTOP.

Contact Filiz Can (chair@iptop.wcpt.org) for more information.

International continuing professional development for physical therapists working with older people.

Collaboration between WCPT and the United Nations Institute on Ageing has resulted in a two week residential course curriculum with the following aims, objectives and themes:

Aims: 1. To improve the healthcare of older persons by developing relevant PT attitudes, knowledge and skills
2. To develop PT skills to influence policy both locally and nationally

Objectives 1. To increase awareness of and sensitivity to the process of ageing and its implications
2. To adopt realistic and professional attitudes
3. To highlight the need for
a. a comprehensive approach to the care of older persons
b. a multidisciplinary approach
c. community oriented health services
4. To promote the value of physical therapy services for older persons.

Themes: Demography and epidemiology
Ageing---biological, psychological, social,
Health services, health promotion, illness prevention, community and government support
Physiotherapy specific including legal and ethical issues
Leadership, communication, negotiation, education and training skills.

The course is presented as formal lectures and facilitated learning followed by small group work. It is not a clinical practice course. Participants are encouraged to share their own areas of expertise formally and informally. Each course ends with each participant presenting their action plan for a work based project which is followed up by the tutors. Two courses have been held (1993 for physiotherapists, 1997 for physiotherapists and occupational therapists) both hosted by Malta. All students found it beneficial, especially to be with colleagues from the same specialty for an extended period. Students stated "*it was enriching, inspiring and confidence building*".

Further courses for can be arranged by IPTOP. Requesting countries should consider the following:

1. The programme is delivered in the country/region requesting it.
2. Allow 2 years set up time from IPTOP agreement to proceed. Consider pre/post WCPT/IPTOP conference.
3. Presentations will be by an international core tutor group with local academic and physiotherapy specialist tutors
4. Educational credits may be pursued locally by the requesting country/region
5. A local "clerk to the course" is required to liaise with the IPTOP course organiser
6. Advertising is the responsibility of the requesting country
7. Consider joining with another relevant profession (eg OT) to increase numbers, expertise and impact
8. The language is English in which participants must be fluent in both understanding and speaking (a comprehensive interpretation service to be included in costs might be considered)
9. A steering group (IPTOP course leader, course clerk and representative of joining profession if relevant) agree a course plan with dates, tasks and responsibilities; adapt the course length to meet local needs *although the full course is internationally recommended*; revise the curriculum; select tutors; manage the course.
10. A telephone conference call with core tutors and steering group will be needed at the early planning stage
11. Steering group will meet with core tutors preferably AT the facility 3 months prior to the event to finalise programme and participants.
12. The minimum 20/maximum 30 participants are chosen on level of experience, international (work/leisure) experience, active participation, ability to cascade knowledge, ability to influence policy makers and/or teach other physical therapists, and geographical coverage.
13. The programme should include professional and cultural visits and opening/closing by a "high level" figure
14. Accommodation should have individual study bedrooms, restaurant, main conference room with full a/v facilities and 6 break out rooms (number dependent on course size), photocopy facilities, recreation facilities.
15. All costs (e.g. bullets) are born by the requesting country. Costs to participants should cover their accommodation and all meals plus apportioned full conference overheads (i.e. administration, tutor travel/accommodation/meals etc).
16. Grants and bursaries may be sought by the requesting country/region from e.g. professional bodies, government departments, and charities.
17. The requesting country may wish to consider a feedback presentation at next WCPT/IPTOP conference.

Further information from IPTOP editor, Amanda Squires, editor@iptop.wcpt.org

Summary of IPTOP objectives as at November 2009

Priority	Objective	Lead	Detail	Timescale
1	WCPT Link	Filiz	To continue links with WCPT	Ongoing
2	Sponsorship	Jennifer	List potential sponsors. Act as liaison for these bodies regarding advertising	September 07
3	Website	New IPTOP officer to be appointed	To keep all IPTOP information up to date on the website	ASAP
4	New member Organisations	Filiz	To encourage representation from all the WCPT regions. To encourage the setting up of new member countries.	Ongoing
5	Promotion of IPTOP and the services it provides	Filiz	Upwards to WCPT, outward to member bodies and new members to promote the Newsletter & CPD opportunities	Ongoing
6	Other International disciplines	Jennie & Leah	To establish liaison with similar international bodies in nursing, OT and medicine	Ongoing
7	EBP/Specialisation	Bhanu	To collate examples of Standards of Practice in member countries for PT with Older people	Ongoing
8	Carers & Elders	Filiz	Establish contact with International organisations representing Elders and Carers. UN has Standards so ensure IPTOP principles conform	Ongoing
9	Annual Reports	Filiz & Jill	Timely production of the IPTOP annual report	Ongoing
10	WCPT Amsterdam 2011	Filiz	Planning all aspects of this conference	ongoing
11	Subgroup reconfirmation every four years	Filiz & Jill	Send to Brenda Myers	Before WCPT 2011

The full version together with timescales and quarterly progress is available from secretary@iptop.wcpt.org

2010 communication sheet (please contact secretary@iptop.wcpt.org regarding any changes/problems)

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Editor---Professor Amanda Squires (UK) (editor@iptop.wcpt.org)

Next edition details Copy date for the next edition is **June 2010**. The editorial board retains editorial rights. Length for a "feature" article is 1,000 words. We welcome world news (200 words) from member countries, conference information and contributions from the Committee as relevant. Contributions should be in English language and WORD format with references in Harvard Style, any websites hyperlinked in and sent by e: mail to the editor

We are in the process of developing an advertisement protocol and rate. In the meantime suggestions from members of potential advertisers would be welcome to Jennifer Bottomley (vicechair@iptop.wcpt.org.)

