

The Unofficial Graduates' Manual

Written by graduates for graduates

© THE COLLEGE OF CHIROPRACTORS 2006

CONTENTS

INTRODUCTION	4
1.1 The Beginning – this is for real	4
1.2 Choosing a practice and preparing for the interview	4
1.3 Selecting a Mentor	5
1.4 Shaping your own education	5
1.5 Getting to know your team	6
1.6 Designing the consulting room	7
1.7 Arranging your desk	8
1.9 Making the most of your Graduate year	9
MANAGING YOUR TIME	10
2.1 Starting your day	10
2.2 Saving time during clinic	11
2.3 Dealing with paperwork	12
2.4 Meetings	13
2.5 Home Visits	13
THE COMMUNICATION GAME	15
3.1 Using the telephone	15
3.2 Dictating letters	15
3.3 Referring patients	15
3.4 Communicating with colleagues	16
3.5 Talking to patients' relatives	17
3.6 Handling complaints	17
3.7 The Media	18
3.8 Giving evidence in court	18

BE HAPPY – STAY CALM	19
4.1 Some techniques for reducing stress	19
4.2 Less stress during clinics	21
4.3 Implementing change	22
FINE TUNING THAT CONSULTATION	23
5.1 Unpleasant patients	23
5.2 Examine your patient - Therapy, not just diagnosis	24
5.3 Puzzling problems	26
5.4 Infants	27
5.5 Toddlers	28
5.6 Adolescents	28
5.7 Record Keeping	29
READY TO MOVE ON	30
6.1 Self employed status	30
6.2 Contact local faculties and national organisations	30
6.3 Getting help from your accountant	30
6.4 Looking after yourself	30
6.5 Joining a practice	31
6.6 Update your CV	31
6.7 Partnerships	31
6.8 Dipping into other ponds	32
APPENDIX A	33
APPENDIX B	33

INTRODUCTION

This guide is intended to introduce the Graduate to the world of chiropractic practice after qualification.

The guide aims to provide a few ideas to experiment with in the early stages of the Graduate's year. It is not meant to answer all problems that arise, but to suggest ways to cope during the first few months and perhaps beyond. Some of these ideas may help you create more time for your patients, your family and your friends and of course – yourself.

A short guide like this cannot pretend to offer any easy solutions to what are often complicated issues. It certainly needs to be backed up by both reading the literature and by the training you will receive. There is always more than one way of doing things, and there is no guarantee that any of the suggestions included in the Guide will work for you. However, if some of the suggestions help you to develop your own individual style, much will have been gained.

1.1 The Beginning – this is for real

Chiropractic practice is very fulfilling most of the time. Working independently, or with a team, and building relationships with all kinds of interesting people can be very rewarding. A consultation that has gone well, where you and your patient manage to strike a similar chord, can be a most satisfying experience. However, starting as a Graduate may sometimes be daunting, disorientating or even lonely.

Many new Graduates will not be used to working in a team, sharing responsibility and treating conditions. Having to make more decisions on your own in a limited period of time can be a little unsettling at first. By addressing some of the more common problems, in the following pages the Guide will help you make the transition from undergraduate to a primary contact practitioner.

Note that the following sections of this first chapter are written largely from the perspective of a Graduate starting work in an established practice alongside their Mentor/Trainer, which may not always be the case.

1.2 Choosing a practice and preparing for the interview

Individual practices vary enormously. It may help to think about whether you would like to work in a rural or urban practice in the future. If you want to see what a particular working environment is like, choose a similar practice for your training, but if you are sure about your future plans, consider seeking a different experience while you are training. Would you prefer a single-handed practice or a large clinic with other practitioners in addition to your Mentor?

At the interview, two of the most common questions you are likely to be asked concern your motivation and some current hot topics in chiropractic. Reading the latest editions of topical Journals should keep you apprised of current issues and you should try to form your own opinion on these topics.

1.3 Selecting a Mentor

When choosing a practice for your probationary year, one of the most important aspects to consider is, your prospective Mentor (often referred to as a Trainer). Mentors vary widely in style and experience. Although those appointed by the College of Chiropractors all undergo regular training and assessment for the purposes of guiding you through the PRTS postgraduate training programme, individuals have different approaches to teaching and work in general. Would you prefer a younger or older Mentor? Is their gender an important consideration? Are you keen that your future Mentor has special interests that you may want to learn about? What would your timetable look like and how much protected time would you have for training? Again, it may be useful to talk to one of the previous Graduates about these issues.

Learning about the practice culture

All practices have their own individual histories, staffed by different personalities. Over the years, most practices have developed their own way of working. Try to take your 'undergraduate hat' off when starting as a Graduate and use the first few weeks to get a feel of how the practice runs. How do your team members communicate? Is there a hierarchy within the practice? What is the practice philosophy? Answers to these and similar questions can often only be found with time, so a period of careful observation may help you to find your place in the practice team. Finding out about the practice culture is also important should you wish to suggest any changes with regard to training or other issues that affect the practice organisation. Many odd ways of working have their own history which justifies them, so try not to be too judgmental initially if you do not agree with a particular way of doing things.

1.4 Shaping your own education

Self-directed learning

As a Graduate you will take part in planning, shaping and organising your own training and education. Much of your learning will be based on your personal educational needs, so it is usually a good idea to perform a SWOT (strengths, weaknesses, opportunities and threats) analysis with your Mentor and to use this as a base for planning the year ahead. This means putting all of the SWOT factors on paper, which will enable you and your Mentor to keep your learning objectives in focus and to review your progress at a later stage. You should develop a Personal Development Plan (PDP) which is one of the requirements of the PRTS.

One-to-one sessions with your mentor

One-to-one sessions with your Mentor, which are often very valuable, may well occur throughout the day, either face-to-face or by phone. You may occasionally discover that some topics relevant to practice may not have been covered or there are areas where you lack confidence. A useful way to address this is by using a reflective diary (again, a requirement of the PRTS) and each time you are concerned about an area, write it down. A review of the diary provides an excellent framework for a regular review with your Mentor.

