



ASSOCIATION  
OF CHARTERED  
PHYSIOTHERAPISTS  
FOR PEOPLE  
WITH LEARNING  
DISABILITIES

## ACPPLD NEWSLETTER

### 2019 Autumn Edition

#### A Welcome from the Editor

Welcome everyone to the Autumn Newsletter.

This is the traditional Annual Learning Event (ALE) feedback "bumper edition" in which we have articles, photos and the evaluation report from our 2 day Annual Learning Event held on 16th & 17<sup>th</sup> September at the Golden Jubilee Conference Hotel, near Glasgow. I hope it gives those who were unable to attend a flavour of the fabulous 2 days we had together and, for those who did attend, good memories of our learning and networking (plus a gentle reminder to add your attendance and reflections to your HCPC evidence portfolio!!!). Next years ALE will be organised by our SW2 Regional Group and there is info about their plans for this event outlined in this edition.

We also have the Chair's Report from our 2019 AGM, from Jenny Tinkler, for all to read and absorb, retrospectively reflecting our work and activity over the past year. Jenny's report also contains heartfelt "goodbye" wishes to one of our long standing National Executive Committee members, Sue Over, who is retiring in October. We wish you well Sue!

May I offer huge thanks to the various members of ACPPLD who have contributed to this edition, in particular, the two Scottish members who kindly agreed to share the write up of our 2 day ALE event, I hope you enjoy their accounts and reflections and I thank them for their support.

Please read on and enjoy and, as always, please consider how **YOU** could contribute to our Newsletter. I'm always happy to help.



Angie, Newsletter Editor



## Chairs Report      Dr Jenny Tinkler



Hello Everyone,

My report this month is, as always, my annual report delivered at our AGM held during ALE.

### **"Chairs report for AGM - 16<sup>th</sup> September 2019**

I would like to welcome everybody to this year's ACPPLD AGM, and start by thanking the Scottish region for all their hard work in organising this year's Annual Learning Event.

We have had yet another busy year and have continued to use every opportunity to raise the profile of people with a learning disability and the role of physiotherapists within this specialist field. I will use this report to highlight some of the more significant activities over the last 12 months. Our membership has grown again over the last 12 months, and in June this year we had around 300 members.

The National Executive Committee has met 5 times in the last 12 months in Edinburgh, Durham and Gateshead. As we continue to be mindful of the costs of meeting venues and travel we had a virtual meeting in October, a format that we will be repeating this year.

One of the most significant changes that have taken place this year has been the change to the relationship of the Professional Networks with the CSP. The CSP reviewed its governance structures and concluded that the process for overseeing Professional Networks and allocating capitation fees was an overly bureaucratic, labour-intensive process for all parties, not least for the National Executive Committees. In view of these changes Professional Networks no longer have to submit their annual work plan to the finance team, no longer need to provide evidence that their membership exceeds 100 CSP members, nor limit our membership to only CSP members. **As a result of these changes all CSP Professional Networks are now able to open their membership to non CSP members, which means that any of our assistants who are not CSP members can once again join the Professional Network.**

This has led to the NEC reviewing the membership categories and making the necessary amendments to the Constitution, which we hope to ratify at this meeting.

As part of the CSP review there has been the cessation of the capitation fees that each Professional Network was able to apply for, which was £2.00 per member. This has been replaced with a new funding process which professional networks can access to help support a discreet piece of work that the PN would like to undertake. From 2019 the Professional Network capitation fees, which is a sum of £56K, will transition to a process by which Professional Networks can apply for funding for individual pieces of work relevant for members. Professional Networks can apply for either up to £3,000, £5000 or in exceptional circumstances up to £10,000. The awarding of any funds is subject to tight eligibility criteria and monies awarded can be used together with other (non-CSP) monies towards a piece of work. All applications have to go through the NEC of the Professional Network.

In line with previous years we held our meeting with the Regional Representatives in Gateshead College. Our Regional Reps, led by Sue Over, the NEC's Regional Officer, are an important conduit between the NEC and the wider regional membership. The Regional Officers day was valuable for all who attended. As with previous years we spent time in the morning sharing the activities over the last 12 months and discussing ways of engaging members in the regions to take a more active role with their regional committees. This is particularly important when considering succession planning at both a regional and national level. In the afternoon we had a session led by Alex Hough, a professional advisor from the CSP. She presented the CSP's Safe and Effective Staffing Level decision support tool (SESL). The tool is designed to help physiotherapists understand the factors required to provide safe and effective staffing. It does not tell you how many staff you should have of each grade per population count. It is a tool based on Professional Judgement.

It was great to see Christine Hughes, one of our former ACPPLD members and regional Representatives, being honoured in the Queen's



Honours List for her work for people with learning disabilities - well done Christine!

The NHS Longterm Plan has provided us with the opportunity to review the 'So your next patient has a learning disability' leaflet produced a couple of years ago. We are in the process of doing this and spent some time at the Regional Representatives meeting discussing potential changes. We don't envisage doing any significant rewrites but just making sure it is still contemporary and includes any new guidance.

As with previous years we did not submit a motion to ARC, the Annual Representatives Conference, but two members did attend the Conference. If anyone has an issue that they consider the CSP should be addressing on behalf of the Professional Network at next year's event, then please get in touch with a member of the NEC for further discussion.

As Chair of the ACPPLD I continue to represent the CSP at the Learning Disability Professional Senate meetings. This group meets quarterly to receive updates on and influence developments in relation to policy and practice for people with a learning disability. This year there have been two sub groups that we have had representation on. One has been time limited and looked at the development of the Advanced Clinical Practice role in Learning Disability and/or Autism, which was attended by NEC member Liz Griffen, and the other has been the GOLD project (Growing Old with Learning Disabilities), attended by NEC member Sarah Bruce. A piece of work currently in development is the development of top 10 tips for Trauma Informed Care. This will hopefully be signed off in December and then shared across all the networks.

The NEC meeting reviewed the expenditure over the last 12 months and considered whether we needed to propose an increase in our annual subscriptions. As with last year, as the NEC has taken steps to cut the costs of meetings a proposal to increase the subscriptions this year is not necessary. The NEC will continue to review this position on an annual basis.

None of these activities would happen without an awful lot of hard work, time and effort from all members of the NEC outside of the committee meetings. I would

therefore like to take this opportunity to thank, on your behalf, all the NEC members for their commitment to raising the profile of people with a learning disability and improving the physiotherapy experience for this population.

Stephen Whitton, who was our Research and CPD Officer, had a change in job role and as a result made the difficult decision to stand down from the NEC during this year. I would like to take this opportunity to thank him for his contributions to the work of the ACPPLD and wish him well in his new role.

This brings me on to the announcement that another member of the NEC has decided to "call it a day" and venture into the big world of retirement. It is with great sadness, but a huge indebtedness, that we say goodbye to Sue Over. Sue has been on the NEC for many years and is part of the fabric of the ACPPLD. She has done a sterling job over the last few years in the role of Regions Officer and, prior to that as Chair, and it is her encouragement, persuasiveness and support that meant we had all 7 regions represented at this year's Regional Representatives day. She will be greatly missed but on behalf of the ACPPLD I wish her well in her retirement, and who knows, if you play golf you may bump into her on a golf course somewhere around the globe!



Finally, I hope everybody enjoys themselves over the next couple of days and takes the opportunity to network and meet new people and return to work full of inspiration and enthusiasm. I commend this report for adoption by the members.

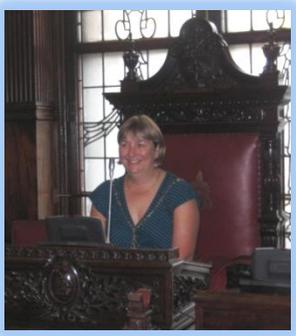
**Jenny Tinkler, Chair ACPPLD      16<sup>th</sup> September 2019"**

I hope you all have a lovely autumn and I hope you enjoy this Newsletter.

Jenny.    Chair ACPPLD.



