

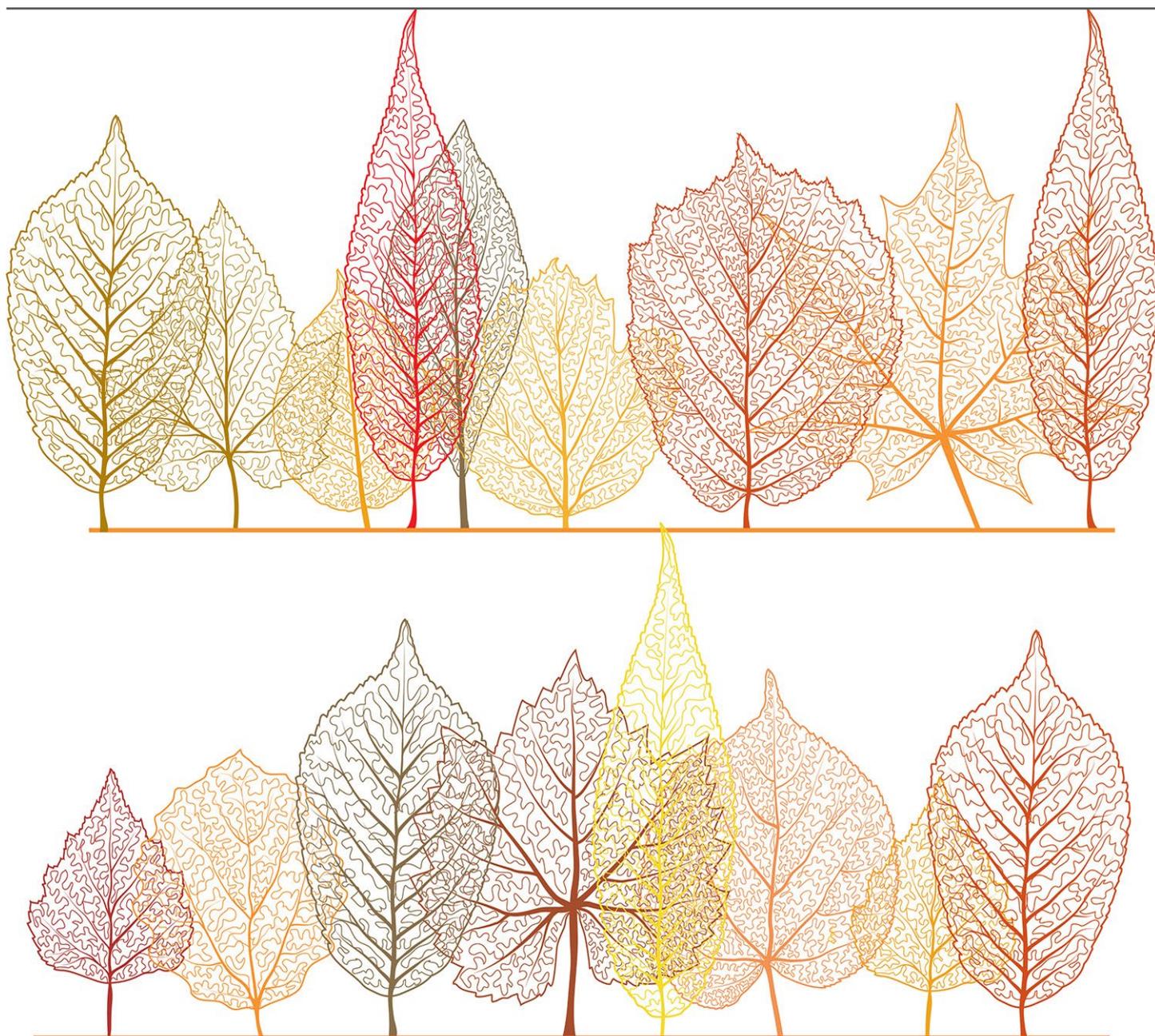
THE LINK

— NEWSLETTER —



Issue 39

Autumn 2013



-
- Regional Group News • 2013 Conference Reports •
 - Poetry and Prose • Courses and Conferences •

from the editor

Welcome to the Autumn edition of The Link.