Selecting different ways of learning

People have different ideas about teaching and training and to some extent you will be able to influence how, for example your tutorials take place. You may opt to discuss

difficult or unusual cases and talk about particular conditions or perform a random case analysis which means keeping the case notes of one of your clinics and discussing patients and your management at random. Another useful method of learning is to sit in with your Mentor and discuss patients and aspects of the consultation afterwards. Acting out tricky consultation through role playing with your Mentor is great fun and might give you more insight than you would have expected. You may also want to use other resources outside, such as visiting other practices and experiencing other styles of practice.

Taking your time

Most chiropractors allow 30-60 minutes for an initial consultation with a patient and 15-30 minutes for a treatment session. Many practices book Graduates' appointments at longer intervals initially, but you or your Mentor may wish to move on very quickly to a shorter appointment time. However, it takes time to develop the ability to consult and you should probably try to resist the temptation to rush this. Negotiate with your Mentor to keep longer appointments for as long as is necessary. Initially 45 minutes per consultation usually gives plenty of time to get used to everything and to consult comfortably. You will also have enough time to nip out and ask your Mentor any questions that may arise, or to phone your Mentor if s/he is not to hand.

Your whole career will benefit if you try to take your time initially and aim to learn things properly.

Setting your timetable

Usually you will discuss your timetable early on with your Mentor. This is not written in stone, and normally there is room for debate. As Graduates come from different backgrounds, their experience and confidence vary. Some may be quite happy to work almost by themselves after a fairly brief introductory period, while others may need much more time before they are able to work more independently. Try not to be pressurized into working patterns which you do not feel comfortable with and if necessary you can revert to longer appointments or more supervision if you find that a change took place too quickly. You will almost certainly be very busy after a few months, so enjoy the first few weeks and use the time to get to know everything and everybody in the practice.

1.5 Getting to know your team

Finding out about your colleagues in the practice

The first few weeks are the best time to get to know everybody personally. Once you have started, use every opportunity to visit and meet your working colleagues, including the receptionists. They usually don't bite and will generally be very keen to meet you if you show an interest in what they are doing.

Introduce yourself and find out how you can learn about their roles in the practice and ask if you can sit in with them at some stage. You will be amazed at how much you can learn.

Learning about other services in the community

Once you have got to know everyone in the practice, you should make a great effort to find out about other services in your area. It cannot be over-emphasized how useful it is to know about other services outside the practice e.g. GPs, Consultants and other

services, public and private, the practice uses. The Graduate year is the ideal time to get to know the roles and availability of all of the services which help the practice and this will be extremely beneficial both for your patients and for your own support.

1.6 Designing the consulting room

Obtain the basic equipment

Clinics vary with regard to the standard and equipment of their consulting rooms. Most training practices will provide you with your own consulting room, but you may sometimes find that you have to share a room with another colleague. Aim to collect all of the necessary equipment for your room if it is not fully stocked. Try to avoid running out of equipment, as it can be very frustrating if you have to interrupt a treatment. Find out at an early stage who is responsible for replacing consumables if supplies run low. Make a list as this will serve as a reminder and make it easier to identify what has, or is about to, run out. See Appendix A.

Start afresh and clear out any unnecessary items

We all have different needs and requirements, so it may be an idea to make a list of furniture or equipment that you require for consulting, examining, performing procedures. If important items of equipment are missing, ask whether there are any in the practice and if not, whether they can be ordered. Get rid of any clutter or outdated items that might have accumulated over the years. Find the best location for your furniture, where you feel comfortable, professional and practical. Make sure your consulting room is patient-friendly and necessarily allows access for the elderly, patients with children and, in particular, disabled patients (refer to the GCC Code of Practice on the matter of disabled access).

Find the most appropriate room layout for your personal style

You will spend a large amount of your time in your consulting room, so it is important to make it as comfortable and suitable for your daily work. Most consulting rooms are well equipped for routine practice, but you will find that you may have very personal requirements with regard to desk position, equipment and internal decoration. Individual styles with regard to interior design vary tremendously and a little of the 'Changing Room' approach may help to make your room more comfortable and friendly. A few of your favourite pictures and a couple of plants can make quite a difference.

File leaflets and protocols

Most clinics keep a supply of patient information leaflets. Some of them can be very helpful for backing up topics that you may discuss with the patient during the consultation, and patients can take them home to read at leisure. A filing cabinet or drawer containing useful leaflets ordered from A-Z according to specific conditions is often a good system of storage and allows quite retrieval. Visual aids can make explanation and demonstration to patients easier.

Provide extra seats for individuals accompanying the patient

Many patients bring relatives or friends along with them, so it can be useful to have at least one extra chair available. If you do not have enough space in your room, a couple of chairs can usually be placed in the corridor outside your room.

Keep a toy box for children

Patients frequently bring their children when they come for treatment. However, small children can get very bored and start investigating your room and equipment, unless you have something more interesting, such as a toy box. This will not be a problem if you have children of your own, but if you don't, ask if the practice can acquire some toys which are in vogue at this moment.

1.7 Arranging your desk

Store the most frequently used bits of equipment in or around your desk, as it can be very disruptive having to go and look for bits of equipment. Although being disorganised has its own attractions, on hectic days it often contributes to raising your stress levels. Make sure that you have a lockable drawer or cupboard for storing your valuables or confidential items.

Write a list of essential telephone numbers

Most practices have a directory of important telephone numbers and it would be sensible to make yourself aware of them.

Find out how to refer

Ask your Mentor which other healthcare practitioners outside the practice he has a good relationship with and is able to refer patients to.

Have the most important references in front of you

It is impossible to have every piece of information that you need for everyday practice at your fingertips and this is not expected of you. Keep the most commonly used reference books close at hand, generally speaking there is no need to be shy about looking things up in front of your patient. They often appreciate that you cannot know everything and are usually very pleased to see that you are checking up as a safeguard for their own benefit.