Sue Over.....Regions Officer (/ Previous Chair/ Previous Regions Officer/Trent Chair/ Trent member/ Poster Girl for the CSP (!)



ENJOY SUE!!!!, .....FROM ALL YOUR ACPLD COLLEAGUES



# ACPPLD ANNUAL LEARNING EVENT

## Monday 16<sup>th</sup> and Tuesday 17<sup>th</sup> September 2019



The calendar event of the season has now come and gone and we hope all who attended ALE had a wonderful time enjoying the luxurious surroundings of the Golden Jubilee Conference Hotel and the famous hospitality of the West coast of Scotland.



For those unable to attend here is an overview of our 2 days, kindly provided by our Scottish Roving Reporters : Katrina McSorely from NHS Ayrshire and Arran and Lindsay King from NHS Tayside.



Welcome.....



meet the organisers



registration desk

**DAY 1**  
**ACPPLD Monday**

**Graham McWhirter Orthotist, Orthotic Services NHS Lanarkshire:**

Theory and Practice in relation to analysis of gait with practical demos using gait lab equipment and pressure mats.

Graham qualified from Strathclyde University in 2008 and started working in Bournemouth as a Prosthetist/Orthotist, working for one of the top contractors in the UK. He moved back to Scotland in 2009 and has been working for NHS Lanarkshire since mid-2010 in many clinical environments benefitting from an MDT approach. Through Graham's clinical practice the use of force plate analysis is routinely carried out to facilitate patient understanding and to assist with prescription and clinical reasoning.



Graham opened his presentation with an early morning discussion on Newton's Third Law

"For every action there is an equal and opposite reaction" this set the scene for further discussion on lever arms and gait biomechanics.



As Physiotherapists, many of us will be working with individuals with Ankle Foot Orthoses (AFOs) which can significantly improve an individual's gait; however the intricacies of the corrective forces and angles required can be highly complex. Graham demonstrated the positive impact on a patient's gait through the use of a gait lab and finely tuned AFO's. The use of the gait lab was very informative, few of us having used one in clinical practice. It was interesting to observe the accurate areas and measurable impact of pressure accompanied with a measurement of the asymmetrical weight-bearing demonstrated by patients for a variety of clinical reasons.

The potential benefit of the use of a force plate was identified as magnified for the diabetic population in that the reduced distal sensation accompanied with potential pressure areas during gait may lead to skin breakdown. Graham was able to demonstrate areas significantly at risk of pressure and this information therefore would allow for modification of footwear, supporting devices and offloading the affected area.

The variability of foot position for the general population was discussed and demonstrated with attendee participation the use of a force plate to identify pressure. Those involved demonstrated their gait catwalk style across the pressure plate and areas of weight-bearing were identified allowing for discussion on their biomechanics. Overall the presentation engaged the attendees on the opening lecture of the ALE, and provided interesting information on a very relevant topic.



**Dr Kavi Jagadamma, Lecturer of Physiotherapy, Queen Margaret University**

**Orthotic Footwear- The Health Design Collective.** Dr Jagadamma commenced his career within a voluntary organisation in India working as a Physiotherapist and co- coordinator of early intervention services for at- risk children. Following three years of working as a clinician he commenced his PhD at Queen Margaret University and completed an exploratory study investigating the effects of tuning of ankle foot orthoses and footwear using 3D motion analyses on gait function and quality of life of children with cerebral palsy. Dr Jagadamma is now a lecturer at Queen Margaret University and one of the founder directors of the social enterprise "Health Design Collective". Health Design Collective aims to develop user friendly pleasing healthcare products through patient- centred product design, the first of which was attractive footwear for foot drop was a runner-up in the social enterprise category of the 2018 Converge Challenge competition.



The user centred process of discovery and the product being co-designed with users is considered to be integral to the ethos of Health Design Collective.

Through patient engagement and collaboration with professionals it was identified that the current available options to assist those with foot-drop weren't always fit for purpose.

It was recognised through the use of focus groups and mapping the customer journey that patients require a device which optimises their remaining function by enabling them to move their ankle, which also acts as an assistive device by holding the foot up and is comfortable, affordable and attractive. Following the identification of issues with current devices and co- design with users prototypes are subsequently developed and testing is carried out

The development of the Jackie-Go footwear with smart step technology for individuals with footdrop is the initial design from the Health Design Collective and has a patent pending therefore the device was unable to be demonstrated at this time.

We will be intrigued to await the release of the Jackie-go footwear and would be keen to hear more about this promising social enterprise. Hopefully ACPPLD will hear when this product has been launched- so "Watch this space"!!!

**Jennifer Crockett Professional Lead for Physiotherapy, Learning Disability Team, Greater Glasgow and Clyde.**

#### **Lycra: A Feasibility Study**

Jennifer trained at Queens College Glasgow and graduated with a BSc Physiotherapy in 1987, following 2 years working within the Victoria Infirmary, Jennifer moved to work within the field of Learning Disability at Lennox Castle Hospital. Jennifer has always has an interest in clinical effectiveness which has led to collaborative working with Glasgow Caledonian University to analyse and publish a paper on the Glasgow LD Falls Pathway. This research subsequently sparked an interest in research methodology and led to Jennifer's recent MPhil degree with the research around Lycra garments and falls prevention.

Jennifer commenced her presentation with a background to Lycra Splinting Garments (LSG) and advised attendees the garments have the potential to improve gait or balance but advised that LSG's had not as yet been tested with adults with learning disabilities who fall due to gait or balance issues.

An LSG is defined as a made to measure dynamic elastomeric functional orthosis (DEFO) which when worn allows a wide range of function and movement for the individual wearer whilst providing further support to the area covered by the splint.



The rationale for the study was described as the positive improvement noted in gait and balance with LSG wear for children with neuro-motor deficits and adults with stroke, the lack of evidence on the use of LSG's with adults who fall due to gait/balance issues and no previous research at all on adults with Learning Disabilities despite being an obvious population of concern. Potential issue with the use of LSG's were also identified with the snug fit of the garments potentially outweighing the benefits- negatives include difficulties with putting on and taking off, and issues with potential regulation with body temperature particularly in hot weather.

The main research questions were around

#### **Feasibility:**

What is the feasibility of the use LSG for adults with learning disabilities with gait or balance issues to reduce or prevent further falls

What is the feasibility of using laboratory based measures of movement and function (balance, gait and foot clearance) to characterise outcomes associated with LSG wear in adults with learning disabilities with balance or gait issues.

#### **Usability:**

What are the views and experiences of adults with learning disabilities and their supportive carers on the usability and acceptability of LSGs

**Results:** The results highlighted that the use of Lycra splinting socks for individuals with a Learning disability is likely to provide a positive outcome to prevent/ reduce falls however further research is required

The research did highlight that LSG's which are more intrusive are less likely to provide positive outcomes due to reduced usability and issues with non-compliance.

#### **Care about Physical Activity (CAPA)**

**Louise Kelly B.A, M.Ed. Programme Lead: Care about Physical Activity**

**Lynsey Kemlo BSc, MSc, CSP Improvement Adviser: Care about Physical Activity**

Louise Kelly is currently leading a National Care Inspectorate Improvement programme supporting care professionals, people experiencing care and their friends and family to connect with AHP's and others to increase health, wellbeing and mobility. Throughout Louise's career she has contributed to establishing a new PE curriculum for secondary

schools, a national standard for the health/fitness industry in Ireland. Louise has also worked on a new national certification for people with disabilities completing work based training programmes and improvement programme specifically for staff working with people with learning and physical disabilities.

Lynsey currently works as an improvement advisor for a national care inspectorate programme, supporting care professionals, people experiencing care and their friends and family to improve health and wellbeing. Lynsey's previous experience includes working in a military hospital, working within a specialist palliative care service and an adult mental health service.

Care about Physical Activity (CAPA) is an improvement programme led by the Care Inspectorate in Scotland to help older people who are in care to move more often. From little things like encouraging older people to post their own letters or walk up the stairs instead of using the lift! It's about staff, people experiencing care and their friends and family working together to increase well-being, health and mobility. It's about making things easier so that people can do things for themselves.