What a wonderful conference. Uplifting, thought provoking and meaningful. As you can read from the reviews it certainly and positively affected some, if not all of you. What a lovely and yet a sad way to say goodbye to Chris West who has been such a great chair for the association. I will certainly miss her, not only as the chair but as a colleague, a friend and a great proof reader. At the same time it's exciting to welcome new faces into new places on the committee. With all their youth, skills and experience I'm sure they will lead NACTHPC successfully into a growthful future

Vedant Wood

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Copy deadline for the next Newsletter is: 1st of October 2013

Next issue will be published January 2014

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

THANK YOU – Vedant

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www.nacthpc.org.uk



We are now on Facebook!

Sign up at:

[compthery@groups.facebook.com](https://www.facebook.com/compthery@groups.facebook.com)

This is a private group. You will have to be approved by the moderator.

The posts can only be viewed by members of the group.

Letter from the outgoing Chair

Wow, what a ride!

After 7 years on the executive committee, 6 of those as Chair, I stepped down at the AGM in September. What a lovely, affirming atmosphere in which to do so – there is nothing quite like a conference of therapists, especially if it is a NACTHPC conference.

My time as Chair has been one of discovery and development for me personally, hard at times but I have had amazing encouragement and support from members and also from people outside the association with whom we have worked.

We still have some way to go with our larger projects but I am confident that we will achieve these in time. We now have a new website, administrative set-up and a new constitution to help the daily business run more smoothly.

I would like to thank everyone for the privilege and absolute pleasure of being your Chair and hand over to your new co-chairs, Gaenor Evans and Sarah Holmes, with a real sense of excitement for the future of NACTHPC.

I look forward to seeing many old friends (and new) at future meetings and continuing to be part of this unique and wonderful association of diverse and beautiful people called NACTHPC.

Chris West, outgoing Chair

Letter from the Co-Chairs

The falling leaves and fresh winds indicate that autumn is definitely here, after what felt like an unusually long summer of incredibly wonderful weather.

It seems fitting that we, the Co-Chairs of the NACTHPC, write our first words to you after a long successful 'reign' as Chair by Chris West, who led the association with an admirable combination of professionalism, warmth and what always seemed like apparent ease.

Chris handed over to us at the 13th conference which took place last month at the University of Warwick. Although fewer delegates attended than hoped, feedback received confirmed that the conference was insightful and inspirational.

We chaired our first committee meeting on Monday 14th October during which we developed a strategy for the coming year and the two main priorities are to:

- Establish a steering group to start work on the second edition of the National Guidelines for the Use of Complementary Therapies in Supportive and Palliative Care

We have a short list of people who have expressed a wish to be a part of the group, however please do let us know if you are interested in being involved.

- Organise the 2014 conference

The hard work starts here! We have already agreed on a theme for next year's conference, now we have to put that idea to reality. We would urge you to consider attending the conference. It always proves to be a thought provoking day and of course provides an excellent forum for networking.

Finally, as we follow in Chris's footsteps, we look forward with excitement to our new involvement in the future of the association. Our aim is to serve you, members of the NACTHPC, and to promote best practise of, and further integration of, complementary therapies in hospice and palliative care.

Please feel free to contact us with questions, comments and ideas.

Gaenor Evans & Sarah Holmes, Co-Chairs

Regional Group News

The Central South Regional Group NACTHPC

Wednesday 16th October 2013

Our annual Study Day was held at Phyllis Tuckwell Hospice and attended by 34 therapists from a range of organisations. The day, which was organised by Bridget Purser, Complementary Therapies Co-ordinator at the hospice, proved a great opportunity for meeting others and sharing experiences of working in palliative care.

The day began with a practical session of **Arts Counselling** led by Helena Harper, a professional Transpersonal Arts Counsellor who has experience of working both in the hospice and in a mental health setting. Helena shared some fascinating case studies and insights of how arts counselling can work on a one-to-one basis, in groups and workshops. We had the privilege of seeing a series of artwork painted by a patient showing how the creative process using art making and conversation can help explore possibilities and enable change.

We were then invited to create our own artwork, on the subject of a tree, using a variety of mediums including paint, crayons, chalks, clay and collage. We were able to discuss our experiences with each other – and we all felt that this hands-on process helped us appreciate the role of arts counselling in a palliative care setting.

After a break for lunch, we came back together as a group for the afternoon session.

Mary Atkinson, a complementary therapist who offers training



helping to create balance and understanding through the use of therapies.

“A full and fascinating day, thank you, good variety of topics.

“A very interesting and stimulating day.

“Enjoyable and informative day, of much value.

Many thanks to everyone who attended and helped made the day such an enlightening experience on a personal and professional level.

