

# THE LINK

— NEWSLETTER —



Issue 29

Spring 2011



- Readers' Comments • Education Section •
- Research Section – Poetry and Prose •
- Dates for your Diary •

# from the editor

Welcome to the Spring edition of The Link.

Well here I am back from my Myanmar holiday, or should I say “experience”. I feel refreshed spiritually but certainly not physically after experiencing heat, dust, pollution, complete change of diet, sleeping patterns and crowded overnight bus journeys. From a spiritual perspective I did lots of meditation, had a lot of time to myself and learned a great deal about myself and Buddhism. I certainly didn’t find any complementary therapists on my travels, although at times I needed one.

When I think of my role as regional group liaison I realise how little I know the members who attend the groups and how each group operates. The recent regional group survey provided me with some kind of idea but I realised I needed to become more involved. It was therefore a great opportunity when Chris West said she was going to do a talk for the West and South Yorks group and asked me if I would like to accompany her and meet the group members. As you can see from Chris’s account in her “Letter from the Chair” we were made very welcome and had a very enlightening experience. Meeting the members; listening to their points of view and concerns and generally feeling part of the group showed me how important regional groups are to the national association. Keep those excellent group reports coming in – this is such good communication. I feel that without the regional groups we wouldn’t have a national association with a voice to be heard.

After my visit to the Yorks group I would really like to visit as many of the regional groups as possible. This is my plan for the next year or two. I will shortly contact the regional group leads to find out when I can visit and I hope that by doing so we can strengthen the links with the executive committee and all the groups nationally.

Looking forward to meeting you all

*Vedant Wood*

## Contact the Editor: Vedant Wood

tel: 020 8863 0261 – e-mail: [vedantwood@aol.com](mailto:vedantwood@aol.com)

51 Roxborough Road, Harrow, Middlesex, HA1 1NS

Copy deadline for the next Newsletter is: 15th of June 2011

Next issue will be published in July 2011

## YOUR LINK NEEDS YOU!

**The Link is YOUR newsletter and I need YOUR contributions!**

If you can provide an insight into your therapy; or would like to write an article on your religion’s perspective on spirituality and complementary therapy; or report on events that have happened in your region; an experience you would like to share or send in some poetry then I need to hear from you.

Please send all contributions to me either by post  
or by e-mail to [vedantwood@aol.com](mailto:vedantwood@aol.com)

THANK YOU – Vedant

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# Letter from the Chair

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Dear Everyone,

I am so glad that the weather is now appropriate for the Spring issue. With the emergence of the sun, the buds and the blossom comes a renewed energy for the activities of the year ahead, as well as an incentive to stop and smell the flowers for a little while.

Vedant and I attended the latest meeting of the West and South Yorkshire regional group last week. It was a delight to meet everyone and to listen to the concerns and issues which arose from the discussion. I am sure that these are replicated across the association. One theme that emerged was that the voice of the complementary therapists often goes unheard and unheeded when it comes to issues of policy and decision making. An important question for me is: How do we speak with a credible, professional voice that people listen to? How indeed when so many of the therapy associations and those vying to take the lead in regulation are in contention? The unifying thing we have is our specialty of Palliative Care. How can we build on our potential strength as an association to speak and be heard? The answer I am sure lies in the Regional Groups – the place where therapists

meet to support each other and discuss common concerns. We then need to communicate concerns across the association and try and find ways we can work together to support therapists in their work on the “shop floor” and also to influence policy at a higher level.

We have a membership of 1700 people but only 150 attend regional groups. Why is that? Answers on a postcard please to Vedant Wood ☺

The programme and registration form for conference will be out soon but don't forget to put the date in your diary now (14th -15th September). The CT Leads Group meeting is in London on 20th May, please register now if you wish to attend. Information from Ruth Davies at NeDv357@aol.com

I wish you all a healthy, happy and productive Springtime.

*Chris West*

## Regional Group News

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### **The South East NACTHPC Meeting November 2010**

SERG's final meeting of 2010 was at Canterbury College in the heart of Canterbury. A good start was made for those of us using the Park and Ride as the college has its own bus from the P & R to the college – so it was door to door service – and our 'guide' for the day Katrina, was a brilliant onboard hostess!

Some 20 odd of us attended the day and all of us thoroughly enjoyed the hospitality of the college. The day kicked off with brief introductions and a conference report to all those who were not at the conference by those who were.

Tracey Kennedy then led us into the fascinating world of crystals. Those of us who remembered had brought one of our own crystals – those of us who forgot had a wide choice from Tracey's own collection. Maybe the jury is still out about should we be plundering the earth for the gems but the journey Tracey took us on from cleansing our crystal to using them was both magical and very enjoyable.

Lunch was in the College cooked by both professionals and students and excellent it was too!