Lynsey and Louise showed the attendees some photos and videos of people in care environments engaging with the CAPA programme. Then the sit to stand challenge was set! With many competitive physios within the room there was one outstanding winner.....37 sit to stands in 30 seconds- awesome! Did you catch the Twitter video? - It is one to see!



Once we had all resumed our normal breathing pattern we were shown a video of a Physiotherapist from Ayrshire who is implementing CAPA principles within her community rehabilitation ward. The discussion of things already in place to facilitate and encourage movement for individuals with learning disabilities around the country was interesting in that there are already a significant number of activities and signposting opportunities in place. The overarching theme of facilitation of movement to improve someone's general health and wellbeing was reinforced throughout the presentation with examples of doing a functional task of gradually increasing walking distance to assist someone to walk to the shop, which then resulted in being gradually joined by friends from her residence walking to the shop with her. The focus throughout was clearly on the enablement and encouragement of someone's abilities at any level. The presentation was clear and encouraging, and for LD Physio's who focus on the enablement of patients who may find daily tasks challenging it was particularly poignant.

Movement starts with an action.....and further to the earlier Orthotic presentation using Newton's 3<sup>rd</sup> Law- we all know "For every action there is an equal and opposite reaction"!! Ta da- go out there and cause a reaction!!!

**Love Activity, Hate Exercise? A Dramatic presentation from Centre Stage Drama Group, demonstrating the CSP National Campaign message:**



Centrestage is based in Kilmarnock, Ayrshire and are the winners of Scotland's Best Theatre 2019 with a vision "to build energetic and inclusive communities with the arts at the heart". Centrestage believes that anyone regardless of age, background or experience can gain life changing social benefits through the active participation in the Arts - particularly music, drama, dance, visual, digital and culinary arts.

What a fabulous performance by Centrestage, the attendees were captivated with the singing, dancing, and drama throughout the performance. The activity angel visiting her friends to promote

activity to someone who wasn't keen was a brilliant script and the performers acted out their parts superbly. The performance wouldn't have been possible without the dedicated staff of Centrestage and with the musical direction of Stuart and his Technical Team. A standing ovation was a clear indication of the enjoyment of all present.

The photographs of the presentation may appear on a coffee table near you in your Frontline Magazine thanks to Fraser from CSP who attended the afternoon session. Post attendance "To do list" - Make a mental note to open your professional magazine!!

We were all very grateful for the CSP supporting our event and the supply of all our delegated with a Love Activity Hate Exercise Pack- The group photo of us with the themed beach balls should be fun!!





### **Personal Testimony: Stuart Campbell**

Stuart is a young man with Downs Syndrome, he attended mainstream school, later going on to college. Stuart was part of the Centrestage Production earlier in the day and had shown his talent for the stage during this!! Amongst the attributes of this young man are his involvement with the Scottish Youth Parliament having spoken and represented his peers, and being a lead commissioner for the World Down Syndrome Congress held in Glasgow 2018. Stuart enthralled and captivated the audience with his stories about activities he enjoys including swimming, musical theatre, dance- including tap dance, singing, and golf. His activity levels put many of us to shame! Stuart reported that he also undertook indoor exercise using his Xbox 360!! Stuart was assisted by his Dad, who provided photos of Stuart and his family being involved in a colour run, amongst many other outdoor activities with a final photo having been taken in the aftermath of all this exercise- having a nap!!!

At present Stuart also attends UCAN which is a work based organisation for people with additional needs in Kilmarnock. Stuart is an engaging young man and his fabulous testimony was certainly a highlight of the day.



## Race Running

**Speaker - Fiona Kennedy, Research Fellow Queen Margaret University**

**With Practical Demonstration from Andrew Shilton - Quest 88**

Fiona is a race running coach and has begun working as a research fellow for the race running research at Queen Margaret University Edinburgh. Fiona described her background within disability sport and she is now a race running coach.

Fiona provided attendees with a brief history of race running which involved a lot of travelling backwards which isn't exactly ideal, fast forward to the present day and the Petra race running bike demonstrated during Fiona's talk is a forward facing race running bike with many adaptations.



Race running is suitable for individuals over 3 years of age who have balance and co-ordination difficulties. There are a vast benefits including

- decreasing the weight-bearing on their legs therefore reducing the pressure and allows them to move more freely
- improving balance and co-ordination through practice,
- improved flexibility and therefore joint range of motion,
- improvements in cardiovascular health
- improvements in skill development with the associated improvements in confidence and self esteem
- improvements in muscle tone and strength subsequent independence.

Race running clubs are often linked with a mainstream athletics club, this is considered useful to facilitate increased awareness of race running. The opportunities for involvement of Physiotherapists to provide input is considered highly desirable and helpful, there are also opportunities for volunteers such as students, parents to become involved. At present Racerunning is included as a World Para Athletics Event, and there is an ongoing development to aim for Racerunning to be included in The Paralympic Games 2024. This is obviously a very exciting prospect- spread the word and make contact with your local club!!

Fiona highlighted that more race running coaches are required as well as the need to provide increased provision at school.



Some of the practical issues involved in race running include storage of the bikes, the challenge due to variable ability levels within the group, the need for padded shorts, and the challenge at times of setting up the saddle to facilitate maximal function and comfort whilst getting used to the bike.

Fiona asked those in ACPPLD to support the further development of race running- we know our profession enjoys a good networking opportunity so spread the word, encourage those involved in education to become involved, consider classifier training, volunteer, attend a local race running club.

The Petra bike demonstrated by Andrew Shilton was trialled by many attendees who whizzed about in the sunshine, however none as glamorous as our Scottish Regional Rep Linda Harding who demonstrated for us all- Thanks Linda.

[www.racerunning.org](http://www.racerunning.org)



**Monday Evening Activity**

Is anyone up for a game of Body Boosting Bingo before our Conference Dinner? Luckily, everyone said "YES", followed by "What is that?" To be fair, no-one had a choice in the matter as our delegates were just asked to report promptly for a drinks reception at 6.45pm, little did they know what awaited them prior to being fed!!!!.....so, it was over to our BBB hosts, Yolanda and Jenny to lead us through it all.....

Yolanda Strachan and Jenny Ackland are both AHP Health and Wellbeing Consultants working for Age Scotland, Scotland's largest charity for older people. They are both passionate about helping older people be as well as they can be! Their concept, Body Boosting Bingo, was designed as a short, fun activity based on a familiar game, with the aim of promoting the importance of strength and balance exercises and of keeping moving! With the help of funding from the Robertson Trust and Age Scotland, Body Boosting Bingo has been rolled out across Scotland, reaching over 3000 people to date.

It is played as a normal game of bingo, going for a line & then a full house, with each of the numbers being called out having an exercise and movement activity to go with it, accompanied by some motivational & inspirational music (and loads of laughter!!!!)



We caused quite an attraction and elicited a lot of smiles amongst the waiters and waitresses as we filled the restaurant with laughter and movement, building up an appetite to enjoy our delicious conference dinner. Check out twitter for some of the video footage....

For more information about how to access Body Boosting Bingo products and sessions, go to their website [www.bodyboostingbingo](http://www.bodyboostingbingo) (available in Scotland)

Sadly, Yolanda and Jenny can only support people/organisations in Scotland, but why not use the knowledge of BBB to campaign with your National Age association (e.g. Age UK, Age Cymru, Age NI).

## **DAY 2**

Day 2 started well with a beautiful sunrise over the Clyde and there was much anticipation in the air for our morning sessions. Respiratory Care was the theme for the morning and from chatter among delegates it was clearly an area which the majority were keen to learn more about.

