

CORE CURRICULUM

FOR SPORTS MASSAGE

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Introduction

1. Sports massage is a soft tissue treatment, primarily aimed at athletes to ease muscular tension and minor injuries received as a result of sport. However, it is not exclusive to athletes, as many people prefer the often deeper, sometimes more intense, massage delivered by sports massage therapists.

Sports massage is predominantly used as part of an athletes training programme, complementing progressive training and minimising potential incidences of injury by reducing muscle tension. It can be used in a variety of situations; pre-event which is typically used to prepare the athlete physically and help with mental preparation, inter or intra-event which helps prepare the muscle for subsequent activity, post-event which can aid relaxation following activity and can be used to assess muscle condition for potential injury. Sports massage therapists work alongside medical and health care teams as well as within sporting environments.

A typical session would begin with a discussion between the practitioner and the client to seek the client's relevant personal details, medical history and reason for the visit. Using this information, the practitioner may then further observe posture, client's movement, evaluate the tissue by touch and carry out specific functional tests to establish the possible cause of discomfort or injury. Using this information, and in conjunction with the client an appropriate treatment plan will be developed. All assessments and proposed treatment will be explained to the client and informed consent will be sought.

The client may be asked to undress or perhaps change into sports wear for the assessment and treatment. The treatment will be tailored to address the needs of the client and may include the application of a variety of soft tissue techniques and functional movement skills. These may necessitate movement by the client. Following treatment, the practitioner will offer homecare advice to facilitate or continue the treatment effects and advise in the case of adverse reactions. The therapist may also suggest referral to another practitioner if treatment is not within their remit.

- The content of this core curriculum provides a minimum standard for safe and competent practice. It incorporates the National Occupational Standards (NOS) CNH1, CNH2 and CNH27. Full copies of CNH1 and CNH2 are attached as Appendix A to this document. The wording of the overviews is provided in sections 2A and 2B on page 4. The full content of CNH27 is provided in section 2C on page 4.
- 3. Achievement of the educational and professional outcomes in this Core Curriculum act as the measure for eligibility to apply for registration with the Complementary and Natural Healthcare Council (CNHC).

1 OVERALL AIMS OF THE COURSE

To ensure that at the point of successful course completion, individuals are safe and competent to practise Sports Massage.

2 LEARNING OUTCOMES AND COMPETENCIES TO BE ACHIEVED

2A CNH1 Explore and establish the client's needs for complementary and natural healthcare (full details attached in Appendix A)

Overview

All forms of complementary and natural healthcare rely on exploring and establishing the client's needs and expectations. This may take place at the outset, but also during the ongoing delivery of complementary and natural healthcare.

This allows the practitioner to consider whether it is appropriate to offer the service to the client, the type of service that should be offered and any required modifications to that service.

Users of this standard will need to ensure that practice reflects up to date information and policies.

2B CNH2 Develop and agree plans for complementary and natural healthcare with clients (full details attached in Appendix A) Overview

It is important that the planning of complementary and natural healthcare takes place through discussion and agreement with the client and relevant others (e.g. carers).

This standard is about developing and agreeing plans that meet the client's needs. Such plans may be subject to change as the service proceeds.

Users of this standard will need to ensure that practice reflects up to date information and policies.

2C CNH27 Provide sports massage therapy to clients OVERVIEW

This standard is about providing sports massage therapy to clients to ease muscular tension and treat minor injuries sustained as a result of activity. Sports massage therapy can be used to treat musculoskeletal conditions for any individual.

During the subjective part of the consultation the therapist will undertake an assessment of the client's general health and specifically issues relating to their activity and any pain they may have. The therapist will then conduct an objective assessment which further investigates the condition of the client's body. Measurable outcomes will be taken from the consultation which will provide information to evaluate the results of the treatment.

Therapists need to be aware of red flags and contra-indications and should apply their knowledge of anatomy, physiology and pathology in cases where they need to decline treatment and refer to other healthcare professionals.