The afternoon started up in the library and in one of the enclaves Katrina took us through current legislation and how it affects us. I don't think any of us really like getting involved with the nuts

and bolts of the legislation side of our business but Katrina gave us a lot to think about and really brought home the fact that if we do not keep up to date and aware of what is going on – not only in the various departments of our government but also those of the EU – not only the way and how we work could be affected now but also future therapists and their chance of survival could be drastically affected.

Our final event of the day was a visit to The Lanfranc Theatre for a contemporary dance performance – “Freedom of Expression” part of the College's “Museum Maker Project”. To have a 'private' performance just for us was something quite special and it was truly enthralling. Afterwards we had a chance to meet the performing arts students and talk with them and their tutor – I think they had as many questions for us and what we do as we had for them – so a good interchange was had by all.

Thus we came to the end of a wonderful study day amongst the students and tutors of Canterbury College. Thank you all and in particular Katrina and Ruthanne who put the study day together.

*Martyn Yates*

### **The North East NACTHPC Meeting January 13th 2011**

This was held at Holistic Cancer Care Centre, James Cook University Hospital, Lynne Gray, Complementary Therapies

# Regional Group News

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Lead for the North East Cancer Network (NECN), spoke on the Complementary Therapy (Safeguarding Practice) Measures.

## Complementary Therapy (Safeguarding Practice) Measures

The guidelines set standards in:

- (a) Clearances – Criminal Records Bureau clearance, clearance for working with vulnerable adults (and children if appropriate), Professional Indemnity Insurance and an agreement to adhere to policies and procedures
- (b) Qualifications
- (c) Written information for patients – a statement that CTs are not an alternative to conventional treatments, a description of the therapy, a description of arrangements for delivery and a statement of the relevant qualifications or a declaration that the therapist does not possess such a qualification
- (d) Written informed consent
- (e) Equipment and materials – Lynne informed the group that a meeting is to be held with NECN CT Steering Group to discuss the new measures, which were agreed in August 2010. The review date for the measures is June 2011. Lynne, Glynis and Kathryn had been invited onto the Steering Group.

Lynne reported that the Internal Validation Report by the National Cancer Peer Review which took place on September 30 2010 had been released and showed 100% compliance by the sites/establishments who had submitted evidence and attended the Review (i.e.; Friarage Hospital/Holistic Centre JCUH; Butterwick Hospice Care; Hartlepool Hospice; Teesside Hospice). Established links with NACTHPC, Network Allied Health Professionals and Rehabilitation Groups and the Supportive and Palliative Care Groups were cited in the report as reinforcing robust communication.

Lynne reported that Sarah Rushbrooke, Network Nurse Director of the NECN, is looking to develop a Complementary Therapies (CT) Group within the NECN because the work of complementary therapists within cancer care crosses the boundaries of a number of existing NECN groups. The CT NECN group would be a network-wide strategy group with clear objectives and goals, including setting standards for education. Lynne informed the group that a meeting is to be held on 26th January 2011 with NECN CT Steering Group to discuss the new measures, which were agreed in August 2010 (The review date for the measures is June 2011). Lynne, Glynis and Kathryn had been invited onto the Steering Group.

Glynis Finnigan said it would be important to ensure representation from all organisations which deliver therapies in cancer/palliative care. Lynne agreed, adding that the views and suggestions of those stakeholders who are unable to attend due

to lack of time and resources could be delivered to the CT NECN Steering Group on their behalf by representatives of NACTHPC North-East. Alternatively, their names could be put forward for nomination to be invited onto the group.

Members at the meeting all agreed that, currently, there are therapists practising professionally who are unaware of the specific safety implications of working with cancer. There is an urgent need to establish an effective level of awareness of conventional cancer treatment side-effects and safety implications, acute case management and disease progression within all complementary therapists who come into contact with cancer patients. This would ensure complementary therapists know their boundaries, integrate therapies into patient care safely and appropriately, and refer patients swiftly for urgent medical attention if required.

Glynis Finnigan stated that there are courses in palliative care/cancer for complementary therapists across the country, but standards vary widely. Sue Jones said that establishing recognised standards for such courses is very important. Kathryn Almond agreed and added that standards of initial training also need to be continually developed and upheld, not least to ensure newly-qualified therapists know to seek further specific training before they become involved with this client group.

It was agreed by the group that there is no reason for a nursing qualification to be a pre-requisite for practising CTs in cancer. It was agreed that it is safer to have robust, current and appropriate training for appropriately qualified complementary therapists than to assume that a nursing background prepares a therapist to practise CTs in cancer care.

All agreed that therapists currently working within cancer care, especially practitioners who work in isolation, should continually update their knowledge specific to cancer care and access some form of supervision, mentoring and peer review. It was agreed that bereavement and loss training in particular could help support therapist, patient and carer.