### **Kath Sharp: Approaches to respiratory Physiotherapy in neuromuscular conditions and practical techniques to improve airway clearance**

Kath Sharp is the Team Lead Respiratory Physiotherapist in Royal Hospital for Children in Glasgow and lecturer at Glasgow Caledonian University was first up. Kath's speciality is Paediatric Respiratory Care and she has also worked closely with the Lanarkshire Learning Disability Team to develop their respiratory service. Luckily for us Kath is one of those amazing experts who knows her topic so well that she can explain complex ideas in simple terms.

She took us through the development of the respiratory system from infancy to adulthood and outlined ideal respiratory function - we learned that most of us don't have it, especially if we don't have a strong pelvic floor! The dual function of the diaphragm for both breathing and postural control was highlighted with the importance of the abdominal muscles to anchor the ribs. The functional implications of this were demonstrated by a video of a boy with CP who could not walk and talk at the same time. He was given a stretchy abdominal support to



wear and this improved both his postural control and respiratory function. This resulted in a better gait pattern and the ability to walk and talk at the same time, and even better, walk and laugh without falling over.

Kath told us that her preferred method of airway clearance is autogenic drainage and also spoke about the importance of considering the compliance of the individuals chest for how best to facilitate clearance - an analogy about the difference in getting ketchup out of a bottle or out of a sachet made it much easier to understand.



It was a great talk with practical relevance to delegates' day to day work. Kath really highlighted that respiratory assessment and intervention should not be seen as separate from the other assessments and interventions which we carry out. There were lots of questions and discussions generated. Fortunately, Kath was staying on to contribute to the second session of the day which gave us a little longer to discuss "all things respiratory" with her.

### **David Stobie: Approaches to respiratory Physiotherapy in neuromuscular conditions and practical techniques to improve airway clearance-continued**

David Stobie is a Highly Specialist Physiotherapist in Community Rehabilitation for NHS Lanarkshire Learning Disability. He took the floor to tell us about how Lanarkshire have developed their LD Respiratory Service and to give a practical demonstration of PEP masks.

David told us that the use of PEP masks in Lanarkshire directly followed on from the findings of his colleague Lynn Frew's Master's dissertation. Findings from Lynn's research review suggested that PEP masks and therapeutic positioning are the most effective respiratory interventions for an LD population. Given that respiratory problems are the cause of a huge percentage of hospital admissions and deaths in the LD population, the Lanarkshire team chose to carry out a pilot study into the effectiveness of their use in the community. The pilot study in 2009/10 showed the PEP mask to be effective in preventing hospital admissions and since this time the provision of PEP masks has been a key component of what is offered by the Lanarkshire LD Team.

David then gave a practical demonstration in the use of PEP masks and David, Kath and members of the Lanarkshire team were on hand to help us as we had a go using the PEP masks which they had brought along.

Very helpfully David was also able to give costings for various PEP masks and advice on ordering these very affordable pieces of kit.



It was great to have the experience of using the mask and to hear from David about how well they are received by patients. For those of us who did not have previous experience of the masks it was surprising to learn that it is a relaxing and pleasant intervention, which is manageable for the majority of our patient population, and of course to have evidence that the costings stack up was immensely useful!!

**Rhona Matthews: Talking Mats as a communication tool for Adults with a learning Disability**

Following many years working as a Speech and Language Therapist, Rhona Matthews spent 2 years working as a Physiotherapy Support Worker before taking up her current role as an Associate with Talking Mats. Talking Mats are a social enterprise and their tools are research based and have been developed by Speech and Language Therapists. Rhona's wealth of experience was clearly demonstrated in her talk. She introduced us to the concept of talking mats and demonstrated how to use it in specific physiotherapy related issues.



Talking mats involves a 2-way conversation where communication symbols are placed on a mat to communicate and record information as the conversation develops. Rhona emphasised that although it is often an

ideal tool for people who do not have verbal speech, its use should not be limited to those without speech.

Because the process involves listening, handling and placing symbols on a mat, information is received through multiple channels (auditory, visual, tactile). This results in increased comprehension. A visual record of the conversation is built during the process which also means there is less demand on memory, and this also aids processing of the information. Individuals that benefit include those with difficulties in communication, comprehension or memory or indeed for anyone who is searching for clarity in their thinking around a decision.

It was wonderful to see videos of Talking Mats in action and to see how it supports and gives control of the conversation to the individual being interviewed. I would recommend that those who were unable to attend visit the talking mats website to see it in action. [www.talkingmats.com](http://www.talkingmats.com)

### **Cat Jamieson: PAMIS (Promoting A More Inclusive Society)**

The final speaker of the conference was Catriona Jamieson, who is a Learning Disability nurse, by profession, working with PAMIS. PAMIS are a Scottish based charity and the only organisation in Scotland that works solely with people with profound and multiple learning disabilities and their families for a better life. Catriona gave us a very passionate talk about her role. She spoke about what it means to have a PMLD and what the term Profound can mean for individuals, their family and the wider community.



A large part of her role at PAMIS is working with individuals, families and practitioners to support inclusive communication and positive health and social care outcomes using a multimedia approach. In particular she spoke about the creation of digital passports which PAMIS is supporting. These are highly individualised and through recording personal information can be used to ease the process of hospital admissions, assist in staff training and as a record of an individual's personal history for themselves and for them to share.

PAMIS is currently only working in Scotland so hearing about this work generated a wider conversation about digital projects for this patient group across the UK. Why not find out if there is a similar type of organisation operating in your National area. If not, why not? [www.pamis.org](http://www.pamis.org)

.....And so the ALE 2019 Glasgow experience came to an end with a combination of thanks. Firstly, to the Organisers, the Scottish Region, who did a marvellous job!!



Lanyards good to go.....Goody bags pack-a-thon.....unpacking and set up

....Then a fond farewell and thanks to our retiring colleague Sue Over and, of course, finally, the "Olympic style" event of handing over of the Annual Learning Event Rosebowl from the Scottish Region Chair, Karen Black, to the next Hosts for 2020, Bethan Evans from SW2.....see you there!!!!



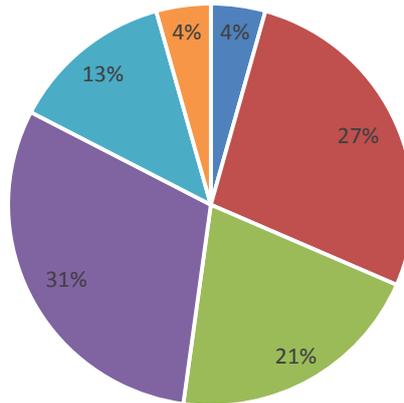


**ACPPLD Annual Learning Event Glasgow:  
Evaluation Results 2019**

**Evaluations returned: 63**



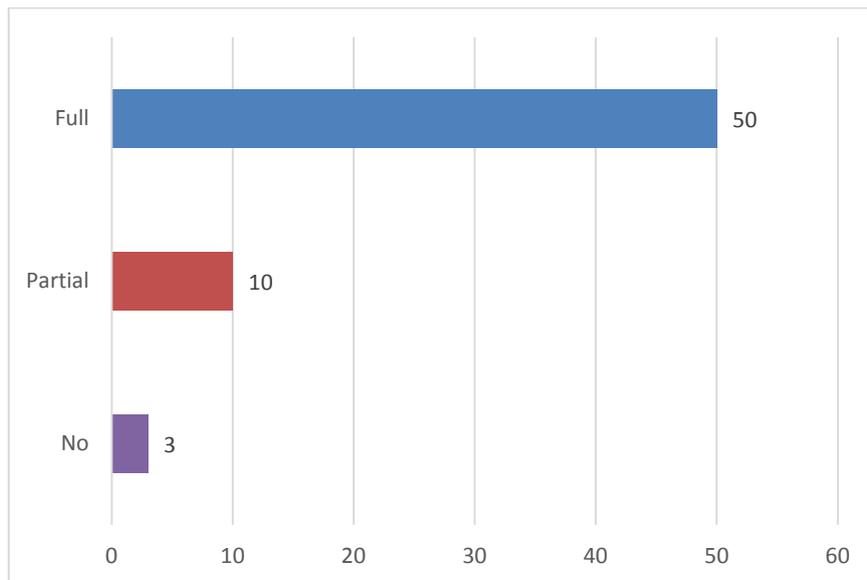
**How did you hear about the ACPPLD Annual Learning Event?**