Anne Bennett



sessions in **Story Massage**, led the first afternoon session. Mary talked about her experiences of working with the adults and children affected by the tsunami in Japan in 2011. She showed photographs from her visit and discussed the powerful impact of caring touch for the local people who had never experienced massage before.

Story Massage combines basic massage strokes through clothes, with storytelling. As we discovered for ourselves, it is fun, interactive and has many possibilities for therapeutic connection. Mary's talk and demonstration offered a simple and effective way of communicating with others through touch. For more information on the benefits and applications of Story Massage please visit www.storymassage.co.uk

Our final session was entitled **Complementary Therapies and Mental Health**. This important topic was led by Carol Dugdale, a registered healer and trainer with many years of experience working in the area of mental health in a variety of settings. Carol challenged us to explore our own thoughts and views and talked with depth and feeling on a complex subject that can be hard to tackle.

More patients than ever seem to be affected/diagnosed with a mental health illness and Carol stressed the need for everyone to look at the individual person behind the diagnosis. Carol generously shared her experience and knowledge to help offer us ways of



Changing Faces – Colin Darling

The first day of this year's conference got off to an inspirational start with a talk from Colin Darling who is the Midlands Regional Officer of Changing Faces. Changing Faces is a charity supporting people living with conditions that affect their physical appearance. The charity works not only with individuals but with their families and with the professionals who care for them. Through their work they aim to promote equal opportunities and fair treatment for all, irrespective of physical appearance.

Colin spoke passionately about the work of the charity. As therapists working in palliative care we are all familiar with patients who are living with scars and disfigurement as a result of surgical treatment or cancerous conditions; sometimes it can be easy to become a little complacent about our own beliefs and prejudices. Colin's presentation, with some very graphic images, certainly made me think again about my approach, and that of society at large to people who have a 'different' or 'unusual' appearance. The work of the charity includes challenging stereotyping and outright prejudicial behaviour, encouraging inclusion and educating for change. Much of the work takes place in schools and workplaces.

Colin encouraged us to think about our attitudes through a simple activity where we each singled out a group member and stared at them. We then discussed how it felt to be the victim of that stare. He followed this up with video footage of how people react to different appearance, particularly facial disfigurement, not just through staring but by looking away, displaying embarrassment, covert staring and double takes. Making an effort to look at someone in a 'normal', open and friendly way may not always be easy, but can make a huge difference to an individual.

There were heart warming stories about the difference that can be made through the work of Changing Faces, whether through counselling and emotional support, or through access to specialised make up and education about how to apply it which has enabled many people to regain self confidence and face the world again.

There are many aspects to the work of the charity, all of which can be explored in greater detail at www.changingfaces.org.uk where a number of resources such as 'Living with Disfigurement' are available free. There are also links to specific sites such as the Vitiligo Society and details of the Face Equality Campaign. If you weren't able to be at the conference, do have a look at the website where you can access the short film 'Leo' recently shown in cinemas around the country encouraging people to challenge their assumptions about facial disfigurement.

Colin ended by outlining to us how referrals could be made to the charity and by giving us some idea of the wide range of resources

available, many of them free through the website. His talk laid a very good foundation for those which followed the next day on the same theme.

Ann Goddard

Altered Images – Dr Max Watson

When I saw that Dr Max Watson was speaking at the conference I was determined to attend. He was presenting "Altered Images" and he immediately talked about one of his patients, Anna, who had a breast tumour that was very visible. To Anna it was "an alien growing on her body". She had always taken very good care of herself. She couldn't see this person; the image she had of herself was not what she saw in the mirror. Her self-concept was very strong and what she saw was not who she was. We probably all know someone like her – maybe even ourselves?

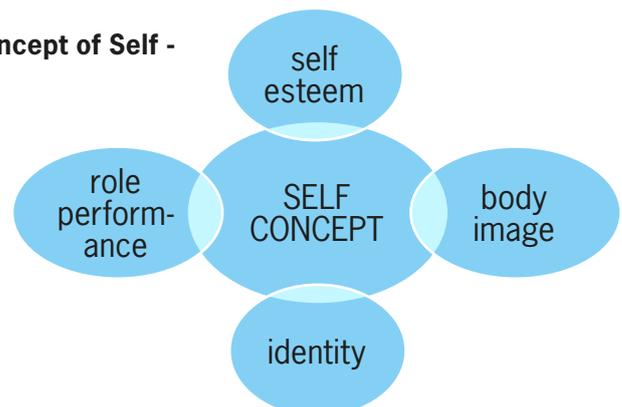
Anna's daughter was getting married and she desperately wanted to be there. She had been imagining this special event since her daughter was born. But she felt she could not bring the uninvited guest, the tumour. She was the mother of the bride not the tumour. She was distraught that she was unable to go to the wedding.