Find the right place for your computer screen

Having to turn away frequently during your consultation can be disruptive and may result in your missing occasional important patient cues. For this reason, place your computer screen in your line of sight when facing your patient can be useful as you will be able to maintain eye contact for most of the time. You can also show your patient details on the screen by simply turning it around when required. Some practitioners would disagree with this and prefer to place the screen at an angle of 90° to the patient, so that they can look at either the patient or the computer screen. So you may want to try out different options.

Learning to use the computer

Different software packages are available all with their own advantages and drawbacks. If you are new to computers or to the medical software, try to obtain some basic training from your Mentor or someone else in the practice who can show you the ins and outs. Find out how to start and shut down the program used by the practice and whether you need your own personal password. Remember that if it all seems too complicated at the beginning, you can be reassured that everyone else feels the same, but usually not for very long.

1.9 Making the most of your Graduate year

Developing other interests

If you would like to develop other interests, after or during your Graduate Year, it is often best to plan this at an early stage. Research opportunities for Graduates are improving; you will need to contact the Research Division of the College of Chiropractors and the chiropractic undergraduate institutions.

Looking at your Contract

At the beginning of your Graduate post you should be given a work contract and asked to return a signed copy to the practice. Contracts may vary slightly from one practice to another, so it is important to read them thoroughly and discuss with your Mentor any area about which you are not entirely happy. In particular working hours, on-call commitment, holidays and other potentially delicate topics are much easier to sort out early on in your training year. Of course the financial aspects have to be considered as well – many of us are still very hesitant about discussing such matters.

Thinking about personal financial protection

During the first few weeks you will undoubtedly be very busy settling into your new job. However, once the initial dust has settled, the beginning of the Graduate year may be a good time to start sorting out matters such as your pension, critical illness cover and life assurance. Although these may sound boring topics, they could be very important in the event of you falling ill, especially if you have a family or have taken out a mortgage. In order to make an informed decision it is essential to obtain independent financial advice and this can be done through your professional association.

MANAGING YOUR TIME

The normal day can be anything from a gentle stroll to a roller-coaster ride. Working in the context of a practice presents additional challenges and skill is required to deal with these demands and interruptions effectively. Telephone calls, requests from the receptionist, administrative paperwork all force you to manage your time in the best possible way. Some very basic time-saving techniques can be invaluable, and will reduce the likelihood that you will miss your lunch break or an engagement in the evening, but probably the greatest benefit of good time management is to have more quality time, both with your patient and for yourself.

2.1 Starting your day

Set priorities for your activities

There will be many different demands on your time. It may seem overwhelming at times and one of the simplest and most effective ways of managing this effectively and preventing panic or depression is to get into the habit of preparing a daily 'to do' list. Decide on the urgency and importance of each job and then number them in the order in which you want to tackle them. It is important to be flexible about this. If a job is not particularly urgent or important, you may still want to do it before the others if there is an advantage in doing so. Responding to such tasks promptly will clear your mind and enable you to concentrate on the next job.

Certain tasks, such as making an overdue apology or telephoning a difficult patient can tend to fall to the bottom of the list and tend to be put off repeatedly. Why not make it a habit to tackle the most disagreeable job first? Handling such tasks in this way may well give you a positive feel to the whole of the day as you will have already dealt with the most difficult piece of work. Larger jobs become much easier if they are broken down into smaller more manageable chunks and this is best done in writing, by briefly jotting down each step. Even a telephone call can be approached in this manner. First look up the number and write it down, then decide on a time to make the call, review the case-notes and plan and note down what you want to say. When you finally make the call, you will find the whole task much less of a chore.

Avoid perfectionism

High expectations and the desire to do everything perfectly are relatively common among chiropractors. Striving for excellence is of course desirable, but wanting to be perfect all the time may lead to considerable time-wasting. For instance, is it really necessary to explore every minor detail in a patient's history for the sake of completeness? A brief and succinct case history is often more appropriate than an intricate account of every last detail. Compact and well-structured referral letters that contain only the relevant information can also help you to focus on the problem, and are usually much easier for the recipient to read.

2.2 Saving time during clinic

Preparing your clinic and anticipating problems

Time can become very precious once you have started a busy clinic and it can be easy to fall behind schedule due to unexpected circumstances. However, many of the problems that slow you down during clinic can be anticipated. It often pays to spend 10 or 15 minutes before you start your day scanning quickly through your patients' case-notes, looking at the problems discussed at the last consultation.

Agree a code with the receptionist. Sometimes telephone calls can be very disruptive. Most practices have a policy with regard to interruptions and it is worth finding out about this. However, if there appears to be a problem, it might be an idea to raise the issue in one of the practice meetings in order to decide whether some rules need to be agreed with the receptionist and other staff. One idea would be to ask the receptionist not to disturb any of the practitioners and to leave a message in the in-tray if the phone is not being answered after four or five rings. In this way she will know that you are busy, but will attend to the problem swiftly as soon as you have a spare moment. You will also know that the phone will stop after one or two rings (you can even turn the volume down, so you can get on with what you are doing). Alternatively a special phone time can be agreed. To prevent confusion, it is best that individual chiropractors do not have separate arrangements with the receptionist, but agree a common policy.

Dealing with other interruptions

Various requests from patients and practice staff may result in interruptions of the clinic and these can be annoying and irritating if they disturb the flow of the treatment and/or cause delays. Interruptions need not always be inconvenient, some matters can be dealt with quickly but might take much more time than if they were left until later. For example, answering a telephone call from a patient seeking advice quickly between consultations may prevent problems and could save you a home visit later on.