Clients may be seen on a single occasion or on multiple occasions when the therapist will monitor progress and adapt subsequent treatments and advice given. Treatments may be carried out in a variety of locations such as: a treatment room, team changing rooms, the floor of a venue or on the field of play. Consideration must be given to variable treatment positions of the client to ensure their safety and comfort. Treatment may be given which has varying anticipated outcomes such as pre-event, intra/inter event, post event or maintenance treatment. The techniques used during treatment may include:

- Effleurage
- Petrissage
- Tapotement

- Compressions
- Vibrations
- Frictions
- Soft tissue release
- Muscle energy techniques
- Myofascial techniques
- Positional release
- Neuromuscular trigger point therapy
- Passive stretching
- Application of heat and ice to suit the clients needs

Users of this standard will need to ensure that practice reflects up to date information and policies.

KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

- 1. the current national legislation, guidelines, organisational policies, codes of ethics and protocols which affect the work environment, scope of practice and working practice between the therapist and others
- the importance of environmental and personal cleanliness and hygiene and the standards that should be applied when applying massage in a variety of situations
- the importance of having a suitable chaperone present when working with children and adults at risk and the principles and legislation to observe in relation to their protection
- 4. the principles and methods of obtaining informed consent prior to assessment and application of sports massage techniques, and the importance of working within own scope of practice
- 5. current health and safety legislation for equipment used during treatment
- 6. the procedures to maintain clear and accurate client information and treatment records
- 7. how to comply with legal requirements for the storage of information regarding client and treatment details
- 8. how to report or refer to relevant health care professionals and why it is important to follow their direction
- 9. the anatomy, physiology and pathology relevant to the assessment, application and effects of sports massage techniques
- 10. the musculoskeletal system and its interaction with the nervous system
- 11. the principles of biomechanics to inform assessment, treatment and aftercare
- 12. the clinical signs of human disease and dysfunction in order to recognise contra-indications, red flags, injury and underlying pathology
- 13. the physiological, circulatory and neurological effects of massage methods
- 14. the effects of nutrition upon injury and pathology
- 15. the possible impact of client's psychological state on injury recovery
- 16. the actions and side effects of major classes of drugs in order to understand the impact medication may have on a client's condition

- 17. the physiological effects of the application of ice and heat
- 18. the methods, indications and contraindications related to the application of ice and heat
- 19. sport specific issues which may influence treatment
- 20. how to adapt communication styles in ways which are appropriate to the needs of the client
- 21. the importance of obtaining information in order to:
 - 1. make an informed hypothesis about the nature of the client's condition
 - 2. identify cautions, contraindications and red flags
 - 3. inform objective testing
 - 22. the possible influence of yellow flags on treatment outcome
 - 23. how to recognise when the presenting condition could be of neurological origin and requires referral to another health care professional
 - 24. the importance of respecting the client's culture, privacy, dignity, wishes and beliefs and how to do so
 - 25. the potential impact of psychological effects resulting from the therapist/client interaction
 - 26. how to analyse the signs of postural defect, injury, asymmetry and biomechanical dysfunction
 - 27. the palpatory characteristics of normal and abnormal body tissues
 - 28. the normal range of movement measurements available at each joint
 - 29. the normal and possible abnormal end feel at each joint when performing passive range of movement
 - 30. the method and measurement scales of strength testing methods
 - 31. the importance of accurate assessment and reassessment
 - 32. problem solving skills in order to plan and justify treatment
 - 33. the indications and contraindications for sports massage techniques
 - 34. how to select the correct techniques to meet the desired outcomes for preevent, inter-event, post event, maintenance and injury treatments
 - 35. the importance of explaining the aims and objectives of massage to the client
 - 36. the importance of providing individuals with opportunities to ask questions and increase their understanding
 - 37. the suitability of the massage medium in relation to the massage technique being used and the client's skin type
 - 38. the content of the massage medium with regard to a possible allergic reaction and contraindications
 - 39. how to prepare the treatment area and position the client for optimal treatment outcome whilst maintaining their dignity and comfort throughout
 - 40. how to apply a range of sports massage methods with particular reference to contour of hands, mode of application, position, stance, posture, depth of pressure, direction and rhythm of movement
 - 41. the importance of client position and sequence of treatment for the treatment of oedema relating to injury
 - 42. the situations in which it is necessary to remove massage medium to comply with sporting regulations
 - 43. the possible adverse reactions to the treatment and the action to take if these are identified