He said that when journeying with patients, we were simply witnesses and very often patients teach us the most, not just about them and their illness but also about ourselves and how we learn when we make mistakes.

Self-perception – we constantly self-assess who we are, which affects the image we hold of ourselves and our ability to function. It greatly influences our health status. The dimension of self – who am I? Who do I want to be or to do? How am I perceived by others? How well do I like myself? Dr Max talked about this with such penetration I could feel myself already asking these questions.

Self-expectation – Self-expectation is developed unconsciously early in childhood and is based on images of role models such as parents. Resilience is developed. Building resilience in small things helps us deal with significant things.

Concept of Self -



These concepts/components of self-concept are not just relevant for anyone with a sense of an altered image, this “mixture” is very important for all of us. This interrelationship/mixture makes up our concept of “self”. Our self-ideal is a perception of behaviour based on personal standards and self-expectation(s).

Identity – for example our name, it grows with us and as it develops and changes, it changes us.

Body image – is an attitude about one’s physical attributes, characteristics, appearance and performance. Our body image is dynamic.

Self-esteem – we make judgement(s) of personal performance and compare it with our self-ideal. LOVE is the currency of self-esteem. Our self-esteem is so dependent upon self-perception in all our various societal roles.

There are many factors affecting self-concept – altered health status, experience, developmental considerations, culture, internal/external resource, history of success and failure, crisis, life-stressors, coping strategies, aging, illness, trauma. Altered body image occurs when the person finds unnatural or unexpected body changes difficult to accept on both a personal and societal level.

Patients are admitted to hospices because disease is causing their body to malfunction and disintegrate with “insults” such as fungating, malodorous wounds, vomiting and faecal incontinence, profuse diarrhoea and vomiting, subsequently undermining patients identities as people causing them to lose their sense of worth.

When assessing it is very important to find out if the patient wants to discuss their perception of body image. Quite often, health professionals can be uncomfortable discussing the effects of body changes from a psychological perspective.

Talking about “Anna”, Dr Max said there were expectations from health professionals to tell her how to live with “it” when she knew she couldn’t. Looking for solutions was not possible. There was a tumour with a small person attached. We cannot predict what the issue may be and it could well affect relationships and how patients interact with family and friends. Research has shown THE MORE accepting relatives are the less distress there is for the patient. Good relationships, resilience learnt together from the past gives a better outcome. If someone asks the patient with advanced disease about body image don’t disempower – trust in their resilience (Ramsey *et al* 2002).

Patients reported that when they are no longer able to control their body functions, elimination, movements, it threatens their self-identity. Such thoughts as “I no longer recognise myself”, “I feel I am not the person I see in the mirror” can have a huge psychological effect.

Head, Neck Disease(s) – our faces, our expressions are one of the most important aspects of us because in communication it is how

we relate and sense how someone is feeling. Swallowing can be a big problem – again potentially socially isolating. How can we respond? One of the issues for head/neck disease is smell. Can we still see the person, the individual, does the smell get in the way, apart from how they look? How can we help them and their family?

Breast cancer, both male and female, can have a huge effect on self concept. Hair loss, tiredness, vomiting, weight loss and the impact of treatment on intimate relationship. Conversations of survival can help patients get back to some “normality”. Being willing to listen to the patient is so important even when it is difficult for us as professionals to do so. Complementary therapy can really help with the unconditional touch in massage and the use of essential oils which helps so much with odour.

As complementary therapists we can support and help them manage by observing respect during therapy sessions. Pampering is very important and our touch as therapists can be affirming, healing. Acknowledging expressions of negativity helps patients recognise their strengths and explore alternatives.

Can we improve their self-esteem by being kind to their body, affirming all they have achieved?

Professionals should affirm their patients identity, role and value by listening to who they ARE, not who they WERE. Contact the self by listening, communicating, responding to “cues”, being open, non-judgemental, committing to the conversation and displaying empathy.

With obvious disfigurement, make good eye contact and see the person as opposed to the wound. This tells them they are socially acceptable.

AVOID brush-offs, e.g. “others cope”, “it isn’t noticeable”. It is WHAT THE PATIENT SAYS IT IS. Do not dismiss the problem.

Dr Max showed a short video to emphasise his talk, and reminded us that “patients are their own healers, we are not their healers”.