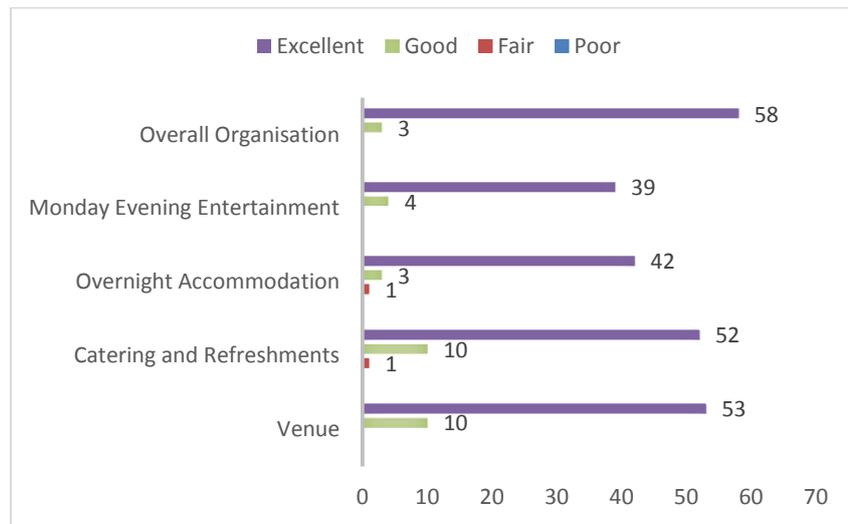
■ Frontline      ■ Word of Mouth      ■ Email  
 ■ ACPPLD Website      ■ Newsletter      ■ Other

**Other:** Via Committee, ACPPLD organiser, attended previous year, On the NEC, Committee Member

**Did you get help with funding the cost of attending the Learning Event?**



**With regards to the venue, how would you rate the...?**



**Comments include:**

Venue	Catering & Refreshments	Overnight Accommodation	Monday Evening Entertainment	Overall Organisation	General
“excellent support from hotel staff”	“food excellent and very organised”	“Room very comfortable”	“BBB is fantastic and enjoyed by all”	“brilliant, slick and effortless by a great team who were very well organised”	“Conference centre extremely helpful”
“room was chilly”	“prompt and efficient”	“top class”	“will be bringing body bingo home with me”	“run like clockwork”	“confusing info re. complimentary taxi from airport”
“everything in one place”	“great choice, food lovely and plentiful”	“rooms very clean and tidy”	“fun and transferable to LD, fun, functional and entertaining with model of a great exercise activity”	“would have liked LD focused events/presentations”	“ appreciated rest breaks and that presentations were limited to one hour”
“Room having 3 screens and microphone was very helpful”	“meals well presented”	“noisy on level 4 - had to be moved”	“It would be good to know the resource and someone who can take the practice”	“venue exceptional”	“ very reasonable price for 2 days”

“Best venue for any conference I've been to”	“superb exceeded expectations”	“comfortable relaxing & calm”	“shame it can't be rolled out across Scotland”		“Liked moving rooms and going outside for bikes”
“nice to be moved rooms throughout the day”	“good options and plenty for veggies”		“Fun, Fun, Funtastic!”		“ would like day 2 to end a little earlier for homeward travel”
“Only downside was distance from the city centre”					“map was great idea, but poster could have been more centrally located”

**Future ACPPLD Annual Learning Events**

**Do you have suggestions for topics for future learn events?**

*“More on cerebral palsy”*

*“Spasticity, tone and postural management”*

*“More research orientated topics – latest research, effective practice, service evaluations etc”*

*“Bowel management and abdominal massage”*

*“Muscle spasticity – botox injections by physio”*

*“Strategies for managing hospital admissions and discharges & LD liaison services with secondary care – improving outcomes”*

*“Development posts in LD physiotherapy (band 5-6) (6-7) – growing the workforce”*

*“Managing complex transitions from paediatric services to adult services”*

*“Postural management findings”*

*“Present Scottish strategy once confirmed”*

*“Special seating posture”*

*“Always happy for more respiratory stuff”*

*“A session on planning/carrying out research in LD physio”*

*“Physio responses to LeDer findings – what service improvement are teams implementing from LeDer findings”*

*“Would be nice if we covered hydrotherapy outcomes”*

*“Developing respiratory care service and pathway and respiratory care skills for community physio in LD”*

“Consent/best interests when people don't have capacity for being in standing frames etc, guidelines would be good!”

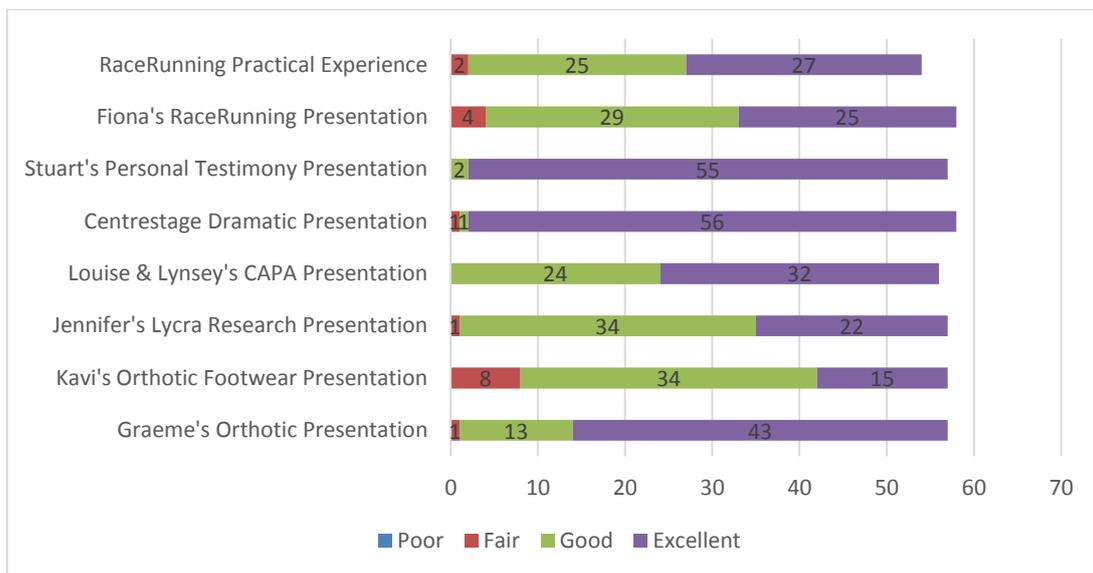
“Wheelchairs – assessment, types of wheelchairs, how to exercise (other parts of the body) in a wheelchair”

“Support workers perspective”

“Therapets/animals – a way to increase physical activity and motivation, communication, mental wellbeing – the evidence/research studies”

**Content of Day 1 – Monday 16<sup>th</sup> September**

**How would you rate the content of the presentations?**



**Comments include:**

**Graeme's Orthotic Presentation:**

*“Increased my confidence to assess first position more thoroughly”*

*“Entertaining and thought provoking, great demo! good practical presentation”*

*“Useful to know force plate and its uses”*

*“Not as LD specific as I wanted but well-presented and opportunity to ask questions”*

**Kavi's Orthotic Footwear Presentation:**

*“Interesting to see a different aspect of healthcare”*

*“Great to hear about such a person-centred, social enterprise model- the other side of the business we often disregard, inspiring!”*

*“Would have been useful to know more about the product, more aware of the design process”*

**Jennifer's Lycra Research Presentation:**

*"Felt a little rushed"*

*"Useful awareness which garments are more practical, which is reflected in study, it was good presentation!"*

*"Interesting presentation and research study"*

*"Really helpful for clinical practice, shame we can't get lycra funded in our area"*