- 44. the information required when communicating with other health care professionals
- 45. how to provide:
 - 1. lifestyle information
 - 2. advice about possible adverse reactions to treatment
 - 3. advice about specific conditions pertaining to treatment
 - 4. homecare advice for the management of treatment injury
- 46. how to evaluate the effectiveness of sports massage treatment to support future actions
- 47. the necessity to reassess measurable outcomes accurately following treatment in order to evaluate effectiveness

PERFORMANCE CRITERIA

You must be able to do the following:

- 1. ensure the environment meets the client's needs in terms of comfort and dignity
- prepare the treatment environment, equipment and materials ensuring compliance with good hygiene practice and health and safety legislation, managing risks as appropriate
- 3. follow approved guidelines for the presence of a chaperone, where necessary
- 4. review any previous treatment notes where applicable and confirm there have been no changes since any previous treatment
- 5. communicate with the client in a manner appropriate to the client's understanding, and address any questions they may have
- 6. obtain the client's personal details and lifestyle information, details of any previous medical history, and current condition
- 7. confirm that informed consent has been obtained in relation to the treatment to be carried out
- 8. obtain information relevant to the cautions and contraindications to massage and respond appropriately
- 9. refer when necessary to a relevant health care professional
- 10. observe, palpate, assess and move the pertinent body parts in ways that are appropriate to the client and their needs
- 11. agree the nature, aims and objectives of the massage method to be used with the client, including any equipment to be used
- devise and as required, update a current sports massage treatment strategy appropriate to the desired treatment outcome, the client's needs and within scope of practice
- 13. adapt the treatment in response to presented pre-existing conditions and disease processes
- 14. determine and record subjective and/or objective measurable outcomes
- 15. prepare the relevant body area with due respect to the client's dignity
- 16. ensure the client is correctly positioned, safe and comfortable throughout the sports massage treatment
- 17. apply massage methods correctly and consistently to meet the client's needs
- 18. adapt application and personal posture in order to maintain the musculoskeletal health of the therapist
- 19. monitor the effects and take appropriate action should the client have an

- adverse response to treatment
- 20. provide the client with appropriate materials and assistance to remove the massage medium when necessary
- 21. record and respond appropriately to visual and verbal feedback during the delivery of massage methods
- 22. reassess and record objective and subjective measurable outcomes
- 23. evaluate with the client the outcomes and effectiveness of the treatment to support future plans and actions
- 24. provide the client with information and aftercare advice specific to their condition
- 25. complete, store and maintain accurate records in accordance with legal and organisational requirements
- 26. refer and/or report on progress to the relevant health care professional and follow their directions where necessary

3 OVERALL RATIO OF THEORY AND PRACTICE

The overall ratio of theory and practice is:
60% Theory and 40% practical of the Total Qualification Time (560 hours – see Section 6.1)

4 ASSESSOR AND INTERNAL QUALITY ASSURANCE (IQA) REQUIREMENTS FOR THE REGULATED QUALIFICATIONS FRAMEWORK (RQF) COMPETENCE QUALIFICATIONS

4.1 Both Assessor and Internal Quality Assurer should possess a recognised Level 4 sports massage qualification, have a minimum 2 years industry experience and be able to demonstrate industry specific continued professional development over that time period.