And... Anna went to the wedding due to the support and encouragement she received and the resilience she always had. It gave her the day she had always dreamed of and died a few weeks later.

I am sure I have missed a lot, but hopefully have got down what Dr Max did say as near as. Two words he kept repeating was self-perception and resilience. To say he was inspiring doesn’t do him justice but he, I suspect, wouldn’t want much else said. Thank you Dr Max.

Lynn Grounds

Reflexology Lymph Drainage – Sally Kay (1)

As a Lymphoedema Nurse Specialist, I was particularly interested to hear Sally Kay present her research relating her approach to reflexology and lymphoedema. Sally gave a very engaging and

enthusiastic presentation – her sheer joy of the unfolding of the results apparent. Sally presented her findings:

- How her theory and practice developed
- Breast cancer related lymphoedema
- Six people who all showed an amazing loss of fluid after their four treatments
- Overview of the MYCaW follow up
- Future plans to develop the technique and funding for this development
- Sally critically analyzed her study and identified some of its limitations

I thought this was such exciting work – considering the number of people that are affected with lymphoedema and that working on the feet would be much less invasive for MLD therapy.

I really hope that the long term results are equally successful. Obviously this is a small study but with such exciting potential. I wish Sally every success and now I want to learn reflexology so that I can access her course. Good luck Sally!

Janet Le Sueur

Reflexology Lymph Drainage –Sally Kay (2)

I recently attended the NACTHPC annual conference. It was my first time and what a great experience it was. The pre-conference “joining instructions” were very helpful and set the standard for the whole event. Warwick University was an ideal venue, centrally located and most pleasantly landscaped, with the accommodation and meals being of a good standard.

Enough of the pre-amble! My main reason for writing is to say a huge thank you to all of the speakers who’s presentations, for me, were extremely informative and above all, inspirational. I would like to reflect particularly on the presentation given by Sally Kay, reflexologist.

Sally Kay is a reflexologist who has pioneered a technique that stimulates the lymphatic reflexes on the feet to help with the management of secondary lymph oedema following breast cancer treatment. Her presentation was of great interest to me as a reflexologist and employee of The Fountain Centre (a charity supporting cancer patients and their families and carers) at The royal Surrey County Hospital, Guildford.

Sally gave a brilliant account of her career background, her research and her trials and outcomes. The results appear to be of great benefit in the reduction of the symptoms of secondary lymph oedema and therefore a significant tool for treating post operative breast cancer patients.

Since The Fountain Centre sees a large number of patients who fit the criteria for this form of reflexology, they have invited Sally to host an education day at The Fountain Centre for 32 of their therapists. We are all very much looking forward to our date in December, with hope that we can take the learned skills forward to the benefit of our clientele.

Carol Morley

Reaching Your Full Potential – Ryan Walshe and Steve Adair

When Ryan was introduced, my first thought was “How is this young man going to pass on the experience about his testicular cancer to an audience consisting of mainly females. However, he soon dispelled my concerns by launching into the common vocabulary used by the male population and referred to his “balls”. He was very clear and open when expressing the fears and difficulties he had to face up to with his disease and also how angry he had been about not being taught about the signs and symptoms of such a disease. During his treatment he had time to reflect on the situation and said that if he survived he would dedicate his life to helping and educating other young men and boys about this disease; that it’s easily detectable and highly treatable. This is by no means an easy task but to date it certainly seems that he has done so.

His project called “Talking Testicles” has been introduced as a possible discussion subject in schools and colleges and he has managed to educate over 4000 15-19 year olds. In doing so he reported that he had helped at least 2 boys to be aware of the fact that they had a lump in one of their “balls” and by early treatment, saved their lives.

His key message is “Have you checked for lumps?” which certainly hits home, not only to the young men, but to all of us. He envisages changing the perception of the word CANCER, not only for young men, but for everyone. I felt that the way he talked about his disease, how he managed it and how he has formed his future was a lesson to all of us. This young man seems to have “balls” for anything. Well done Ryan.

Steve Adair gave a very impressive talk on how people can reach their full potential, even in the case of facing cancer. He mentioned how his family learned to cope with his mother’s cancer diagnosis and how they were never asked how they were managing during such a difficult period. He talked about how difficult the effect was on the family unit both from a psychological and emotional aspect. It was quite fascinating how the points he was making about a person’s self image being so important in the maintaining of peace of mind and reaching potential, also fitted in with the other previous speakers and the theme of the conference.