Dictating letters during consultations

Dictating a pile of letters after the day can be tiresome and challenge your memory for details necessitating a revisit of the case-notes. Longer and more complicated letters need to be left until you have finished your sessions, but some of the shorter ones can often be dictated in front of the patient during the consultation. This may have the advantage that certain factors regarding that patient gently be reinforced (dictating for example "I have advised him/her to stop smoking because of the high blood pressure" and you will be able to talk to him/her when he makes an appointment with you"). This also makes you appear efficient by dealing with the referral promptly. It will also build up the patient's trust, as you will seem more efficient having done your part. Letters will automatically be more concise and to the point as time will be limited during the consultation and other patients will be waiting.

Improving the technique you use to end a consultation

If you are running late and have to deal with a particularly chatty patient, you need to be able to end a consultation swiftly without appearing to be rude. Sometimes a comment such as "I am sorry, but I really must get on now" is all that is required. You can also try to summarise the consultation and clarify the situation and say "I think that's about as far as we can get today. Why don't we continue at your next appointment". Non-verbal communication may also help you to convey the message that the consultation is about

to finish, for instance putting the case-notes back into their folder. If this does not have the desired effect, slowly getting up from your chair and continuing the discussion while standing or moving towards the door. By this time, most people will have realised that the end of the consultation is imminent and you will be able to get on with your next patient.

Delegate tasks

As your year develops, it will become increasingly important to free up time needed for tasks that only you can do. The first step is to consider whether there are parts of your work that can be done more effectively by someone else. As a Graduate you should probably talk to your Mentor if you want to delegate work to someone else. If you do most of your photocopying yourself, find out whether this is something the secretaries or receptionist in your practice would normally do.

Delegation does not mean dumping work on others, but rather making the best use of everyone involved, enhancing others jobs. Therefore if you are ever asked to organise delegation in the practice, try to make the delegation as smooth as possible by following a set routine. First decide which tasks to delegate and discuss this with the other partners. If a suitable first person is available, find out whether he or she is prepared to take on the work, then write a simple protocol and train the member of staff. This may only take a short time for a simple job, but once in place you need to check that all the arrangements are being followed. Be supportive to those who you delegate to, just explain that you are trying to make full use of everyone's skills

Keep non-attendance to a minimum

Patients who fail to turn up are a waste of resources and can unnecessarily extend clinic hours. A small amount of non-attendance is probably unavoidable, but if the practice is pressed for appointment times and patients regularly fail to turn up, you may want to tackle the problem. If someone in your practice keeps an eye on numbers of non-attendees, assist them with the monitoring by reporting patients who fail to attend and make a record of this in the case-notes. At the patients next appointment you can then remind them to cancel their appointment at short notice. The practice may have a policy of telephoning patients straight away, or following up with a letter at a later date.

2.3 Dealing with paperwork

Most practitioners have a substantial number of letters and publications through the post every day and unless dealt with promptly these may easily accumulate and mount up to form an unmanageable mountain of paper. Many practices may have a policy where one receptionist deals with incoming letters, separating the urgent from the not so urgent.

Processing your mail quickly

Many of us have good intentions to clear our in-tray every day, as it is much easier to keep ahead than to have to catch up all the time. If you regularly accumulate a large paper mountain it may be an idea to include special 'clearing sessions' in your timetable every week in order to get rid of it as quickly as possible.

Arranging for your mail to be processed while you are on holiday

Many practices have an agreed way of dealing with each other's mail while colleagues are on holiday and your Mentor will be able to tell you how this system may work. If your practice does run a system where someone else can deal with incoming mail, this does

maintain the smooth running of the practice and of course you will not have to face the prospect of an overflowing and depressing in-tray on your return to work. Sometimes though, it can be a disadvantage not to have seen the mail. For this reason it may be sensible to have copies made of important letters so you keep abreast of what has actually been happening.

Making the best use of your spare time

Quite often gaps will appear during your working day which can become quite irritating if you start to wait around impatiently. It is helpful to have impending paperwork available for these unexpected waiting periods. For example you can catch up on letters and any reports that may be waiting to be sent out. Of course a wonderful alternative is simply relax and have a nice cup of tea!

2.4 Meetings

Making the most of meetings

Getting together can be useful for exchanging information, mutual education, reaching agreements and keeping in touch socially. Badly run meetings can also be time-consuming and an inefficient way of exchanging thoughts. After a few weeks you will probably have a fairly good idea of how the practice works. You may actually feel you can improve the situation and I am sure your Mentor would be open to reasonable suggestions and you should not feel shy about mentioning these. Reviewing how you work and communicating is an important part of being a chiropractor, so there is no reason why you should not start to become involved in this early stage as a Graduate.

Staying in control

To prevent meetings from going on for ever, you may suggest agreeing an agenda and a fixed starting and finishing times with everybody and making an effort to adhere to them. One of the main problems is with items that have been discussed and agreed, tend not to be implemented. Therefore keeping track of any plans and decisions through the recording and distribution of minutes is vital.

2.5 Home Visits

Home visits are discretionary, but you can learn a lot about your patients and their social environment by visiting them at home. This is a wonderful opportunity to get an impression of how the local practice community lives. Home visits can be full of surprises, giving unexpected insights into your patients' lives, and may be very enjoyable.

Urgent visit requests

Try to encourage patients to come and see you in the clinic, unless you feel for some reason that you would rather see someone at home. Spending time taking details and asking questions about their symptoms and the development of their condition over the phone should give you a fairly accurate idea of the relative urgency of the call. On most occasions it is easier for the patient to visit the (well equipped) clinic. However, to persuade patients to come to the clinic, you need to be able to arrange an appointment within a reasonable period of time and provide an adequate explanation over the telephone. Agreeing to see a patient immediately for an urgent appointment usually takes far less time than a home visit.

House calls

Ask your patient to help you find the right house in the darkness. In some areas locating your patient's home can be time-consuming. Cars are sometimes more distinct than houses, so you could ask your patient to tell you the type of car parked in front of the house. A strong torch can be very useful. Some house numbers are difficult to see. Obtain a detailed street map of your practice area and if necessary road plans of local housing estates (try visiting www.streetmap.co.uk - all you need is a post code which should be on the patient record card.)