Assessors should have one of the following:

- D32 Assess candidate performance & D33 Assess candidate using differing sources of evidence:
- A1 Assess candidate performance using a range of methods;
- Level 3 Award in Assessing Competence in the Work Environment;
- Level 3 Award in Assessing Vocationally Related Achievement;
- Level 3 Certificate in Assessing Vocational Achievement.

Internal Quality Assurer should have one of the following:

- D34 Internally verify the assessment process;
- V1 Conduct internal quality assurance of the assessment process;
- Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice:
- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice.

If the Assessor or Internal Quality Assurer does not currently have the relevant quality assurance qualification they can be enrolled on the course, working towards the qualification. In that training period, a colleague meeting the above criteria must countersign their assessments.

For a non-regulated qualification the assessor should meet the above assessor requirements i.e. suitable industry qualification with the required experience, relevant CPD and a recognised assessor qualification. 5 THE MINIMUM (OR EQUIVALENT) LEVEL AT WHICH QUALIFICATIONS LEADING TO CNHC REGISTRATION MUST BE ACHIEVED AGAINST THE REGULATED QUALIFICATIONS FRAMEWORKS ACROSS THE UK The minimum level of qualification required is equivalent to Level 4 (Regulated Qualifications Framework; England and Wales); Level 6 (Council for the Curriculum, Examinations and Assessment; Northern Ireland); Level 8 (The Scottish Credit and Qualifications Framework; Scotland) on the UK Qualification Comparison Chart. **6 HOURS OF STUDY** Total Qualification Time. A minimum of 560 hours of study is required. This is 6.1 the number of notional hours that represents an estimate of the total amount of time that could reasonably be expected to be required in order for a Learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a qualification. Total Qualification Time is comprised of the following two elements: the number of hours of Guided Learning (a) an estimate of the number of hours a Learner will reasonably be likely to spend in preparation, study or any other form of participation in education or training, including assessment, which takes place as directed by – but unlike Guided Learning, not under the Immediate Guidance or Supervision of – a lecturer, supervisor, tutor or other appropriate provider of education or training. 6.2 Guided Learning. This is the activity of a Learner in being taught or instructed by or otherwise participating in education or training under the immediate guidance or supervision of – a lecturer, supervisor, tutor or other appropriate provider of education or training. 6.3 Immediate Guidance or Supervision. The guidance or supervision provided by lecturer, supervisor, tutor or other appropriate provider of education or training with the simultaneous physical presence of the Learner and the lecturer. supervisor or tutor, or remotely by means of simultaneous electronic communication For these purposes, the activity of invigilation is to be regarded as a form of guidance or supervision. A minimum of 353 hours of Guided Learning are required. Of these, 141 hours must be with the simultaneous physical presence of the Learner and the lecturer, supervisor or tutor. **7 CREDIT VALUE** 7.1 The number of credits that will be achieved on successful completion of the learning outcomes is 56. One credit must be equal to one tenth of the Total Qualification Time, rounded to the nearest whole number.

8 CASE STUDY REQUIREMENTS

To include the minimum requirements for practice observed by an 'occupationally competent' assessor. N.B. case study requirements are included in the Total Qualification Time and should reflect hours and credits (which may be spread across units). (Further detail supplied in Appendix C)

- There are to be a minimum of 5 case studies with at least 5 treatments per case study over a range of different demographics. Total 25 hours.
- As far as possible, a range of clients should be treated e.g. male, female, adolescent, adult, older adult, person with disabilities etc. The environment could be clinical, nonclinical or at an event. The treatment could be in any of the following contexts; preevent, post event, inter/intra-event or maintenance.
- The purpose of the case studies is to demonstrate competency in the qualification standards and as such, should reflect the range of techniques, assessment and treatment skills learned.
- It is anticipated that Level 4 case study clients will have an injury or a pathological condition in order to demonstrate knowledge and practical skills at a relevant level.

Where possible, at least one treatment from each case study must be observed by an appropriately qualified assessor, but at least one Level 3 assessment and two Level 4 assessments must be the subject of the case study. Where it is impossible to use the case study subject, then a real or realistic client may be used (not a colleague).

