A New Organization

Society of Sports Therapists – a proposal

Graham N. Smith, MCSP, DipTP, CertEd, SRP (Chairman of the Society of Sports Therapists)

The Society of Sports Therapists was formed to address the increasing demands from both sport and leisure on everyone involved in the management and care of injured sports people. As the national emphasis on sport for all increases, the numbers of those participating in sport actively at all levels far exceeds the support services available and necessary to provide the care required.

The Government’s White Paper on health, as well as a recent investigative documentary on TV, have identified that, whilst services need to be provided, the standards and availability are questionable and inadequate. Furthermore, incidents requiring immediate life-saving first aid techniques are occurring more frequently in sport and are being highlighted by the media.

Whilst there are several organisations providing specific interest and membership for their own professions, there is not one organisation or society available to meet the needs of everyone concerned in sports injury management.

It was with these issues in mind that the Society of Sports Therapists was formed.

Aims of the Society

The aims of the Society are:

1. To provide a professional identity for sports therapists which will educate, monitor and legislate on all matters pertaining to sports therapy.

   There is diversity in background, experience and expertise of those involved in the management of sports injuries. Yet there is not a single organisation available to meet the requirements. It is important to have a professional and corporate identity and that the Society can govern itself both educationally and legislatively.

2. To provide a validated educational qualification, nationally-recognised as a pre-requisite for full membership.

   With such diverse experience and backgrounds, it is important to standardize the levels of competence of the members within the society. In order to obtain a nationally-recognised qualification, discussions are being held with the National Council for Vocational Qualifications in order that the diploma course receives national accreditation.

   Accreditation by such a nationally recognized vocational body would not only help members in establishing their credibility, but also allow members of the public and other professional organisations to recognise that full membership of the Society can only be obtained when a specific, measurable level of competence has been attained.

   Other professionals wishing to become full members of the society will be expected to demonstrate that they have the competence required to pass the qualifying examinations, or recognizable previous sports-specific experience, otherwise they will be required to undertake the diploma course in full. Standardization and validation must be two main priorities in any professional organisation.

3. To provide pre- and post-registration courses on all aspects of sports therapy, thus improving the standards of care and treatment given to athletes.

   Education is a continuing process. It is therefore important that all members have the opportunity to further their knowledge and levels of expertise. Consequently, a wide variety of courses from one day seminar/workshops to longer residential courses will be held in order to provide education for all levels of continuing membership. Many of the courses will be practical and multi-disciplinary; some will be specifically aimed at certain groups of members to meet their particular demands.

   Further details on the educational programmes can be obtained from the prospectus of the Society, available from the Society’s main offices, Lasyard House, Underhill Street, Bridgnorth, Shropshire WV16 4BB.

4. To provide professional indemnity insurance for all full members underwritten by Lloyds, thus ensuring protection for members and patients alike.

   For many members, this has to be one of the most important benefits of the Society. Recognition that full membership demands a proven standard of competence has allowed Lloyds to offer very competitive professional indemnity insurance for the
Society. Full members will be covered by practitioner’s malpractice and general liability insurance, the premium for which is included in the annual membership subscription. The insurance is up to a limit of £1 million on any one claim as well as in the aggregate. The policy of the insurance will be lodged with the Society and is available for members to peruse should they so wish. It is recognised that not all members will require this cover. However, for many, this recognition of their ability and competence will be of great relief and the most important benefit.

It must be emphasised that the professional indemnity insurance is only available to full members of the Society and that they must work within the codes of professional conduct laid down in the membership handbook.

5 To provide a platform for members to further their knowledge, careers and therapeutic ambitions.

The Society has been formed to meet the needs and demands of its members. It is therefore up to the membership to use it accordingly. The Society has a legally adopted constitution which allows for all members to become involved in its government and development.

Membership of the Society

The Society has two main categories of membership:

Full membership

Open to everyone over the age of 18 who has successfully completed an approved course in sports therapy and has satisfied the criteria of the membership committee of the Society. Full membership may also be obtained by completing the Society’s own diploma course or licensing examinations. As discussed earlier, on payment of the annual subscription, full members are automatically covered by the Society’s own professional indemnity insurance and therefore bound by the codes of professional conduct and the constitution of the Society.

The Society has the right to refuse applications for full membership or request that a qualifying examination is taken if either qualifications or experience are deemed inappropriate. Full members are also eligible to take an active part in the affairs of the Society and vote on issues raised during general meetings. They may also stand for election to the council of the Society when vacancies arise, if they so wish.

Affiliated membership

Open to anyone over the age of 18 who has a specific active interest in sports therapy. Whilst not eligible for all the benefits given to full members, affiliates may attend courses and seminars and receive copies of the journal. Affiliates are not entitled to vote at general meetings or take part in any of the policy-making decisions of the Society. Affiliated members are not covered by the professional indemnity insurance scheme of the Society. Affiliated membership is a pre-requisite to undertake the Society’s own diploma course.