It was agreed that there could be difficult time and cost implications for voluntary organisations and individual practitioners, especially volunteers. Self-employed practitioners could also have difficulty both sourcing and funding such support.

Glynis Finnigan said that the introduction of the new measures could be daunting for some established practitioners who have been providing a good service, many on a voluntary basis. Support would need to be available to help with the implications of the measures and any subsequent transition. If practitioners feel unsupported they may leave/retire as a result, and that could have the effect of putting services at risk. Sue Jones suggested a phased introduction of such measures would limit this effect and help individuals and organisations manage budget, support services and training implications.

# Regional Group News

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## **GRCCT Advisory Statement re: Guidelines for the Use of Complementary Therapies in Cancer Care**

Glynis Finnigan reported that Carol Mayes Peer Review Co-ordinator NECN had forwarded her an advisory statement from the General Regulatory Council for Complementary Therapies (GRCCT). The GRCCT is one of two voluntary regulatory bodies for CT practitioners in the UK, the other being the Department of Health backed Complementary and Natural Healthcare Council (CNHC). The statement states that following a meeting with the Acting National Co-ordinator for Cancer Peer Review, 'CAM practitioners who hold current registration with either the GRCCT or CNHC will be seen to meet criteria in relation to patient safety'.

Lynne said that currently the Department of Health recommends that, where the CNHC registers the professional discipline in question, anyone who wishes to access complementary therapies should consult with someone who is CNHC registered.

Lynne said that this endorsement suggests there are implications for all organisations which are overseen by the DoH, including the Cancer Network, and that there is a possibility that at some point membership of CNHC will be expected of all practitioners working in palliative care. As it costs £45 per person per year to register for one therapy, plus a further £10 each for a second, third and fourth therapy, this has serious cost implications for therapists.

It was agreed by all that, though robust regulation of CTs is to be welcomed, volunteers are already required to be insured and registered with a professional body and there is a danger that another set of subscriptions could make volunteering too expensive.

Lynne said she would contact Maggy Wallace, Executive Chair of the CNHC, to see if organisations which rely on volunteer therapists could apply for block registration for their practitioners at a reduced rate. Lynne will report back to the group with any response.

*Glynis Finnigan*

## **The South West NACTHPC Meeting February 18th 2011**

The February 2011 gathering of the South Western Group of the NACTHPC was held at the Weston Hospice care, Jackson-Barstow House, Weston-Super-Mare, Somerset. Therapists had travelled from all over the region to attend the meeting, and 15 of us gathered around the table.

Jean Burgess, Regional Co-ordinator for the South West, opened the meeting and then handed over to Yvonne Dey, from Weston Hospice Care to continue proceedings in her role as Chair of the meeting. Yvonne began with the all-important house-keeping details and then led us into the round of introductions. It was clear from the careful attention and the notes being made that people would be networking over lunch.

The Speaker on this occasion was Dawn Redwood, a member of the National Association of Spiritual Healers who has trained in reflexology. Dawn's topic was "Looking after the Therapist". Self-care is not a new issue, and it is certainly one that is discussed often enough, but how frequently do we, as therapists, take the trouble to look after Number One?

Dawn told us of the Middle English word "*Halon*" meaning 'to make whole' that became the modern word "healing". So, make yourself whole and then set about the task of healing others.

Dawn also discussed the importance of a therapist's intent. Intent begins with a positive intent to help patients/clients thus sending them away better than where they arrived. Interestingly enough, the effect of both positive and negative intent has not only been measured, but photographed. Masuru Emoto has become world famous for his photographs of water that has been exposed to both positive and negative influences and then frozen to reveal its crystalline structure. In the case of the positively influenced water, beautiful symmetric shapes result. Negative influences produce ugly fractured forms.

Consider that human beings are around 97% water and then imagine the effect negative thoughts can have on you. We all know how negativity affects us and when you have worked to raise your sensitivity it is clear you compound the influence both good and bad.

Dawn also discussed "clearing" your healing space; a sensible practice which does make a significance difference. Consider how your space may be affected by your client's emotional outpourings, and might then affect and influence you as a practitioner.

It seems that the issues surrounding Regulatory bodies are continuing to frustrate practitioners. The meeting heard that medical professionals, such as nurses, pay membership fees running into hundreds of pounds. The concern for therapists seems to be not just which regulatory body to belong to, but how to afford ever rising fees. Many feel this will eventually force alternative practitioners to simply stop practising.

The meeting was given an update on the aromatherapy inhalers which are now being tried out, with a roll-on applicator for topical application to pulse points.

The meeting closed around two o'clock with a sense of satisfaction. Yvonne had created a pleasant and welcoming environment at Weston in which we had all enjoyed Dawn's talk. Furthermore, the discussions we had had, made it clear that the provision of palliative care in the South West Region was in safe and caring hands.