Minutes of IPTOP General meeting held on 10th November 2009 in Ankara

	Present Filiz Can, Olwen Finlay, Amanda Squires Bhanu Ramaswamy, Van Hoornweder, Jan Tessier ,Jill McClintock	
1.	Apologies Jennifer Bottomley and reps from Greece	
2.	New Members The Belgian reps were welcomed to the meeting and acknowledged as members of IPTOP in associate status until the general meeting in Amsterdam in 2011. Proposed by Olwen Finlay and seconded by Bhanu Ramaswamy. Belgium paid their membership fee and a donation to IPTOP funds which is much appreciated. It was acknowledged at the Exec committee meeting in the morning that there were still outstanding payments to be made to some of the Exec Committee since Vancouver 2007 With this in mind the money from Belgium was given to Olwen Finlay in part payment for her outstanding costs. Amanda Squires is still owed repayment for costs incurred in Vancouver	
3.	Minutes of AGM Vancouver 2007 Accepted as a true record. Proposed by Olwen Finlay and seconded by Jill McClintock	
4.	Clarification of Executive roles and responsibilities. A summary of the discussions from the Executive committee meeting in the morning, to inform the new members of the duties of each of the committee members. The Treasurer duties will be looked at with urgency by the Chair.	Filiz
	It was also agreed by the Exec to develop a new officer role, a Website Manager as this is currently not being managed and would need someone with expertise and time. The new job will be advertised in the next Newsletter and we hope to resolve this problem in the very near future. The Job Description will be developed by Olwen (NB Jill—should this not be a proposal to the AGM ???)	Amanda
	The new Belgian delegates were keen to clarify their role and how they can contribute to IPTOP and share information with their members. There are currently 18,000 Physiotherapists in Belgium, 5,000 in AXXON (the professional body group) and 60 members in the Older people's subgroup.	
5.	Reports	
	Chair Filiz Can gave an update of contacts and activities undertaken for IPTOP since the last Newsletter report. It was discussed and agreed that the Chair should submit a report for each Newsletter listing all contacts by date, purpose, venue and who the meeting was with. A detailed report will not be necessary for each meeting and would contribute to the annual report.	
	Vice Chair Report as of last Newsletter	
	Secretary Detailed correspondence most of which was in relation to members applications or confirming contact details. The contact list will be reviewed again before 31.12.09 which is the date when WCPT do their web updates	Jill
	Treasurer No report sent	
	Editor The importance of country and regional contribution to the Newsletter was emphasised. A template for both regional and national reports is being developed this will hopefully give a structure to those writing such reports. A timetable for contributions was also discussed so that the work is spread equally throughout all the member counties. This will be circulated.	Amanda

6.	Regional reports No report from Pacific region No report from North America	
	European report. Various parts of Europe submitted reports for the last newsletter.	
7.	Constitution WCPT is currently reviewing all the subgroup constitutions to gain consistency, they will shortly be publishing their outline. IPTOP Executive proposed a few changes to our constitution--- a new officer post to manage the website; a new structure for the Executive to have a Chair and two Vice Chairs (to provide continuity) and a President (an advisor) whose experience and contacts can help support the Chair and IPTOP in general; the suggestion of a Patron was made later.	
8.	Membership Currently IPTOP have 17 member countries including Belgium whose full membership will be agreed in Amsterdam	
9.	Conferences	
	Ankara 2009 <ul style="list-style-type: none"> • IPTOP Exec Committee meeting and General meeting 10.11.09 • Scientific programme 11.11,09 to 13.11.09 • Evening drinks reception after first day programme • Gala Dinner 12.11.09 • National Symphony Hall evening 13.11.09 • Saturday 14.11.09 day trip to Beypazari • 	
	Greece 2010 Dates and venue to be confirmed urgently.	Filiz
	WCPT 2011--- Amsterdam IPTOP will run a programme within the WCPT conference. Confirm with WCPT the programme for 2011 so that IPTOP can plan its general meeting and social events not to conflict with the main programme	Filiz
	There was discussion about a one day pre conference training programme which will be directed primarily for IPTOP member countries. The membership is to be asked for suggestions for topics of interest and speakers to form the IPTOP programme.	Jill
	Suggested collaboration with other SIG's on either Health Promotion or Standards session.	Filiz
	As European regional rep Bhanu will liaise with the Netherland reps to assist in organising the training day.	Bhanu
	IPTOP posters (for IPTOP countries only)--- there will be a prize for best poster. A checklist will be developed to shortlist applications and a group organised to review the posters. Amanda agreed to coordinate this work.	Amanda
	The IPTOP stand. Brenda Myers to be contacted re WCPT support to subgroup banners and the possibility of a joint subgroup stand in Amsterdam which could be timetabled between the groups.	Amanda
	Awards Programme. IPTOP will be providing names in the International Service Award category before 30.06.10	Filiz
	Teleconference 8.00pm GMT Monday 16 th November 2009 with WCPT re Amsterdam 2011 Filiz will represent IPTOP.	Filiz
10.	Date of next Exec and general meetings Greece 2010. Filiz to confirm dates.	Filiz