On-call

Before you make your first practice on-call out-of-hours, it is essential that you know how to communicate with other members of the practice and what happens in an emergency and that the practice knows where you will be. You will need a bag for emergencies when you have to go on call. With the help of your Mentor, devise your own personal list of items which you can use to stock the bag. This is often a good topic for one of your first tutorials when you can discuss management of emergencies. See Appendix B.

Keep your car in good working order for those bad weather conditions

A reliable car is essential especially if you are in rural areas, you need not drive the latest model, but investing in a car service and getting the necessary repairs completed before you take up your post is often money well spent. Cold weather can make visiting fairly unpleasant unless you are prepared for chilly conditions. Make sure your tyres are in good condition and in the event of a flat battery; a pair of jump leads can be very useful and are inexpensive.

Practice emergencies

Emergencies occasionally happen and can be extremely alarming when encountered for the first time. It is a good idea to talk to your Mentor and other chiropractors about the emergencies they have already encountered and have thought through others beforehand. Know the practice procedure for handling emergencies.

Stay safe on home visits

Problems with patients or relatives on home visits are rare, but it pays to try to avoid getting into unpleasant situations, especially if you work in deprived areas. If you need to go on a potentially difficult visit, make sure that you inform your receptionist as to where you are going and how long you will be away. Very rarely you may need to be able to leave swiftly in the event of unexpected danger to yourself. So, on arrival, you should consider the potential need for a quick exit.

Security

Some patients' homes may be in an appalling state, particularly if they have been incapacitated for any length of time, but you should try to avoid showing any signs of either disapproval or approval. Driving about in a flashy car and expensive clothes may attract unwanted attention. Swapping your bag for a rucksack may make you less obvious. Appearing professional but not overstated is the best approach.

Although aggression towards chiropractors is rare, assaults do occasionally occur. If you are ever attacked verbally or physically, it is absolutely essential that you talk to your Mentor about it, as such an experience can be extremely disturbing and upsetting. Any form of violence towards you is completely unacceptable, and you need to get the

support of your practice and colleagues. It is important that such incidents are discussed with the practice partners. If necessary, further action needs to be taken for you and your colleagues' own safety, which may require involving the police.

The Communication Game

Effective communication is a key skill for a successful chiropractor. The core of this is your interaction with patients. A continuous exchange of information within the practice and with other health professionals is essential to good patient care. Many of you may feel that you have these skills already, but it may be helpful to consider adopting certain strategies that other chiropractors have found useful.

3.1 Using the telephone

The telephone is one of your first options

In many situations the telephone call is a much quicker and easier way of communicating than writing letters, or going to see a person face to face. Whenever you are speaking to a patient, relative, other chiropractor or a general practitioner on the 'phone, it is usually best to have the case-notes of the patient involved in front of you. It is easy to confuse patients' case histories, and by not having the necessary background information available, you run the risk of getting caught out at some stage and mixing up important details, which could be a little bit embarrassing at the very least.

Preparing a structure for important telephone calls

Talking to upset relatives or an angry patient can be difficult and in the heat of the moment it may be easy to forget what you intended to say. Briefly jotting down a few points before the call can help you get back on track if emotions start to run a little higher than expected.

3.2 Dictating letters

Learning to dictate

If you have not dictated letters before, it may take a while to get used to talking into a Dictaphone, but this is certainly one of the quickest and easiest ways to produce letters. Practising is the key to good dictating, as many secretaries will confirm, having listened to badly dictated tapes all day. Ask the secretary for some feedback on your dictation and find out whether your tapes are easy to listen to. Well dictated tapes will help to reduce spelling mistakes and other errors, saving time and hassle for both of you, preventing mix-ups of information. Secretaries do not have a full medical training and cannot be expected to know all the medical terms. You may spare yourself many requests for clarification if you spell difficult words, especially those which sound similar to other words, but have a different meaning. You will also reduce the number of embarrassing or even dangerous mistakes.

3.3 Referring patients

Providing the appropriate information

In general, enough facts should be supplied to describe the patient's condition and the context adequately. It is often easy to forget to mention even basic data when you have

to dictate or write under time constraints. For this reason, having a list of paragraph titles in front of you may help you to remember all of the important topics that you might want to include in your letter. Try also to include your line of thought, your reason for referral and details about what you have told the patient. Clearly state what you expect from the referral in order to improve your chances of getting the desired results.

Anticipating questions when telephoning

It will make the referral smoother and strengthen your case if you can anticipate the questions that are likely to be asked by the GP or other chiropractor, if you can have the answers at your fingertips. Very rarely it may be necessary to argue quite strongly and with some enthusiasm, but always be open to suggestions. However, you are acting on behalf of your patients and are responsible for your actions. Therefore it is sometimes sensible to be assertive once you have made up your mind.

3.4 Communicating with colleagues

As you gain experience and your time is taken up more and more by patients, it is easy to feel isolated, especially if you are going through a difficult or hectic period. The amount of contact and interaction between chiropractors varies from one practice to another, and in addition to sharing information, meeting up with others in the practice is important for providing mutual support and understanding. This can also be gained from Regional Faculty Meetings and Sub-faculty Meetings.

Sharing breaks with your colleagues

Having short breaks with your colleagues, even if only a quick cup of coffee can provide a good opportunity to unwind and improve team spirit. Even if you are busy, try to make an effort to meet up with your team if you have regular scheduled breaks. Many of the minor problems that affect the practice can often be resolved quickly and informally over a relaxed chat before they have a chance to grow and become a burden. Moreover, talking about personal matters can also make you and others more aware of any problems at home that may be causing stress at work. Knowing about any difficult periods in the personal life of a colleague may make it easier to provide support and can ease some of the workload for the affected person at an early stage. If you do not regularly bump into your colleagues during a normal working day, why not suggest introducing informal breaks at mutually convenient times to give people a chance to meet? You should check this with your Mentor first, as there may be good reasons why your colleagues decided not to meet regularly.