*John D. Ritchie,  
Volunteer Complementary Therapist,  
Prospect Hospice*

# Readers' Comments

Dear Vedant,

## Re: The Link, issue 28

I was concerned to read the account of a meeting at the Propect Hospice, Wroughton, where doubts were expressed over controlling the dose of inhaled essential oils. They concluded that as doses could not be controlled accurately then it is not a safe method of administration.

### I have outlined below some thoughts on inhaling aromatherapy oils

Obviously essential oils will be inhaled by the client during application to the skin as in massage and it is widely accepted that inhalation and dermal application are the two main application routes that can be safely used by aromatherapists with no medical training.

Is the concern over using essential oils in vapourisers/ aromastreams in general areas/patient rooms, etc. or using oils to relieve specific symptoms of respiratory distress or in giving personalised so called 'aromasticks'?

Some literature I would direct them to for further information:

Tisserand R, Balacs T (1995) *Essential Oil Safety, a guide for healthcare professionals*, Churchill Livingstone, Edinburgh, p31, p234 \*  
Bowles E.J (2003), *The Chemistry of Aromatherapeutic Oils*, p118-9; p132-3

Both of these include references for further study on the uptake of oils from the air by human volunteers and make the point that absorption rates depend on many factors including the individual oil and even how much is absorbed in the treatment room by towels, carpet, curtains etc.

\* Robert Tisserand concludes that 'from a safety standpoint, inhalation presents a very low level of risk' and 'it is very unlikely that there is any risk involved in the normal use of a few drops of essential oil in burners, vaporisers or in steam inhalations.' Any risks may arise from prolonged inhalation (several consecutive hours) of concentrated essential oil vapours (steam inhalations or direct from the bottle) which I think would be very unlikely and common sense. The other risk is for people with CNS problems such as epilepsy as essential oils are readily absorbed into the CNS via the olfactory membranes –aromatherapists should already be trained how to use oils in these situations.

I have also attended a course taught by Rhiannon Harris on the Use of Essential Oils in the Cancer Care environment when all aspects of general airborne diffusion of essential oils were discussed, including whether essential oil diffusion can be hazardous to patients and/or staff. In summary the conclusions were, and I quote:

- risk of provoking respiratory difficulty and/or allergy in certain individuals is considered low if diffusion is low and intermittent.
- diffusion of essential oils to create a pleasant ambience dose not necessitate continuous vaporisation e.g. 15 mins diffusion repeated every 3-4 hours. Low levels of fragrance are more pleasantly perceived than concentrated fragrance.
- the use of an aromastone appliance is very appropriate as small amounts of oil can be diffused and cleaning is easy.
- having looked at the evidence, the benefits of essential oil diffusion far outweigh any potential risks and what risks there are can largely be avoided.
- there is increasing evidence to show that exposure to pleasant fragrances in the workplace can enhance mood and productivity amongst staff. We have found no examples of studies that found negative reporting from diffusion of essential oils in a hospital environment.

Rhiannon quotes two papers reporting benefits using fragrance exposure much higher than quoted:

Tysoe P (2000) The effect on staff of essential oil burners in extended care settings. *International Journal of Nursing Practice* 6:110-112

Cannard G (1996) The effect of aromatherapy in promoting relaxation and stress reduction in a general hospital.

*Complementary therapies in Nursing and Midwifery* 2: 38-40

Rhiannon also looked at using essential oils to relieve respiratory distress using nasal inhalers, ointments and gels, chest rubs and steam inhalation – I guess another subject entirely but I would be happy to pass on any information if required.

The popularity of using essential oil inhalation with patients has increased with the introduction of so called 'aromasticks/ smelly sticks, etc'. These are blank 'Vick' type inhalers with absorbent wicks to which the patient's choice of oils is added. They can then be taken away by the patient for use as required. Both the Royal Marsden (*The use of aromasticks for nausea in a cancer hospital*) and the Christie Hospital (*Aromasticks in cancer care: An innovation not to be sniffed at*) are about to publish research papers on their use.

The Marsden have already published one paper:

Dyer J et al (2008) *A snap-shot of current practice: The use of aromasticks for symptom management*. *International Journal of Clinical Aromatherapy* vol 5, issue 2

We use both aromasticks and aromastreams at our hospice to very good effect and would be happy to provide further information if required.