Diploma course in sports therapy

Market research and personal communications with involved personnel within the sports and recreation industry revealed that there was a perceived need for a vocational qualification in sports therapy. As a result, the Society undertook a detailed functional analysis of the occupational group of sports therapists. In response to this, objective design was undertaken, a core curriculum synthesised and a vocational qualification formulated – Diploma in Sports Therapy.

The Society’s diploma course in the management and treatment of injuries has two methods of attainment:

1 A distance learning course containing 12 modules, four of which are practical and undertaken at regional teaching centres. Examinations are taken after modules 6 and 12. Successful completion of each examination is required in order to pass on to the next phase of the course or to be awarded the diploma of the Society and full membership. There is a system of full tutorial back-up to individual students. A series of work-based assessments are undertaken by external assessors to monitor the application of the theory learned to its deployment in the workplace.

2 A residential course containing two parts of 12 days each. A minimum period of nine months must elapse between each part. Successful completion of the examinations at the end of the first part is required to be eligible to proceed to part 2. Work-based assessments are undertaken in the intervening period as for the distance learning option. Successful completion of part 2 confirms eligibility for the award of the Society’s diploma and full membership. Both courses contain the same core content and assessment procedures.

The diploma course offers instruction in the following:

Anatomy, physiology and pathology
Examination and assessment of injuries
Planning treatment and rehabilitation programmes
Massage and thermal applications (ice, heat, hot/cold)
Fitness testing, including post-injury and pre-competition assessments
Diet and nutrition in sport
Practical sessions on first aid in competitive environments
Legalities and ethics
Injury prevention.

Specialist lectures are also given by recognised experts in orthopaedics, sports science and rehabilitation. A comprehensive reading list is issued and experienced tutors provided for each student. No electrotherapy is taught during the diploma course.

Assessment procedures and ongoing monitoring of courses follow the strict guidelines laid down by the National Council for Vocational Qualifications. In accordance with these regulations, the diploma course has been aimed at the standards required for a level 3 National Vocational Qualification. Additionally, it is the policy of the Society that the diploma course content and teaching methodology should be
Society of Sports Therapists – a proposal: Graham N. Smith

kept under regular review and, where appropriate, updates and changes to practice will be incorporated.

The journal
The journal of the Society – Sports Therapy – will be produced and printed quarterly. As well as containing educational and informative articles, it is hoped that the journal will become a central source of information for the membership. It will be sent free to all members of the Society as well as all governing bodies in sports and similar professional organisations, both nationally and internationally. Therefore, contributions will not only be submitted from members working and residing in the United Kingdom, but also from colleagues in other countries.

The Society hopes that the diversity of subjects and sports covered in the inaugural edition will not only whet the appetite but stimulate contributions for future editions. The ultimate success lies with the readership and it hoped that members and all sports therapists will use this journal as a platform to air opinions, give and seek information and, if necessary, use the classifieds. Likewise, constructive comments or criticisms regarding the content and format of the journal would be welcomed.

Through links with manufacturers and suppliers, the Society will also be able to offer help and advice in the purchase of equipment and will also be able to provide unbiased assessments and reviews of the products. Additionally, the Society can offer advice on life insurance, personal pensions and private health plans if required.

Conclusion
The success of any Society lies ultimately in the hands of its membership. In forming the constitution and instituting codes of professional conduct, the Society has laid down the foundations for a strong, professional organisation. The strength and professionalism of that organisation is wholly dependent on the personnel working within it.

It is further hoped that the Society will fit in with and work alongside other established professional organisations, both nationally and internationally. The Society envisages that many of its members will also hold membership of other such organisations. A cross-fertilisation of ideas and philosophies can only benefit the treatment and management of injuries at all levels of sport – surely the ultimate aim of everyone concerned.

The Society perceives a need to improve the standards of care at all levels of all sports. People who participate in sport, show a degree of commitment, motivation and dedication, proportional to the level at which they compete. It is, therefore, important that sports therapists are able to demonstrate the same degree of dedication, motivation and commitment regardless of their level of involvement.

THE LONDON HOSPITAL MEDICAL COLLEGE (University of London)

CLINICAL RESEARCH FELLOW – SPORTS MEDICINE

Applications are invited for a three-year appointment of Clinical Research Fellow, funded by Lederle Pharmaceuticals, based at The London Hospital in the Department of Sports Medicine (Orthopaedic Surgery) and Rheumatology with links to the National Sports Centre, Crystal Palace. Teaching will include some formal lectures, seminars and teaching clinics at The London Hospital and Crystal Palace. Excellent research opportunities available with The London Hospital Medical College and Queen Mary and Westfield College, but initially the appointee will be expected to take part in an on-going research programme investigating the effects of exercise on hormonal changes and inflammatory symptoms in ankylosing spondylitis and other inflammatory joint disease. This may be extended into a wider analysis of the effects of aerobic exercise on disease.

Salary: based on Lecturer scale (Registrar grade) according to seniority, plus London Weighting.

Enquiries to Mr J D Perry, Consultant Rheumatologist, The London Hospital, Whitechapel, London E1 1BB (Tel 071 377 7783).

Application by CV to the College Secretary, The London Hospital Medical College, Turner Street, London E1 2AD.

Closing date: 3 weeks after the appearance of this advertisement.