Vedant Wood

Being in the present moment – Alan Watts (1)

The final session of the conference was with Alan Watts, sound therapist and musician. He brought with him a range of different musical instruments which he actually didn't play. The beauty of his presentation was in its simplicity. He used his voice, his guitar, basically three chords and a heart centred approach that had us all eating out of his hands.

He told stories of his encounters with patients and families and then he demonstrated his approach by, very simply, singing their names. This reminded me of when I used to sing to my children to soothe them or to help them get to sleep when they were babies. But aren't we all still babies at heart? To have your name softly, repeatedly, melodically repeated is mesmerizing and deeply affecting.

One particular story has stayed with me: how he was able to calm a lady experiencing the distressing symptoms of terminal agitation, just by singing her name. He then wove in a few things he knew about her life, for example, that she had been a teacher, and then sang this back to her. Having previously been mute, a small voice said "I tried". Her responsiveness was beautiful and made me realise again everything that we know in complementary therapy, that less is more and that there is beauty in simple, heartfelt connection.

He also spoke of his involvement with the families at the bedside and how he encourages them to join him in his simple melodies. None of this is high tech wizardry, far from it. It is a gentle, empathic, joining with and walking alongside the patient and their loved ones as they near the end of their life.

To end the session he invited us all to join hands with our neighbours and sing "I love you" to each and every person in the lecture theatre. Having just experienced the power of his work we all did exactly as he suggested. What a wonderful end to a fabulous conference. My first and certainly not my last.

P.S. I bought Alan's CD "*Into the Light*" and I have chanted my way to work ever since. What an excellent way to start the day! Thank you Alan.

Jan Holden

Being in the present moment – Alan Watts (2)

The last presentation of the conference was, for me, the main attraction at this, my first NACTHPC conference. I am currently a student with the College of Sound Healing and interestingly, for me the last speaker of the day brought refreshment to my soul and spirit.

Alan Watts works as a sound therapist with children and adults both elderly and young in settings and areas of special need, severe mental health disorders and palliative care. His past working experience in social work, child protection and running a children's home, led him to further qualify in complementary therapy as a

sound healer and also a crystal healer. His aim is to use sound and vibration to help patients and their families to creatively express their feelings and connect with the present moment.

Alan's introduction to the topic was delivered in a straightforward, honest and direct manner. I was reminded that one of the requirements in a complementary therapy session is to surrender our own intent and allow the Divine force to flow, bringing connection to the person's inner sacred space where peace and a sense of wellbeing can reside. Healing with sound is about vibration and resonance and being aware that we can do this using instruments, and in particular, our own voice, which is the musical instrument we were born with.

Alan spoke of his work with joy and enthusiasm, bringing in case histories to explain the changes made, not by plan and process, but by doing what we can in a beautiful way with what we have. Specifically, this may mean singing along with the person's chosen songs from their era, or those that remind them of a good time they had. There is a song for every occasion and human experience, relative to us all. A particular example given was "This could be the last time" by the Rolling Stones. Alternatively, a connection can be made by singing the person's name and honouring and affirming them with personalised chant.

Alan gained our involvement and participation by asking us to stand and groan on the out breath (a release to prepare) followed by sounding the Indian scale (a journey through the chakras) to the background of a harmonic drone from an interesting instrument.

The session finished with all of us arranged in two groups and singing to each other the words "how I love you". It was an uplifting and unifying experience. It was a good note on which to close the session and also the conference.

Feeling good after this session, the long journey home at rush hour seemed easy. Following on the next day I listened to the CD's I had bought (in aid of St Luke's Hospice) to continue my own self care with sound, and the quiet space to allow the vibration to go inside to bring renewal to my body and soul.

Healing with sound is largely a forgotten and disregarded health-care practice, and as one of its firmest advocates, I look forward to seeing its recognition and growth in all our communities

Susie Parry



Seven Wellbeing Centre Ltd

Thai Hot Poultice Massage – 21st November 2013

A largely practical workshop, this training covers all you need to know to be able to give a full body massage using the Thai hot poultice – a bundle of warmed herbs and oils. This can be combined as a special package with bamboo massage to include a full kit at a discount.

Daoyin Tao Back Massage – 30 November 2013

A unique blend of Chinese acupressure and western massage techniques. It is an advanced energy massage of that works to release stress and tension and helps to relieve neck, back and shoulder pain, inducing deep relaxation. A treatment lasts approximately 30 minutes and does not require the removal of clothing, ideal for busy working clients who may wish to have a treatment during their lunch break. Applicants will have a qualification in anatomy and physiology and some form of body work (ie. Aromatherapy, reflexology).