Kind regards,

Stella Reeve, Complementary therapy Co-ordinator  
St Richards Hospice, Worcester

# Network of Professional Association Meeting

24th March 2011

Attended on behalf of NACTHPC  
by Christine West and Vedant Wood

**A cross fertilisation meeting between representatives of the various professional associations and representatives from the management team of Help the Hospices**

Summary of points directly relevant to NACTHPC members:

- Hospice Awareness week will run from 8-14 October and will include World Hospice Day. All associations are asked to consider if they would be able to contribute to the raising of awareness of palliative care during this week. If you have any suggestions for raising awareness of complementary therapies in palliative care, please send them to: [nacthpc@hotmail.com](mailto:nacthpc@hotmail.com)
- HtH has produced some credit card sized cards entitled "Strength in Numbers", which are printed with key messages that can help with raising awareness. You can obtain these direct from HtH
- Widening access through nurse leadership. Another round of major grants is now available for projects which work to include under-represented sectors of the community, such as homeless and disabled people, in hospice care
- HtH is developing a Managed Learning Environment for all sectors of the membership. This includes the updated CLIPC (Current Learning in Palliative Care) resources which can be accessed via the website at [www.helpthehospices.org.uk/clip/intro.htm](http://www.helpthehospices.org.uk/clip/intro.htm) These tutorials are in 15mins "coffee time"

chunks, build in skill level, can be used online or offline for CPD and are available to everyone

- In preparation for the NHS Outcomes Framework, Help the Hospices are asking associations to send in relevant information and case studies to show how service developments contribute to measurable outcomes for patient services
- HtH is developing Intelligence Hub, a hospice information service and invites associations to submit research, information about new projects, case studies, policy documents or publications to inform this service which can be viewed at [www.helpthehospices.org.uk/our-services/intelligence-hub/](http://www.helpthehospices.org.uk/our-services/intelligence-hub/)

Chris West

## For Information

For anyone who may be interested in further information re the article on

"A Tentative Mechanism for Healing"

in last issue, positive health have just moved to a new website

[www.positivehealth.com/article/healing/a-tentative-mechanism-for-healing](http://www.positivehealth.com/article/healing/a-tentative-mechanism-for-healing)

[www.positivehealth.com/author/toni-bunell-ph-d](http://www.positivehealth.com/author/toni-bunell-ph-d)

## "THE LINK" NOTICE BOARD

Please note that while the Association is pleased to include details of courses, forums and events in The Link newsletter it is unable to accept responsibility for the quality or the content of these courses. The charges below only apply to courses and events etc. that are profit making. Any courses, events etc. which are free and of benefit to members will be advertised with no charge.

To place an advert on the Notice Board in an edition of 'The Link' send details of your forthcoming event to the editor:

Vedant Wood, 51 Roxborough Road, Harrow, Middlesex HA1 1NS.

Tel: 0208 863 0261 e-mail: [vedantwood@aol.com](mailto:vedantwood@aol.com)

**Rates: ¼ Page: £10 (per issue) ½ Page: £18 (per issue) Full page £35 (per issue)**

Cheques should be made payable to NACTHPC and reach Vedant together with the course/event details no later than 15th June 2011. Next edition published July 2011.

# Education Section

## Laughter Yoga Workshop

When we were planning the annual conference, Tat suggested Charlotte Eaton as a speaker to talk about Laughter Yoga. She had heard her doing a workshop at a Mind, Body, Spirit event and thought it sounded great. (She didn't take part – she was in the next room but the laughter was captivating). The conference theme was finalised as **A Practical Spirituality – Loss, Life, Love and Laughter** and we invited Charlotte to come along to speak about laughter. I am happy to say Charlotte accepted our invitation and, in turn, invited me to come to one of her workshops to experience Laughter Yoga first-hand.

I felt keen to experience this but was a bit apprehensive about maybe having to “force” myself to laugh and wondered if it might be awkward.

The class was hugely enjoyable. I wasn't quite sure how it would work but I was expecting a fair amount of laughter. Charlotte made it easy to join in and built the exercises gradually to give us a nice lead up to the real belly laughs. I did feel a bit self-conscious at times, having to fake the laughter when it didn't come naturally, but Charlotte had already talked about this in her opening brief so it felt o.k. and perfectly safe. The body cannot tell the difference between real and fake laughter and so you reap the benefits anyway. The benefits of laughter include improvement in brain and immune system function, reduced stress and blood pressure, and alleviation of depression and pain.

Charlotte was calm, reassuring and had an infectious laugh that lit up her whole being. Everyone in the class embraced the exercises easily and we were laughing from the outset. Some people were soon crying with laughter, hugging their bellies and begging for mercy!

The session ended with a deep relaxation and a short debrief. I realised that I had spent a very intimate hour with this group of women but we hadn't exchanged names or spoken very much. Somehow I felt more connected to them and knew more about them than if we had spent the hour conversing with words.

I felt great – really relaxed but energised, like I had had a real good workout. I felt light in body and mood and would definitely do it again.

I hope that the therapists who come to conference will see the possible benefits of this therapy for use with carers, staff and patients.