Asking your Mentor for Advice

Graduates often need to ask their Mentor for a second opinion or for guidance with regard to clinical problems, especially during the first few months of training. In order to reduce waiting times to a minimum, many Graduates and Mentors agree on a mutually acceptable system for contacting each other. This may very well depend on personal preference, as some Mentors may not like to be interrupted during a clinic, whereas others may not worry about it. Allowing your clinics to overlap with some of your Mentors' administration sessions can also help to keep disruption of consultation to a minimum.

3.5 Talking to patients' relatives

Identify a key person

Having to cope with a group of concerned and anxious relatives can be difficult. Whenever possible ask the patient's permission regarding the passing of any medical details to their next of kin. Always be aware of confidentiality, especially when both husband and wife are your patients, or you work in a small community. If you have problems and are not sure how to proceed, you need to discuss this with your Mentor. (refer to the GCC Code of practice on this matter).

Take relatives' requests to talk to you seriously

Whenever a relative wishes to speak to you about one of your patients, try to find some time to discuss any matters of concern. Relatives often play a central role for patients, and their worry can easily transfer on to them. They can be a valuable informant, especially with regard to the elderly, and often provide important clues as to what is really wrong with your patient.

3.6 Handling complaints

Reacting to complaints

Patients tend to be more informed about medical problems these days and may have a lower threshold for filing complaints if they consider that some aspect of their management has been unsatisfactory. Although sometimes complaints may be justified, some people tend to complain more out of frustration, and it is easy to feel offended and upset. Sometimes complaints can be valuable feedback, it is important for you to know whether patients or relatives are unhappy with any aspect of your management. Most complaints are not necessarily a criticism against you personally, but rather an action arising from uncertainty, anger, worry or helplessness, so be prepared to expect complaints at any time in your professional career, even if you have not made any mistakes, and try to avoid knee-jerk reactions.

Obtaining the necessary background information

When a complaint comes in, it is best not to comment before you know all the details. Practices are obliged to have an in-house procedure and you should find out early on in your training year how the procedure works.

Being open and frank

We all make mistakes, and it is important to be able to admit these both to ourselves and to our patients. (I am not sure the insurance company would agree with this ??) Many informal and formal complaints can be avoided by taking the time to find out exactly what has gone wrong. Often a simple apology or explanation early on is all that is needed and, contrary to common belief, this does not increase your risk of being sued. If you are accused of having made a mistake, it is important that you get support from others. Talking to your Mentor and other colleagues as well as to your peers about any mishaps can help you gain an objective view and can also provide you with enormous support. If an allegation is of a more serious nature, contact your professional organisation early on, as they are usually more than happy to give advice over the phone.

3.6 The Media

The media on the whole are very interested in chiropractic, although it is unlikely that a journalist will select you for an interview, it will probably be an experience in talking to a journalist and there may also be a small risk that you accidentally provide them with information that you should have handled more sensibly. Do not ignore enquiries from reporters, as they are likely to report the story any way, with or without your help. Try to find out what their questions are and the name of their employer or agent. You can then offer to ring them back, after having consulted your colleagues, so that you can make some preparatory notes of what you want to say.

It is generally wise to be cautious about what you say to reporters as everything will be on the record unless you agree otherwise. Any journalist is free to quote anything you say and to mention your name.

3.8 Giving evidence in court

Fortunately to appear in court does not often occur. Even if you are not directly involved or to blame for anything, you may still be required to give evidence. Patients are now more likely to sue and be interrogated by a barrister can be both nerve-racking and unsettling, so it is wise to follow a few simple rules.

Prepare yourself emotionally

Being questioned by a judge or barrister can feel very threatening. Those chiropractors who are put on the spot feel rather anxious and it helps to prepare thoroughly before appearing in court. Contact the College's Society of Expert Witnesses early on, they may well provide you with some advice and helpful printed information.

Anticipate questions about your management

As it is probably impossible to remember all your patients, it can probably not be over-emphasised how important it is to keep clear and accurate, legible notes and also to time and date every entry whenever you write anything in your patients' notes. It may help to bear in mind that at some time your lines may be read out in court, which can be rather embarrassing if you made any inappropriate remarks.

State your evidence clearly

It is best not to try and mix facts and opinion, and also not to expect to have to justify what you have done. Critical questioning by the barrister is part of the process of testing evidence, and by reading your statement carefully you can often anticipate likely questions and work out how you would answer them in advance.

Answering questions appropriately

In the heat of the moment it may be very easy to get sidetracked in your explanation. Confining your answers to precisely what was asked can be more difficult than expected when you are on the spot. Try not to use technical terms without explaining them to non-medical individuals. Aim to speak slowly and clearly when you address the judge, not the barrister who is asking the question. Although you may be tested, do not try to argue with the barrister or lose your temper; try to avoid offering your opinion unless you are asked for it.

BE HAPPY – STAY CALM

Most training practices provide a gentle introduction to the new chiropractor with longer appointments and shorter clinics. This situation tends to change once your clinical responsibilities start to increase. Despite supervision and back-up from your Mentor and other partners, as time goes by you will have to make more and more important decisions on your own, and as your clinic gets busier, it may sometimes be difficult to make confident and quick decisions under pressure.

Stress levels can be high merely due to the fact that we perceive what we do as stressful. On some days even moderate workloads may not bother us, while on others every minor disruption seems annoying. A certain amount of stress is probably both important and necessary to keep us going. A busy day in practice may be very invigorating and produce an exciting sense of alertness. However, the balance can easily tip, with too much stress causing distress and leading to a feeling of loss of control. Work then becomes a struggle and you may find that you suddenly become less productive than you would like to be.