For those who wish to complete the full practitioner programme, this will commence again in February next year

Acupressure – January 2014

This ancient art involves using the fingers and thumbs to stimulate the body's natural healing abilities. The points used are the same as those used in acupuncture, but without the needles. This benefits those with needle phobia and the very young or old who have complex problems. It is simple to learn and apply and can be used to help relieve pain, stress and nausea. This workshop is suitable for complementary therapists, nurses and carers.

Bamboo Massage – 18th February 2014

A less common form of gentle massage designed to soothe and ease muscle tension in the muscles. The training is largely practical and can be taken as package with Thai poultice massage to include a discounted kit.

Healthy eating for Complementary Therapies – Commencing March 2014

6 weeks evening classes to achieve the ITEC level 3 award in healthy eating and wellbeing

Lymphoedema Workshop – March 2014

Learn the theory and practical techniques to control and relieve the symptoms of lymphoedema.

Counselling Course – February 2014

Two day course suitable for complete beginners and those working within the care industry at any level.

Also useful as an introduction for those considering undertaking a full certified course.

5 Elements Workshop – Saturday 22nd February 2014

This 1 day work shop is suitable for any therapist, but especially relevant to Dao-yin Tao graduates or students. Participants will learn different ways of developing treatment plans for their clients, giving them a more person centred approach, which shows that the health of the spirit is essential to a person's wellbeing, helping you to treat the "whole".

Palliative Care Course for Complementary Therapists – Next enrolment March 2014

4 Day Course provides a solid foundation for all complementary therapists wanting to work in the specialist fields of cancer and palliative care. Accredited by Teesside University

Diploma Level 3 courses in Aromatherapy; Reflexology; Massage

Full and part time study available for ITEC accredited full diplomas in complementary therapy

Pathology master classes

Wednesday evenings monthly throughout the year. Autumn topics include breast cancer, neurological disorders and essential oil chemistry revision. If there is a topic you would like included please let us know

Meditation classes and Reiki Share

Meditation for beginners, mindfulness and reiki shares are held every Tuesday evening

For more information on any of the above events, to register a place or to find out the next CThA or FHT local meeting dates please contact Gwyn Featonby/Emma Sanderson at: Seven Wellbeing Centre Ltd on 01642 662785 or email gwynfeatonby@butterwick.org.uk.

All proceeds go directly to Butterwick



COMPLEMENTARY THERAPY COURSE LISTING

STAND ALONE STUDY DAYS	DATES
Adapting Massage and Bodywork in Healthcare Settings	Saturday 7th and Sunday 8th December 2013
Cognitive Behavioural Therapy: uses and potential for supportive care	Sunday 17th November 2013 or Sunday 16th November 2014
Enhancing Relaxation Techniques	Saturday 12th and Sunday 13th October 2013
Neuro Linguistic Programming (NLP)	Saturday 23rd and Sunday 24th November 2013
Transactional Analysis: an introduction to develop your skills	Saturday 16th November 2013
Exploring Hand Reflexology	Saturday 30th November and Sunday 1st December 2013
ADDITIONAL CLINICAL COURSES	DATES
End of Life Approaches to Complementary Therapies	Saturday 23rd and Sunday 24th November 2013
PACKAGES, DIPLOMAS AND CONFERENCES	
Aromatherapy and Cancer Care Diploma	Hypnotherapy Diploma in Healthcare (dates available on request)
Aromatherapy Five-Day Post Graduate Certificate	Note : Start dates for diplomas occur at any time throughout the year apart from the Hypnotherapy Diploma
Clinical Reflexology Diploma	
Adapting Complementary Therapies for Cancer Care Diploma	
Relaxation and Creative Imagery Interventions Diploma	

To book please contact: Joanne Barber or Peter Mackereth

Complementary Therapy Department, The Christie, Wilmslow Road, Withington, Manchester, M20 4BX
joanne.barber@christie.nhs.net • 0161 446 8328 • Alternative booking: www.christie.nhs.uk/pro/cs/comp/training

A list of local accommodation, maps and directions can be obtained from the website or by contacting our Events Officer:
Joanne Barber on 0161 466 8236. NB: Accommodations listed are not vetted by The Christie.

Poetry and Prose, etc.

Smile a little, be healed a lot!!!

Some classroom howlers:

Ancient Egypt was inhabited by mummies and they all wrote in hydraulics. They lived in the Sarah Dessert and travelled by Camelot.