*Chris West*

## Lifebulb Certified Laughter Yoga Leader Course comes to Leamington Spa: Saturday 28th to Tuesday 31st May 2011

### A GREAT OPPORTUNITY FOR COMPLEMENTARY THERAPISTS

Laughter yoga is a creative and uplifting addition to a therapeutic portfolio. It offers both career progression and/or personal development. This four-day course not only trains you to facilitate laughter sessions, it also presents the unique opportunity to observe, assist and practice facilitating in various public and private settings: either medical, educational, events or corporate, ensuring that you are confident and experienced to run your own sessions in the setting which is most appropriate to you.

“ I honestly found every aspect of the course engaging and valuable. Ten out of ten. ”

*(Andy Wakeman, head masseuse and lifebulb-trained laughter leader)*

“ I feel more alive, more in the moment... A very simple catalyst to help people turn up their inner light and feel ALIVE. Ten out of ten”. A\*\*\*\*\* ”

*(Fiona Miller, holistic therapist and lifebulb-trained laughter leader)*

“ Have had the most amazing four days doing the laughter yoga course. Have grown in more ways than I expected. It totally exceeded my expectations. ”

*(Narinder Moore, Wheel of Wellbeing and Balance Procedure practitioner and lifebulb-trained laughter leader)*

### Certified Laughter Yoga Leader Training

**from Saturday 28th to Tuesday 31st May 2011**

**Bath Place Community Venture and various other settings in Leamington Spa.**

**For full information, prices and booking see: [www.lifebulb.org](http://www.lifebulb.org) or contact [sharon.hart@lifebulb.org](mailto:sharon.hart@lifebulb.org) Tel: 07940 700 880**

### Cancer & Palliative Care for Complementary Therapists 1 June 2011, £60 Code: CTC0611 St Christopher's Hospice, London

Statistics show that 1 in 3 people will develop cancer and that around 30% of all people with a cancer diagnosis will use complementary therapies alongside their conventional treatment. This study day is aimed at qualified therapists (aromatherapy, massage, reflexology) who have an interest in, or are new to, this specialist area.



Topics will include:

- Cancer and the cancer journey
- Current orthodox treatments
- Impact upon the person
- 'Why me?' and communication issues
- Adaptation of complementary therapies
- Self-care for the therapist

Application will be made for this course to be approved by Complementary Therapists Association (CThA) at an advanced level. NB No practical element will be done on the day.

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## Research Section

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### PRESS RELEASE

#### Research in Healing Therapy

#### A new research partnership between Freshwinds Charity and University of Birmingham

Freshwinds Charity in partnership with the University of Birmingham have been awarded a grant from the Big Lottery Research Programme to undertake a study on the benefits of Healing Therapy in patients diagnosed with IBS (irritable bowel syndrome) and IBD (inflammatory bowel disease) within a hospital setting. This study was built on results gathered from an audit of a volunteer healing clinic offered by members of The Healing Trust/NFSH ([www.thehealingtrust.org.uk/](http://www.thehealingtrust.org.uk/)), at a local hospital.

Worldwide the use of complementary therapies has been increasing. In the UK it is used by around 28% of the population. In particular the study will evaluate its effectiveness in symptom control and improvements in quality of life of patients. Results from this study will help to inform physicians, health managers and commissioners on the efficacy of healing therapy and its role within a conventional medical care setting.

Freshwinds is a registered charity based in Birmingham supporting adults and children living with life threatening and life limiting conditions, as well as those who have experienced social exclusion since 1992. Amongst its many projects, is the integrated medicine project which offers complementary therapies with medical support to palliative care clients at its Selly Oak offices, as well as in the community. Freshwinds also founded the Children's Complementary Therapy Network (CCTN) with more than 360 members worldwide. The CCTN recently launched the 'Tell you Doctor' poster campaign in the UK (<http://cctn.freshwinds.org.uk>).

For further information, please contact Dr Rhonda Lee, Tel: 0121 415 6670, email: [dr.lee@freshwinds.org.uk](mailto:dr.lee@freshwinds.org.uk), or see website, [www.freshwinds.org.uk](http://www.freshwinds.org.uk)

Freshwinds, Prospect Hall, 12 College Walk, Selly Oak, Birmingham, B29 6LE. UK. Registered Charity No. 1079968

## Help the Hospices Conference

26-28 September 2011

Bournemouth

### CALL FOR PAPERS

Share your research, innovation and good practice

Deadline for submission of abstracts:

8th April 2011

For more information go to:

[www.helpthehospices.org.uk/conference2011](http://www.helpthehospices.org.uk/conference2011)

## NACTHPC

### 11th Annual Conference

### A Practical Spirituality

### Loss, Love, Life, Laughter

on Thursday 15th September 2011  
at University of Warwick, Coventry

Preceded by

networking and update event  
and social dinner

on Wednesday 14th September

Put the dates in your diary now  
more details to follow ...