The Level 3 component of the assessments should be based around pre-event/maintenance treatments with basic massage techniques demonstrated.

9 DETAILS OF THE ASSESSMENT PROCESS					
9.1	(a)	Evidence of competence for all the learning outcomes must be available in a portfolio and can be presented in written, oral/audible or video format. The practical assessments must comprise of five assessments, with the client being the subject of each of the case studies where possible. Two assessments must be based on the Level 3 component of the course content and three assessments must be based on Level 4 course content. (See Section 8)			
9.2	Form samp the can ap	above should all evidence clear understanding of learning outcomes outlined in document. mative and summative assessments should be carried out by the tutor with a pple of the overall submissions being subject to internal quality assurance. In case of regulated and non-regulated qualifications, this should be carried out by appropriately qualified person as specified in section 4.1. Organisations must be to provide evidence of this if required.			
9.3	An o	ddition – Practical Assessment of skills ongoing (i.e. during teaching sessions) observation as to practise, application suitability.			
9.4	Sum	mative Assessment			

The summative assessment must include the written work, in addition to practical work. 10 DETAILS OF AN ACCREDITATION OF PRIOR EXPERIENCE AND LEARNING (APEL) PROCESS AND WHO WOULD BE RESPONSIBLE FOR IT 10.1 The APEL process would be the responsibility of professional associations who verify applications for CNHC registration from Sports Massage practitioners who have not completed a training course that of itself meets the requirements of the National Occupational Standards and this core curriculum. 10.2 The following criteria will be used to make judgments about applying for CNHC registration on the basis of APEL. Evidence to prove the claim may be presented in any of the ways indicated below. It should be stressed, however, that it is the students' learning from past experience and not their experience itself that is being assessed. Evidence, therefore, must clearly indicate that learning relevant to general criteria shown above has taken place. Evidence of this learning will normally be through submission of a portfolio and can be demonstrated in a number of ways, for example: Written reflection on the experiential evidence listed in the portfolio Oral assessment with an experienced assessor Examination of an authentic product of the applicant e.g essay. project, video, artefact, etc. Direct observation of performance by a qualified assessor Indirect witness testimony as to the applicant's skill, competence, knowledge and understanding by an appropriately qualified person References, line manager's report, testimonials (can only prove experience not competence) A specific task set by an assessor to supplement the existing portfolio Client notes (adherence to Data Protection Act) Writing and publishing relevant related articles Other massage qualifications (i.e. body massage – will need supplementing with further evidence to demonstrate application in a sports setting) Continued Professional Development evidence, supplement with evidence of learning Evidence should be current i.e. produced within the previous 3 years



Appendix A

CNH1 Explore and establish the client's needs for complementary and natural healthcare

OVERVIEW

All forms of complementary and natural healthcare rely on exploring and establishing the client's needs and expectations. This may take place at the outset, but also during the on-going delivery of complementary and natural healthcare. This allows the practitioner to consider whether it is appropriate to offer the service to the client, the type of service that should be offered and any required modifications to that service.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Version No 1

KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

- 1. The concept of health and well-being that is consistent with the practice, principles and theory underlying your discipline
- 2. The nature of the service provided and fee structures
- 3. How the client's previous and present care may affect their health and well-being in relation to your discipline
- 4. How the psychological and emotional balance, as well as diet and lifestyle of the individual, can affect their health and well being
- 5. How the context in which people live affects their health and well-being
- 6. The importance of a suitable environment and making clients feel welcome
- 7. How to select and use different methods for exploring clients' needs
- 8. How to establish valid and reliable information about the client, and determine the priority of need, in order to plan the service
- The potential risks (relevant to your discipline) of various courses of action for the client
- 10. How to work with clients to determine the appropriate actions
- 11. The appropriate actions to take to suit identified needs
- 12. The conditions for which the discipline is appropriate and those where it must be used with caution
- 13. How to recognise conditions for which your discipline is unsuitable and for which the client should seek advice from other sources