4.1 Some techniques for reducing stress

Face conflict

Most practices are pleasant to work in, and new graduates are usually made to feel very welcome. However, you may find that you do not get on with one of the members of your practice. If you feel that is the case, it may be an idea to talk to that person early on to try to identify the problem. However, this is often easier said than done and talking to your friends or colleagues may help you to shed new light on the situation, or may even suggest a solution. Very rarely, personality clashes may be of a more serious nature and, particularly if this involves your Mentor, you probably ought to discuss this with your Regional Tutor in confidence. Changing your training practice could be one option if all else fails.

Get to know your personal reactions to stress

When you are looking after patients it is very easy to become so completely absorbed in your work that you neglect your own health. It is important to recognise symptoms of too much stress in yourself, and becoming unusually irritated with patients, feeling depressed, starting to drink more alcohol or dreading going to work could be warning signs that your batteries are starting to run low. If this happens, it may help to be self-aware and analyse yourself in the same way that you would diagnose a patient. Consider what you would advise if you found these symptoms in someone else, and if this does not improve matters consider talking to your trainer, other colleagues, Regional Tutor, friends or your GP.

Reflecting on your attitudes at work

When starting in practice, most chiropractors have high expectations of themselves and try to work to high standards. It is very commendable, but it can lead to an increase in stress and anxiety if you cannot achieve the goals that you have set yourself. Set aside some time, alone or with your mentor, and consider what you would like to achieve in the short, medium and long term. This can be called a 'Personal Development Plan'. It is also useful to develop what is called a 'Reflective Diary' where if you come across any

problems during the day you can write on a piece of paper your particular problems them down and then you and your Mentor can view these at the end of the week.

Developing skills to deal with failure

Although most of us try to keep mistakes to a minimum, mistakes do unfortunately occur. Developing your own system of arranging follow-up can help you deal with problems that you are uncertain about and will reduce the likelihood of any major disasters. Try talking to your Mentor and other colleagues openly about mistakes that you have made, or think you have made. It can be a tremendous relief to have someone else help you put a situation into perspective, possibly making you realise that you may not have acted wrongly in the first place. Remember no one is perfect.

Maintain a balance between private and working life

Involvement in patients' problems can make switching off after work difficult. If you enjoy work and stay interested in your patients, regular recharging of your batteries is essential. Keeping up with your hobbies or developing new ones can help to restore the balance between your personal and working life. Spend quality time with your family and friends, and do not let work take over completely.

Value your contacts with the practice team

Other members of the practice team can be a very useful source of support. Having a cup of coffee with one of the partners, or knocking on an open colleague's door, can be very relaxing. This gives everyone the opportunity to offload, unwind and chat about issues that might otherwise be on their minds all evening. Similarly, just sitting back and spending a few minutes chatting with a friendly patient can be very refreshing, and often gives you a surprising insight into your patient's life.

Try not to do everything yourself

Sitting alone with patients in your consulting room can give rise to the desire to tackle every problem on your own. Do not be afraid to ask for help when a situation seems to get out of control. Members of the practice must rely on each other, and many colleagues will be very willing to help you if you become completely bogged down with work. Consider delegating jobs that could be done equally well by someone else and try to foster an atmosphere of mutual support in the practice, playing your part as well as offering help when your colleagues are busy.

Remember appreciative patients

Some chiropractors file 'thank you' letters they receive from grateful patients in a special folder. Far from being a form of self-congratulation, this can often be a valuable personal resource for those depressing moments when you feel that everything you do goes wrong. Just reflecting while reading a couple of appreciative letters can put you back on track and provide comfort when spirits are low.

Have a tick-list for annoying moments

We all have personal 'sensitive spots' and get irritated by things like patients arriving late. Try keeping a tick-list on your desk to help you cope with all those irritating occasions that you cannot do much about. Mark a tick each time something annoying happens and, after ten or twenty ticks, treat yourself to something such as a new CD or a ticket to a concert. This is sometimes very effective in limiting your anger by associating a positive outlook with your small treat. But no cheating!

Try to become more assertive at work

Being assertive does not mean acting aggressively or becoming pushy. On the contrary, it is a way of putting forward your own ideas, feelings and needs and equally respecting the right of others to do the same. It also means being able to stand your ground in a non-threatening manner, which can help you to take more initiative and handle difficult situations more effectively. In addition, assertive behaviour involves learning to say 'no'. Time is often at a premium in chiropractic practice, and not being able to work at a comfortable pace can make your work very stressful.

Use music to relax

It can be refreshing to lie down on your treatment couch for a couple of minutes after a hectic morning and listen to some of your favourite music. A little relaxation of this kind can improve your concentration noticeably for the next few hours, but everything in moderation, unless you don't mind waking up in the middle of the afternoon with a long queue of patients waiting for you. Some of your more boring paperwork can also become more tolerable with your preferred music playing in the background.

Be objective when comparing your workload with that of others. Sometimes frustration and negative feelings arise from thinking your colleagues are dumping work on you. This may be the case, but you should be very careful about making any assumptions. Try to gather some kind of objective evidence before mentioning your concern to anyone. More often than not you will find that you are wrong. As a rule, if you are feeling hard done by you are probably only working just as hard as your colleagues. Moreover, any offer you may make to help a colleague on a frantic day while you are having a quiet spell will usually be very warmly received and may be returned in the future.

4.2 Less stress during clinics

Learn to cope with delays

The time that is required for each consultation depends on various factors, including your personality and the individual problems with which patients present. Whenever you get delayed, try not to panic – even the best chiropractors overrun. It is far more important to provide good care for your patients than to be obsessed by keeping to time schedules. Try not to rush too much, as this will make you feel even more stressed and also more likely to make mistakes or forget things.

Identify your personally required appointment length

If you have gained a reasonable amount of experience and still find keeping to time during clinics very difficult, you may want to explore other options if regularly running late is stressful to you. For example, you could discuss this with your mentor whether it would be possible to increase the length of your appointments. If you come to work early every morning in any case to avoid the traffic, starting half an hour earlier could prevent tension from rising during the following hours. Some patients might even prefer to see you early in the day before they have to go to work. Alternatively, you may be happy to lose an hour of your lunch break and finish later while keeping the same number of appointments, only slightly more widely spaced. Another way of reducing pressure is to introduce 'comfort breaks' in the middle of a very long clinic in which to catch up and have a scheduled relaxation session.