## Paradox of Our Times

Today, we have bigger houses and smaller families  
More conveniences, but less time  
We have more degrees, but less common sense  
More knowledge, but less judgement  
We have more experts, but more problems  
More medicine, but less wellness  
We spend too recklessly, laugh too little, and drive too fast  
Get too angry, too quickly, stay up too late, get too tired  
Read too little, watch TV too often and pray too seldom  
We have multiplied our possessions, but reduced our values  
We talk too much, love too little and lie too often  
We've learned how to make a living, but not a life  
We've added years to life, but not life to years  
We have taller buildings, but shorter tempers,  
Wider freeways, but narrower viewpoints  
We spend more, but have less  
We've been all the way to the moon and back  
But have trouble crossing the street to meet the new neighbour  
We've conquered outer space, but not inner space  
We've split the atom, but not our prejudice  
We write more but learn less, plan more, but accomplish less  
We've learned to rush, but not to wait  
We have higher incomes, but lower morals  
We build more computers to hold more information,  
To produce more copies, but have less communication  
We are long on quantity, but short on quality  
These are times of fast foods and slow digestion  
Tall men and short character  
Steep profits and shallow relationships  
More leisure and less fun  
More kinds of food, but less nutrition  
Two incomes, but more divorces  
Fancier houses, but broken homes

## This is the Paradox of our times today

That's why I propose, that as of today,  
You don't keep anything for a special occasion  
Because every day you live is a special occasion  
Search for knowledge and read more  
Sit on your front porch and admire the view,  
Without paying attention to your needs  
Spend more time with your family and friends  
Eat your favourite foods and visit the places you love  
Life is a chain of moment of enjoyment  
Not only about survival  
Use your crystal goblets  
Do not save your best perfume and use it every time you feel you want it  
Remove from your vocabulary "one of these days" and "someday"  
Let's write that letter we thought of writing "one of these days"  
Let's tell our family and friends how much we love them  
Do not delay anything that adds laughter and joy to your life  
Every day, every hour, every minute is special  
And you don't know if it will be your last

*South East Regional Group  
of  
The National Association of Complementary  
Therapists in Hospice and Palliative Care*

*AN INVITATION TO ALL*



*SUMMER STUDY DAY  
THE LABYRINTH*

*Learn about the labyrinth and its uses  
Experience working with the labyrinth  
Make your own clay finger labyrinth  
Walk the Pilgrims Hospice Labyrinth  
An interactive study day*

Thursday 30th June 10am – 3.30pm, Pilgrims Hospice Canterbury  
Study day fee: £10

For more details contact: Martyn Yates  
Tel: 01304 842943 email: martynathome46@yahoo.co.uk

# Touch, Cancer and Care : A New Perspective on Care giving

## An afternoon presentation and discussion with William Collinge

Touch and massage techniques are among the most comforting forms of support in cancer because they can help alleviate pain and discomfort as well as side effects of treatment. However, many people who care for a loved one with cancer are reluctant to use touch as a form of support out of concern for causing harm, or feeling they just don't know what to do.

In this presentation William Collinge will discuss the results of the Caring and Cancer project, a research study sponsored by the National Cancer Institute, United States of America. The project introduces a new perspective on care giving for friends and loved ones of cancer patients, and an exciting new way to make care giving more satisfying for the giver and more effective for the recipient. The project teaches safe and simple ways to incorporate touch into care giving at home that anyone can learn and apply.

Dates: 14th June 2011

Time : 2.00pm – 4.00pm

Venue : Strathcarron Hospice, Denny, Scotland

Cost : FREE

### Facilitators:

William Collinge, PhD, is principal investigator of the Caring and Cancer Project, and author of the new book *Partners in Healing* (Shambhala Publications). He is also executive producer of the DVD program *Touch, Caring and Cancer : Simple Instruction for Family and Friends*. He is a scientific review consultant for the National Institutes of Health and has worked extensively in the field of cancer support, complementary therapies, and mind/body medicine.

For more information visit : [www.collinge.org](http://www.collinge.org)

### Ideal for :

All health care professionals and complementary therapists working in supportive and palliative care.