**Louise & Lynsey's CAPA Presentation:**

*"Concept simple clear focused and inspirational, would have liked more LD content, superb session with good mix of media and interaction"*

*"More aware of their resources"*

*"Great resources which are highly relevant, interesting session about a super initiative"*

**Centrestage "Love Activity, Hate Exercise" Presentation:**

*"Outstanding- give them an Oscar!!"*

*"Wow, brilliant - Great to have LD content"*

*"One of the best from my 2 day programme"*

*"I wish there was a society/charity similar in our area, thoroughly entertaining - great show!"*

**Stuart's Personal Testimony Presentation:**

*"You can never beat the voice of someone who has lived experience"*

*"I've actually started looking up local tap dancing classes thanks to Stuart!"*

*"Absolute star! So inspiring"*

*"Would be great to name any accessible organisations used/known about to apply knowledge gained to caseload"*

**Fiona's RaceRunning Presentation:**

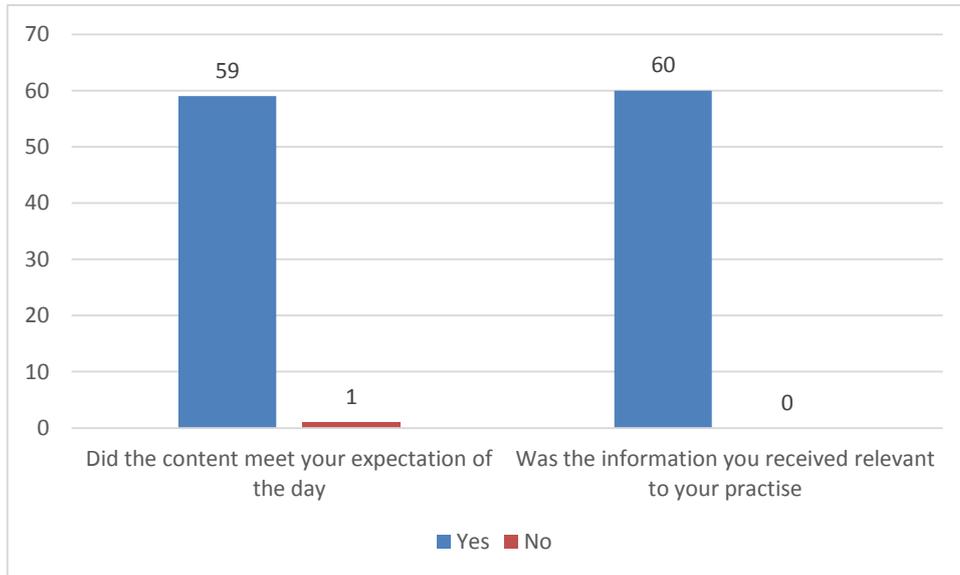
*"A great ambassador for Race Running, very interesting and relevant to our client group"*

*"More info on criteria and exclusion and benefits would have been ideal"*

*"Great enthusiasm very interesting and made me think of how we could introduce a couple of running bikes into our work"*

**Did the content meet your expectations of the day?**

**Was the information you received relevant to your practice?**



**Comments include:**

*“It would have been interesting to hear more about the business process around the Health Collective”*

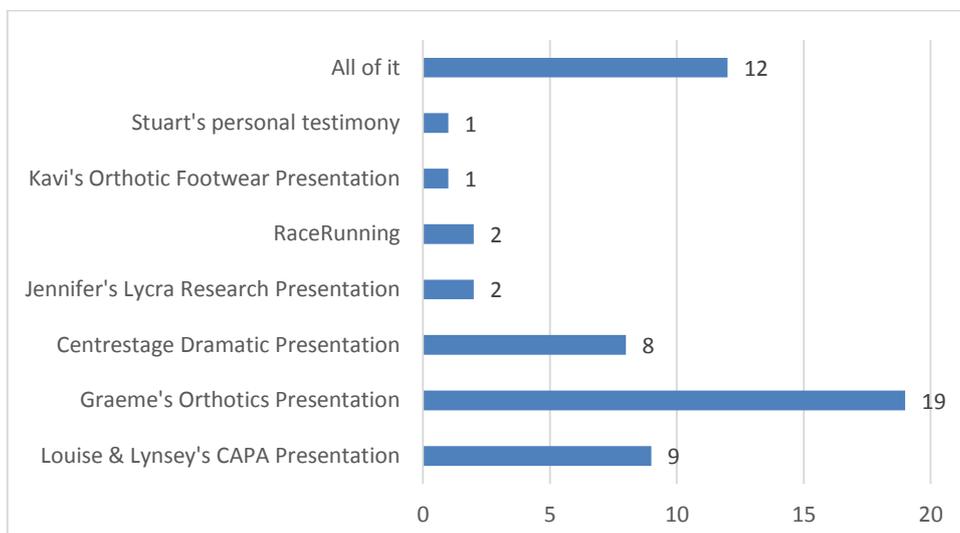
*“Race running - didn't provide valid reasons for inclusion/exclusion for people participating”*

*“Orthotics talks did not give me much info to apply to practice”*

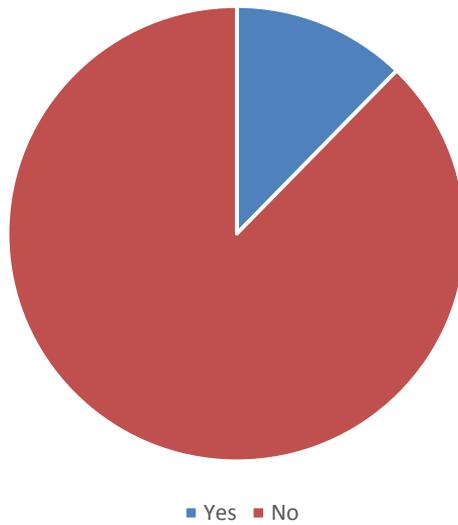
*“Kavi's talk was not quite what I expected. More about product development and coproduction than orthotic footwear.”*

*“Evidence based practice and new research on LD physiotherapy”*

**Which part of the day 1 programme do you feel was the most informative/valuable?**



Were there any parts of programme which did not meet your expectations?



**Comments include:**

*“It would have been interesting to hear more about the business process around the Health Collective”*

*“Race running - didn't provide valid reasons for inclusion/exclusion for people participating”*

*“Orthotics talks have not given me much info to apply to practice”*

*“Kavi's talk was not quite what I expected. More about product development and coproduction than orthotic footwear.”*

*“Evidence based practice and new research on LD physiotherapy”*

**Do you have other comments about the content of the day?**

“Good networking day!”

“Sweets on the table were great idea!”

“Good job Scotland Team!”

“Would be nice to get an idea of how teams are structured”

“Good variety”

“More leading, less listening”

“Thank you for all the hard work done to give us this informative and fun two days”

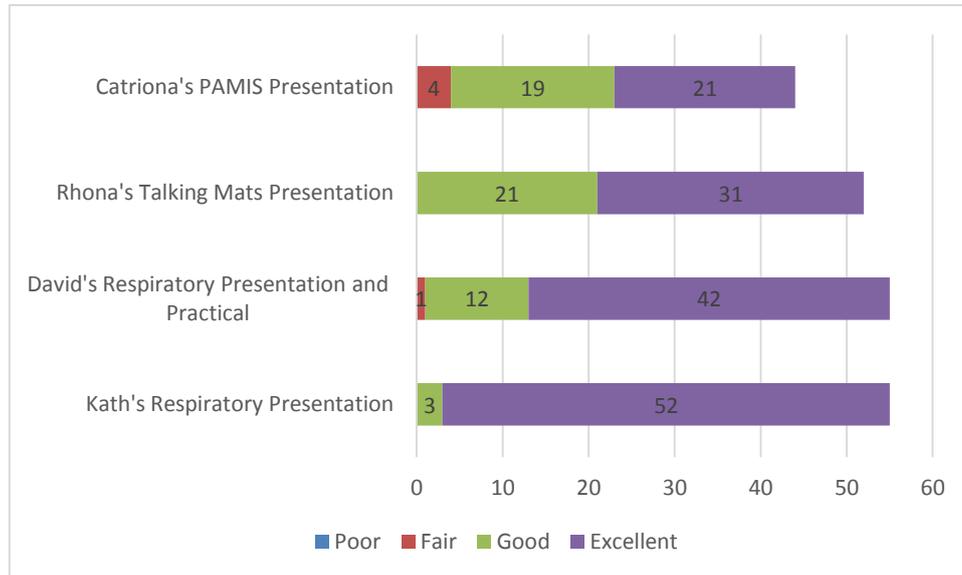
“Very well thought out and useful. Thank you all so much for the opportunity and all your hard work in planning and making it successful.”