- 14. How to judge whether self-care procedure(s) relevant to your discipline are appropriate for the client
- 15. The anatomy, physiology and pathology relevant to your discipline
- 16. The procedures for record keeping in accordance with legal and professional requirements

PERFORMANCE CRITERIA

You must be able to do the following:

- 1. evaluate requests for complementary and natural healthcare and take the appropriate action
- 2. explain the nature of the service and fee structures to the client
- 3. provide an appropriate and safe environment for the service
- 4. make clients feel welcome and ensure they are as comfortable as possible
- 5. discuss the client's needs and expectations, and ask relevant questions
- 6. encourage the client to ask questions, seek advice and express any concerns
- 7. establish the client's needs in a manner which encourages the effective participation of the client and meets their particular requirements
- 8. determine any contra-indications or restrictions that may be present and take the appropriate action
- 9. evaluate the information obtained and determine the appropriate action with the client
- 10. complete and maintain records in accordance with professional and legal requirements

CNH1 Explore and establish the client's needs for complementary and natural healthcare Final version approved June 2010 © copyright Skills For Health





CNH2 Develop and agree plans for complementary and natural healthcare with clients

OVERVIEW

It is important that the planning of complementary and natural healthcare takes place through discussion and agreement with the client and relevant others (e.g. carers). This standard is about developing and agreeing plans that meet the client's needs. Such plans may be subject to change as the service proceeds.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Version No 1

KNOWLEDGE AND UNDERSTANDING You

will need to know and understand:

- 1. The range, purpose and limitations of different methods or approaches which may be used for clients' individual needs
- 2. How to determine the most appropriate method(s) for different clients and their particular needs
- 3. How to recognise those occasions when your discipline may complement other healthcare which the client is receiving
- 4. The alternative options available to clients for whom your discipline is inappropriate
- 5. The role which the client (and others) may take, and may need to take, if the approach is to be successful
- 6. How to support and advise the client to make informed choices
- 7. How to work with the client and relevant others to plan the approach
- 8. Why evaluation methods should be determined at the planning stage and what the client's role will be in the evaluation
- 9. The importance of encouraging and empowering the client to be as actively involved as possible
- 10. The relationship of the client's involvement to the promotion of their health and well-being
- 11. The procedures for record keeping in accordance with legal and professional requirements

PERFORMANCE CRITERIA

You must be able to do the following:

- 1. explain the available option(s) which meet the client's identified needs and circumstances
- 2. explain any restrictions, possible responses and advise on realistic expectations
- 3. advise the client when your discipline is inappropriate and help them to consider other options
- 4. discuss the approach to be taken, the level of commitment required and the potential outcomes and evaluation with the client
- 5. check the client understands and support them to make informed choices
- 6. obtain the client's consent and complete records in accordance with professional and legal requirements

CNH2 Develop and agree plans for complementary and natural healthcare with clients Final version approved June 2010 © copyright Skills For Health

What Activities Count Towards Guided Learning Hours (GLH) and Total Qualification Time (TQT)?

The following table provides examples of what activities count towards both GLH and TQT:

Type of Activity	GL (hours)	TQT
Classroom based learning supervised by the lecturer, supervisor or tutor whether on a 1 to 1 or group basis	\	✓
Invigilated or supervised examinations or final assessments	✓	✓
Research project where the learner carries out independent research and produces a report without supervision	×	✓
Classroom based induction to a qualification as required in the specification	~	√
Skills practice at place of learning or workplace where the learner is responsible for generating their own evidence of practice, e.g. a statement confirming attendance from a suitable attendant adult, generally not the lecturer or tutor	×	✓
Skills practice carried out in simulated conditions where the learner is observed and assessed at the same time as the simulation is taking place	*	√
Face to face meetings with the lecturer, supervisor or tutor or other prearranged teaching session, e.g. telephone/webcam contact, internet messaging, i.e. conversation in real time	\	✓
Work based practice observed by employer, tutor, or other witness more qualified than the learner	~	√
Portfolio assessment where the learner collates evidence of competence and understanding unsupervised by the lecturer, supervisor or tutor	×	√
E-assessment where the learner has their knowledge and understanding assessed unsupervised where they can access online e-assessment at any time	×	√
E-assessment where the learner is supervised by the lecturer, supervisor or tutor in real time	✓	√
Watching a pre-recorded podcast or webinar	×	✓