Please contact : Catherine Haggerty, Strathcarron Hospice, Randolph Hill, Denny, FK6 5HJ

Tel : 01324 826 222 / Fax : 01324 824 576

Email : [catherine.haggerty@nhs.net](mailto:catherine.haggerty@nhs.net)

# NACTHPC Executive Committee

Name	Committee Role(s)	Contact Details
Ruth Davies	CT Leads Group Liaison	NeDv357@aol.com Mobile: 0776 624 1890
Tatt Dickie	Project Lead: Role Profiles	tatttickie@yahoo.co.uk
Jenny Gilbert	Secretary	nacthpc@hotmail.com Mobile: 07905 133 242
Michele Gordon	Northern Ireland Liaison Project Lead: Data Set	michele.gordon@nihospicecare.com Work: 02890 781 836 ext 3079
Islay Grieve	Treasurer Conference Organiser	isgrieve@talktalk.net
Sue Holland	Minutes Secretary	wonderwoman02@googlemail.com Mobile: 0773 773 4496
Erinna Turner	Education and Research Lead	erinna_turner@hotmail.com
Christine West	Chair Website Liaison	nacthpcchair@hotmail.co.uk c/o St Lukes Hospice 385 Kenton Road, Harrow, HA3 0YG
Vedant Wood	Editor, The Link Regional Group Liaison	vedantwood@aol.com Mobile: 07939 144 174

## NACTHPC Regional Groups

Group	Contact	Email & Telephone	Address
Greater Manchester	Anita Mehrez	kameld5@aol.com 0161 432 7381	Rehabilitation Unit, Christie Hospital NHS Foundation Trust Wilmslow Road, Manchester M20 4BX
Lincolnshire and North Lincolnshire	Sarah Holmes	sarah.holmes@stbarnabashospice.co.uk 01522 518 209	St Barnabas Hospice Lincoln LN12 1RE
Midlands	Ruth Davies	nedv357@aol.com	Mary Stevens Hospice
North East	Glynis Finnigan	glynisfinnigan@butterwick.org.uk 01642 607 742	Butterwick Hospice Care Stockton on Tees
Northern Ireland	Michele Gordon	michele.gordon@nihospicecare.com 02890 781 836	Northern Ireland Hospice
Scottish	Jenny Gilbert	01324 826 222	Strathcarron Hospice Denny, Stirlingshire FK6 5HJ
South Eastern	Martyn Yates (temporary)	martynathome46@yahoo.co.uk	
South West	Jean Burgess	poppyburgess@tiscali.co.uk 0775 489 5397	Prospect Hospice, Wroughton, Swindon SN4 9BY

Group	Contact	Email & Telephone	Address
West and South Yorkshire	Pam Colley	pam.colley@suerydercare.org 0113 278 7249	Sue Ryder Wheatfields Grove Road, Headingley, Leeds LS6 2AE
Central Southern England	Anne Bennett	anne.bennett@stwh.co.uk 01243 755 833	St Wilfred's Hospice Grosvenor Road Chichester PO19 8PF

For further information or enquiries regarding Regional Groups contact:

Vedant Wood 07939 144 174 or 0208 863 0261

## Dates for your Diary

Details of more events, education and training at [www.nacthpc.org.uk](http://www.nacthpc.org.uk)

Date	Event/Venue	Contact
7th May	5th Children's Therapy Network (CCTN) Conference Birmingham	<a href="http://www.freshwinds.org.uk/cms/5th-cctn-conference/">http://www.freshwinds.org.uk/cms/5th-cctn-conference/</a>
16th - 22nd May	Dying Matters Awareness Week	<a href="http://www.dyingmatters.org">www.dyingmatters.org</a>
28th - 31st May	Certified Laughter Yoga Leader Training Bath Place Community Venture, Leamington Spa	07940 700 880 sharon.hart@lifebulb.org <a href="http://www.lifebulb.org">www.lifebulb.org</a>
1st June	Cancer and Palliative Care for Complementary Therapists St. Christopher's Hospice, London	020 8768 4656 education@stchristophers.org.uk
14th June	Touch, Cancer and Care: A New Perspective on Care Giving Strathcarron Hospice, Denny, Scotland	01324 826 222 catherine.haggerty@nhs.net
18th June	Healing for People with Cancer Axminster Awareness Centre	01297 32331 Kizzy Brown info@awarenesscentre.org.uk
19th June	Healing into Death and Dying Axminster Awareness Centre	01297 32331 Kizzy Brown info@awarenesscentre.org.uk
30th June	Summer Study Day – The Labyrinth Pilgrim's Hospice, Canterbury	01304 842 943 Martyn Yates martynathome46@yahoo.co.uk
2nd July	Delivering Complementary Therapies in a Statutory Setting Angela Buxton Venue near Euston Main Line Station	weditit@virginmedia.com
14-15th Sept	NACTHPC 11th Annual Conference A Practical Spirituality - Loss, Love, Life, Laughter	<a href="http://www.nacthpc.org">www.nacthpc.org</a>
26-28th Sept	Help the Hospices Conference Bournemouth	<a href="http://www.helpthehospices.org.uk/conference2011">www.helpthehospices.org.uk/conference2011</a>