



Supporting the Osteopathic Community & Equipping members for Leadership

Lessons learnt in the UK

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The British Osteopathic Association

In the beginning

- The *first* British Osteopathic Association
 - Established in 1911 as the UK arm of the AOA
 - Register of BOA members for public reference
- BSO founded by John Martin Littlejohn started to graduate locally trained osteopaths in 1917
 - Established the Incorporated Association of Osteopaths in 1925
 - IAO became OAGB in 1935

Competition and consolidation

- Osteopathic bodies flourish!
 - Other schools of osteopathy sprang up, a number of which formed other associations and registers
 - General Council & Register for Osteopaths formed 1936
 - Guild of Osteopaths formed 1971 to promote the profession
- Lobbying for statutory regulation gains impetus in 1970s
 - Prince and Princess of Wales engaged in cause
 - 1993 Osteopath's Act passed by Parliament
 - General Osteopathic Council formed in 1998
 - Unusually for a regulator – with brief to 'promote' and 'develop'

From 'promote' to 'protect'

- Concern over letting genie out of bottle encouraged associations to merge
 - OAGB, BOA, Guild of Osteopaths and others in merger talks
 - Formed the current British Osteopathic Association
- But..
 - GOsC exists to protect the public
 - The BOA exists to protect the profession
- So who's promoting and developing osteopathy?

British osteopathy today

- BOA represents 70% of UK's 4,700 registered osteopaths
- Registered osteopaths has grown by c. 2,000 since 2000
- Statutory regulation means some automatic policy seats
- Substantially self employed profession
 - Small practices - risk of isolation
 - Lack of business training creates challenging career start
- Acceptance as a mainstream health profession still poor
 - Small evidence base
 - Manual therapies dominated by physiotherapists
 - National Health Service raises resistance to 'private health'



GROWING YOUR ASSOCIATION

What is a membership association for?

- Make its members 'employable'
- aka Create the conditions most likely to encourage patients to use osteopaths

My osteopath

- Qualifications
- Education geared to safe & effective patient outcomes
- Working relationships with fellow medical professions

..has the right base of skills

..is always up to date and developing better skills

- Continuing Professional Development/Fitness to Practice
- Mentoring and peer support
- Clinical development

..is someone I recommend to others

..has high standards of delivery and ethics

- Evidence/Research
- Promotion
- Osteopathy as a brand
- Stakeholder relations

- Professional and ethical standards
- Disciplinary processes
- Regulation

Key elements of association strategy



Association lifestages

Startup

- Members form Council
- Elected officers
- ..do all the work!

Developing

- Small staff team
- Council members partially executive
- (Confusion over roles!)

Mature

- Professional staff
- Council focus on strategy and governance
- Need for clear focus on goals

Development focus

Startup

- Recognition
- Clinical and business support for members
- Training courses
- Engaged members

Developing

- Political lobbying
- Stakeholder relations
- Public promotion
- Standards and Ethics
- Investment in evidence/research
- Disciplinary (to protect reputation)
- Qualifications
- Continuing Professional Development
- Branches & SIGs

Mature

- Statutory regulation
- High level engagement in policy development
- Close partnership with fellow professions
- Trusted public brand
- Open and transparent governance
- Effective executive
- Cross professional education strategy
- Engaged and active community of members



LEADERSHIP

Application of leadership

- Clinical teams
- Practice management
- Thought leadership
- Branch development
- Council member
- Committee/workgroup chairmanship
- Policy development
- Stakeholder management

Institutional leadership

- We all work with other osteopathic bodies, each with their own particular goals
 - Educational establishments
 - Membership associations
 - Regulators
 - Research institutes
- We all need to work **together** to progress osteopathy in our countries and globally

Don't be afraid to lead

- Memberships should be run democratically
 - Open management and governance
 - Transparent election processes
 - but define what skills you need and allow the membership to choose between candidates
- But you can't run any organisation by popular vote alone
 - Don't be afraid to lead and inspire
 - Council members are elected to make decisions, not to run opinion polls
- Leadership is more about behaviour than setting rules

Association leadership behaviours

- Consult broadly, then make a decision
- If the decision is shown to be wrong, change
- Communicate, explain and 'sell' decisions
- Work as a team with your fellow osteopathic organisations
- In any team with a common goal, it doesn't matter who leads, if they can lead

Some closing thoughts

- Know where you're going as an organisation
- Be realistic about your plans to get there
- Work with your members and staff
- Spend as much time looking outside osteopathy as within the profession
- Run your association like a business
- Show leadership - inspire

From 'protect' to 'promote'

- BOA's new Mission

To unite, promote, develop and support the osteopathic profession

- BOA's new Vision

To gain a Royal Charter for the osteopathic profession by 2018

- BOA's new identity..



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Thank you for listening

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