Sir Walter Raleigh is a historical figure because he invented cigarettes and started a craze for bicycles.

Sir Francis Drake circumcised the world with a 100 foot clipper.

A minister asked some primary school children if anyone knew the two parts of the bible. One of the oldest pupils eagerly replied "The old and new testicles".

A teacher in Scotland was telling her class a bible story and when asked if anyone could tell her about the Hebrews, up shot the hand of an eager boy, "They're islands near the west of Scotland".

How 6-7 year olds completed some well known proverbs ...

Strike while the *insect is close.*

Don't bite the hand *that looks dirty.*

If you lie down with dogs, you'll *stink in the morning.*

Where there's smoke there' *pollution.*

Laugh and the whole world laughs with you; cry and *you have to blow your nose.*

English from around the world??

Cocktail Lounge, Norway: LADIES ARE REQUESTED NOT TO HAVE CHILDREN IN THE BAR

Doctor's office, Rome: SPECIALIST IN WOMEN AND OTHER DISEASES

Hotel, Japan: YOU ARE INVITED TO TAKE ADVANTAGE OF THE CHAMBERMAID

Tokyo hotel: GUESTS ARE REQUESTED NOT TO SMOKE OR DO OTHER DISGUSTING BEHAVIOURS IN BED

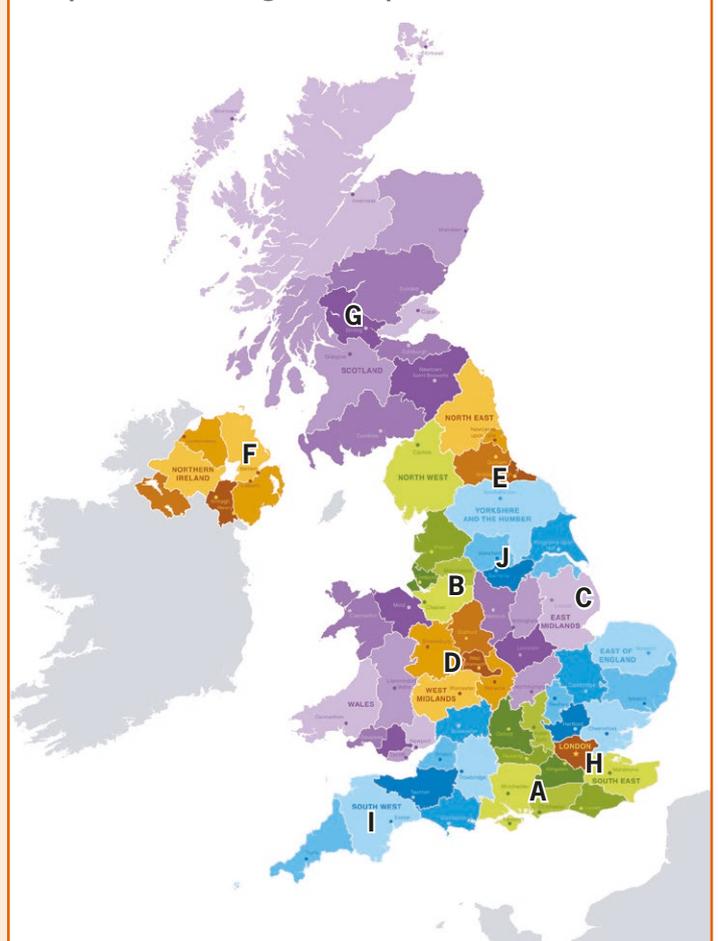
In a cemetery: PERSONS ARE PROHIBITED FROM PICKING FLOWERS FROM ANY BUT THEIR OWN GRAVES

On a poster at Kencom: ARE YOU AN ADULT THAT CANNOT READ? IF SO, WE CAN HELP

Dry cleaners in, Bangkok: DROP YOUR TROUSERS HERE FOR THE BEST RESULTS

On a main road to Mombasa: TAKE NOTICE – WHEN THIS SIGN IS UNDER WATER, THIS ROAD IS IMPASSABLE

Map of NACTHPC Regional Groups



NACTHPC Executive Committee

Name	Committee Role(s)	Contact Details
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NACTHPC Regional Groups

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J West and South Yorkshire	Kate Cadwell	k.cadwell@nhs.net (work) katecadwell@blueyonder.co.uk (home)	Barnsley Hospital NHS Foundation Trust

“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

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 14th December 2013. Next edition published January 2014.