Case Study Requirements

- There are to be a minimum of 5 case studies with at least 5 treatments per case study over a range of different demographics. Total 25 hours.
- As far as possible, a range of clients should be treated e.g. male, female, adolescent, adult, older adult, person with disabilities etc. The environment could be clinical, non-clinical or at an event. The treatment could be in any of the following contexts; pre-event, post event, inter/intra-event or maintenance.
- The purpose of the case studies is to demonstrate competency in the qualification standards and as such, should reflect the range of techniques, assessment and treatment skills learned.
- It is anticipated that Level 4 case study clients will have an injury or a
 pathological condition in order to demonstrate knowledge and practical skills
 at a relevant level.

Where possible at least one treatment from each case study must be observed by an appropriately qualified assessor, but at least one Level 3 assessment and two Level 4 assessments must be the subject of the case study. Where it is impossible to use the case study subject then a real or realistic client may be used (not a colleague).

The Level 3 assessments should be based around pre-event/maintenance treatments with basic massage techniques demonstrated.

Case studies should include the following information (requirements for Level 4 only in italics):

Overview of client to include:

- Medical history / past injuries
- Past treatments / therapies
- Sport, training regimes.
- Lifestyle factors that may impact upon the client, e.g. occupation, stress, children, dependents, diet etc.
- Medications.

Reasons for seeking treatment:

- Examples: preventative, corrective, competition, injury, pain relief, etc.
- Presenting condition

Contra-indications:

• Record any contra-indications or pre-existing conditions with actions taken.

Client expectations:

- Discuss the client's objectives for seeking treatment and their expectations
- Consider if their expectations are realistic?

Subjective assessment details:

 As above (overview of client), but also presenting condition/s – history, mechanism of injury, behaviour of symptoms, aggravating/easing factors, severity, irritability and nature, 24-hour behaviour patterns, pain scales, stage of injury etc.

Objective assessments & outcomes:

- These will include: observation (posture, gait), palpation, active range of movement, passive range of movement, resisted muscle tests, special tests etc. Indicate the outcome measures used.
- You may wish to include diagrams, pictures of client, completed postural assessment forms etc. to support your study. (Please ensure that faces are blacked out to maintain anonymity).

Treatment plan:

- Justification for treatment plan based on subjective and objective outcomes, also patient objectives.
- Justifications for your choice of massage techniques and the different methods of application. Relate them to the condition you are treating.
- Which subjective and objective markers were used?
- State short, medium and long-term goals over the course of treatments.

Record of Treatments:

 Record each treatment individually as the treatments should progress over time as your patient responds (or not) to treatments.

Write up of each case study, which should discuss the following:

- How effective the massage strategies used were, consider both negative and positive points.
- How did the feedback from the client relate to the original aims and objectives of your treatment plan?
- Reassessment of outcome measures.
- Any changes or revisions made to treatment plan or changes you would make in hindsight.
- Aftercare, preventative care, *rehabilitation strategies*, referrals, etc.
- Any contra-actions the client may have experienced
- Include a testimony from your client about how they felt about the treatment (successful or not, quality of treatments, how much information they were given, etc.). A useful patient reported outcome measure to use may be Measure Yourself Medical Outcome Measure (MYMOP) available from: http://www.bris.ac.uk/primaryhealthcare/resources/mymop/questionnaires/