“Brilliantly organised”

“Exceptional programme”

**Content of day 2- Tuesday 17<sup>th</sup> September 2019**

**How would you rate the content of the presentations?**



**Comments include:**

**Kath's Respiratory Presentation:**

- "Great concepts and spot on with what evidence is showing"
- "Great insight and overview on the breathing and respiratory system"
- "Great session"
- "Best part of the 2 days - very professional and funny"

**David's Respiratory Presentation and Practical:**

- "Good buzz in the room from this session"
- "I would have liked more focus on the assessment and criteria for issue and review"
- "Really good and thought provoking"
- "Good info but more on indications and how PEP influence in improving function would have been great"

**Rhona's Talking Mats Presentation:**

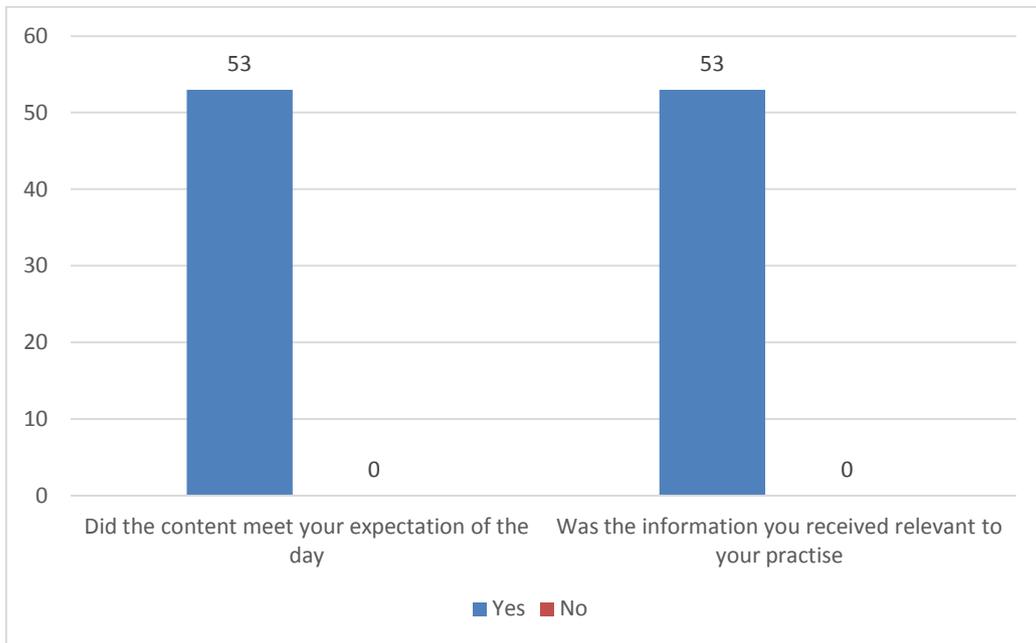
- "Really interesting S&LT team would like further training"
- "Good to see used in practice"
- "We have those - will absolutely use with SLT for goal setting and discussing management with service users!"
- "Very applicable, great tool for communication"

**Catriona's PAMIS Presentation:**

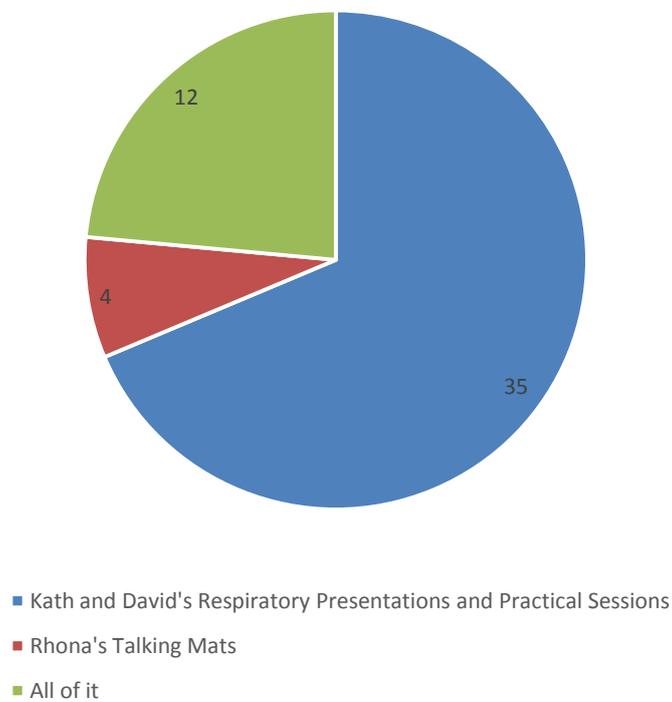
- "Digital passport will be good"
- "Very passionately presented and relevant"
- "Lot of info already familiar to us, therefore could have been shorter"
- "Was a good reminder of why we're here and working for our clients"
- "We need this in England"

**Did the content meet your expectations of the day?**

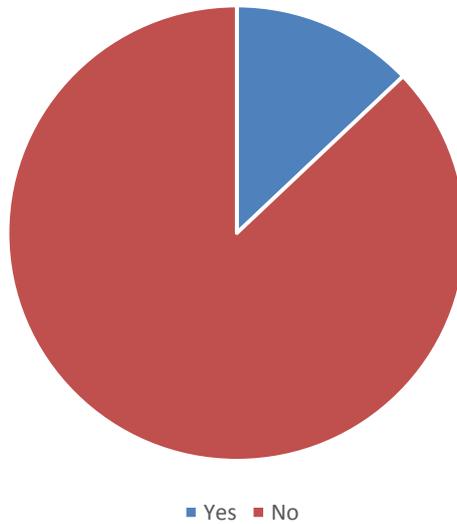
**Was the information you received relevant to your practice?**



**Which part of the programme do you feel was most informative / valuable?**



Were there any parts of the programme which did not meet your expectations?



Do you have any other comments about the content of the day?

*"It's been 2 really informative days. I'm taking so much I've learnt in these 2 days. What a fab event Scotland. Well done and so lovely to see energy and enthusiasm, team work - well done and thank you. See you next year."*

*"The 2nd day was really excellent and more relevant to my practice."*

*"Fabulous learning event - well done and thank you."*

*"Well done to everyone involved you should be really proud of yourselves."*

*"It's such a good opportunity - excellent couple of days - only suggestion for last presentation of day 2 to be shorter for homeward travel."*

*"What a friendly, educational and inspiring couple of days."*

*"Possibly too much sitting down - hard to stay focused."*

*"Excellent work from the lassies in sashes! So enjoyable and useful."*

*"Golden jubilee was amazing venue. Staff were spectacular and running the conference was an absolute delight because of their efficiency."*

*"Flowed well and all speakers were excellent."*

*"For both days I liked how the morning and afternoon sessions have been grouped into similar themes."*

*"Very stimulating, thought provoking and educational. Great hospitality and organisation."*

*"Teaching and practical skills most useful to improve my practice and service. ACPPLD: we need more evidence-based guidelines and please help re-instate eastern region meet-ups!"*

## A view on how to submit conference abstracts, produce posters and present.

By Ingrid Wilkinson



This article shares some tips on writing abstracts, creating posters for conferences and what judges are looking for in submissions. There is not much formal training for abstract submission and this article reflects what I would tell a colleague from my experience.

My name is Ingrid and I am Lead Physiotherapist in Wiltshire Community Team for People with Learning Disabilities (CTPLD) and a SW2 ACPPLD committee member helping to organise the 2020 ALE. Originally, I was asked to write a piece on submitting abstracts and creating posters for scientific conferences because the National ACPPLD Committee very kindly gave me £100 towards attending the European Forum for Rehabilitation Research in Glasgow in 2015 to present our LD frailty poster. I have had more than 20 conference abstracts peer reviewed and accepted as oral and poster presentations at national and international conferences, mostly in my previous job as a research physiotherapist completing a PhD. Last year, I started judging abstract submissions, posters and presentations in my role as a committee member for the Society for Research in Rehabilitation. These include abstracts with quantitative and qualitative methodology, case studies, randomised controlled trials and service development. I really hope that if you are considering submitting your work to a conference that you find this helpful.

### **Abstract submission**

Conference abstracts close several months before the conference to allow judging and preparation. If you are aiming towards a specific conference, think about your project timelines and check the closing dates. Conference abstracts are set out like journal paper abstracts with strictly limited word counts, under set headings that are usually **title, background, aim, method, results, conclusion** and **discussion**. It can be difficult wrestling a complex project into these constrained categories. Many conferences have different types of abstract such as audit or research and they are mostly scored 'blind' without author details on them, usually by several judges. Sometimes 'work in progress' submissions have different, often more lenient, scoring.



### My abstract submission tips.

- Focus on your key message(s).
- Think of a good/interesting title that describes the project and draws people in to read your work.
- Know your conference audience, their interests and motivators. Read successful abstracts as part of your preparation.
- Follow the instructions to the letter, make it easy for tired judges scoring their umpteenth abstract to see how your abstract scores well (or at least adequately) in every section and contributes something original, useful and/or important to the conference.
- Use numbers, simplify language and avoid jargon or overly complex language. Make it interesting and easy for fellow attendees to read when they see it in the conference programme or published.
- Author lists should include everyone who has substantially contributed to data collection, analysis and writing and are a great way to get a publication on your cv. They are either alphabetically listed or with the main author first and supervisors last. Ask co-author's consent to put their name on it and give them time to review it.
- Perhaps it is just me, but I always finish the draft abstract, go to sleep, check it again another day and then get someone pedantic to check it, then check it again and submit!!!



### Poster presentation

Your email reads 'Congratulations, your abstract has been selected for a poster presentation at the conference' but how do you produce one?

ACPPLD has excellent advice on producing posters for ALE and it is similar for most conferences. The organisers state the dimensions and whether it should be landscape or portrait and it is essential to follow this to get the poster looking right next to its neighbours and fitting on the poster boards. Before you start, get inspiration from advertising posters around you and what catches your eye! Less is generally more. This is a very visual medium that should look interesting from a distance.

I follow these steps to produce a poster, first I put the dimensions of the specified size i.e. A1 portrait into the dimensions of the PowerPoint slide. On paper I decide a rough layout of the required sections usually based on the abstract and any graphs, diagrams, pictures, photos etc. It helps it to look more professional if you decide a font style and sizes to use consistently throughout the poster, for the title, section headings, text (mine are usually Arial or Calibri 70, 40 and 28 respectively). Writing a poster as a group can be challenging so now I tend to get the wording agreed in Word (with a strict word limit) to avoid repeated formatting of the poster and a lot of

irritation. Keep the word count as low as possible so that the text is not dense on the page.

When you are at a meeting with posters take some photos of formatting styles that you like and those you don't. Even if you don't find the content interesting these can give you an excellent starting place when designing your own later. Many conferences score posters for a prize and have poster tours where authors have a few minutes to talk about their work and answer questions from a small group.



Most of the bullet points on abstract writing above apply when producing a poster with a few additional ones.

- Think about how you might use your poster to showcase your work, brilliant team etc during and after the conference. Consider placing a small text box at the bottom saying, 'Presented at the 2019 ACPPLD Annual Learning Event' so that when you put it up at another event, on the wall or show an A4 print out to managers/CQC inspectors they can see where it was presented. Get a photo of you proudly stood beside it and the poster looking great in the exhibition to share with colleagues/co-authors.
- You may need to use a corporate template and logos.
- Make sure images and logos are high resolution and not distorted when you cut and paste them.
- Print the poster PowerPoint slide 'scale to fit' on A4, if you can comfortably read all the text the fonts are probably a good size. If it is tiny and the page is full then there is probably too much information.
- When it is displayed people need to be able to read your most important messages from a distance and all of it from about 1metre away.
- Consider the white space in the design and making it eye catching.
- Before saving the final copy, proof read it again and again, it is annoying seeing a mistake when it is printed on A1 paper and you must stand next to it!
- Save the final PowerPoint file and then save as PDF, most printing services want to print from a PDF so the formatting can't get scrambled. You may want to share this PDF file with managers, employers etc so perhaps give it a file name that explains where it was presented, when and the topic.

### Oral presentations

There are many places to get tips on giving a presentation however presenting at a scientific conference is different to many other situations. Presenters usually have a very fixed time slot, such as a ten minute presentation and five minutes for questions. Stick to this very carefully, it is uncomfortable watching people chairing sessions that overrun as they desperately try to stop a presenter who is ploughing on regardless, trying to get through too many slides, in too much detail. As in the other sections, lay

out the slides according to the abstract headings, keep the text simple and formatting consistent and focus on your key messages and outcomes.

Once I have finalised the slides, I practice repeatedly until I can present it at a good pace within the time allowed. Then I stand up to practice so I don't get side-tracked altering things as I go.

At large conferences there are usually rooms for speakers to upload their presentations and check they work well. Videos need particular checking but can work brilliantly to show complexity etc. On the day, it sounds a bit grim, but my advice is to wear a top/shirt that won't show your anxiety in sweat patches (!) and wear clothes that make you feel comfortable and confident! Smile and make eye contact as you present and show off your hard work and hopefully good results!!

Good luck with any abstracts that you and your team submit,  
Ingrid ☺

**Ingrid Wilkinson Hart**

[ingrid.wilkinson@wiltshire.gov.uk](mailto:ingrid.wilkinson@wiltshire.gov.uk)

### .....Why not "Have a go in 2020"

If you want a chance to try out all of this, please consider submitting an abstract to the combined ALE meeting being planned for 2020! They will be peer reviewed and some are usually published in the journal of Clinical Rehabilitation. I have suggested an extra abstract category of 'Evidence into practice' so that any clinician or team can submit an abstract focused on applying high quality research/published guidelines in clinical practice, reporting outcomes and relevant conclusions. There will hopefully be a prize!



### **SW2 Hosting Annual Learning Event 2020 - date to be determined (Sept/Oct).....**

Hosted by ACPPLD SW2, next year's ACPPLD Annual Learning Event will be a little different.

We have taken the opportunity to join forces with a rehabilitation conference running in SW2 region (TBC) in September / October 2020, hosted by the British Society of Rehabilitation Medicine and Society of Research in Rehabilitation ( final dates/venue are yet to be determined).

The joint conference has a theme of **'Living and ageing with complex disability'** and will be preceded on the first day by a clinical study day dedicated and focused on LD and complex disability. There will be ACPPLD and joint social events and opportunities to submit abstracts to the peer reviewed conference to showcase your work.

This is a chance for us to highlight the health needs of people with LD and LD physiotherapy within rehabilitation medicine and research. We hope that you will be able to attend, share your experience and learn from each other at this unique learning event.

The organising committee will get the definitive dates out to all as soon as they are able. The previous dates mentioned in recent communications / flyers issued at ALE Glasgow will most probably now be altered, so keep an eye out on our ACPPLD website for updates.....

Best wishes

The ACPPLD SW2 2020 organising committee,;

Beth, Nicola, Vas, Carrie, Heather, Sue, Hannah, Carrie, Marion and Ingrid.



National Executive Committee Contact Details

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