Tell your patients on arrival how far behind you are

Most patients will accept a wait if you deal with their problems adequately during consultation. However, as with waiting for a delayed train, people usually prefer to know for how long they have to wait. Knowing that you are at half an hour behind, they may decide to go out for a stroll or make a telephone call in the mean time. If you ask your receptionist to do this for you, patients will usually be much less inclined to be angry. Apologising or briefly explaining to your patients why you are late as soon as they enter your room also prevents them from venting their frustration.

Restoring your energy levels

During long clinics, you may become very hungry and thirsty, and the thought of missing your coffee or lunch break can be exasperating. For these 'dry spells', keep an emergency supply of fruit or other snacks and something to drink in your room - it helps maintain stamina until the last patient has left. Keep chocolate in a safe place – it may attract unwanted attention!

Make short breaks after difficult consultations

Challenging patients can be demanding and require considerable concentration and energy. If you feel exhausted or angry after an arduous consultation, you could nip outside and walk briskly for a minute or two. This can be very effective in restoring concentration and putting things back in perspective before you see your next patient.

4.3 Implementing change

Learning to manage change

Being unhappy about how your clinic runs, or how the workload is distributed, may sometimes give rise to stress. Managing and introducing change are therefore important skills for chiropractors to develop, and there is no reason why this should not start in your first year of practice. However, no practice is perfect and there is almost always more than one way of doing this. Before launching an attack on the current system, therefore, it is usually a good idea to reflect on the history of your particular clinic and to find out whether any colleague has a special fondness for the present way of working or reflect on why things work the way they do.

Strategies for implementing change

There are various reasons why change may not be introduced in a clinic. Change could be planned after discussion at a practice meeting, or can result from a serious incident that may have happened in the practice. Change may also be the result of a personal idea suggested by a member of the practice. Health care professionals should also regularly scrutinise the way in which they perform tasks and functions through clinical audit, reflective continuing professional development and action research. This can all influence way in which the practice runs or how the mentoring is conducted. In most cases it is best not to try to change everything at once. However, at the same time it is still important to try to keep alive the ideas and enthusiasm that people bring with them.

Convincing your colleagues

You can improve the chance of convincing your colleagues if you prepare a short summary of what you hope to achieve, and the reasons why such a change can be beneficial. It is important not to get too disheartened if, as happens in many cases, you meet with some degree of resistance from other members of the practice.

In the case of minor or less important issues, it may be as well to admit defeat early on and keep the peace rather than being too obstinate. However, if you feel very strongly about something, there is no harm in persevering a little longer.

During your first year, there is likely to be resistance to the “new kid on the block” wanting to make changes. Using tools such as audit to allow individuals within the practice to identify a problem for themselves that they may well be unaware of either through not being able to see wood for the trees or through habituation or denial can be a way to stimulate change without being seen as a smart Alec.

Stimulating others to come up with new ideas

Some practices work very well as they encourage all members to make suggestions that save time, effort or money. Receptionists and Practice Managers can often come up with the most ingenious proposals and ideas about how to make both their work and yours more effective. Why not suggest that everyone tries to promote an atmosphere of striving for continuous improvement. It may be useful to ask everyone to provide at least one suggestion every so often, which could improve their and your ways of working. Another simple way, also very productive, you could offer a special incentive or a present for anyone in the clinic who can come up with an idea that would lead to significant improvement in the clinic.

FINE TUNING THAT CONSULTATION

A consultation is the central element of practice, and becoming experienced in consultation skills may require many years of training and practice. However, one has to start somewhere. This section aims to provide some simple suggestions (that may not always work!) on how to tackle some difficult or more unusual patient contacts that may be baffling when you first start work as a new chiropractor.

Generally speaking, the great majority of patients are undoubtedly very pleasant and enjoyable to look after. However, most chiropractors will invariably have a couple of characters among their patients who may cause an immediate ‘fight or flight’ reaction as soon as their name is spotted. These few people, who may have difficult personalities, exuberant demands or a multitude of problems, sometimes pose a definite challenge, making us doubt our own competence because we find it difficult to cater for their needs. A few strategies may help you to make the most of these encounters, resulting in a satisfactory consultation for both patient and chiropractor.

5.1 Unpleasant patients

Every practice has some patients who may be unpleasant, dirty or smelly, or who display irritating behaviour. It is all too easy to react in a judgmental way and deny those patients the interest and attention that they deserve. Make it a habit to find out why and for how long a patient has been in poor health or shown personal neglect. A little detective work can be very rewarding and yield surprising results. It will increase your interest in the patient, and may lead you to finding a remediable reason for a particular presentation or behaviour. Flicking through the past history in the case-notes may also reveal a variety of more serious incidents that your patient may have experienced and

which may be responsible for them being difficult or unusual. You may never find an obvious cause, but knowing about a person's background may make you regard your patient with more empathy and therefore in a slightly different light.

Challenge your own attitudes

From time to time it is not the patient who is the main problem, but rather your own attitudes. It can be quite difficult to cope with failure, especially when our expectations are very high. You may be faced with a mountain of problems in a single patient, all of which are almost impossible to solve. In such cases, it is sometimes helpful to sit back and to try to form a realistic view of how much you and your patient may be able to achieve. Rather than expecting complete success in every patient, setting goals that are tailored to your patient is often far more practical and worthwhile in the long term.

Value your achievements

Some patients can indeed be very hard work. You may struggle for months to resolve a problem, only to find at the end that your advice is being largely ignored. However, very often your input will have made some positive difference to your patient, so it is often far better to concentrate on your successes, however small they may be, rather than on all those high expectations that you wanted to fulfil but never did.

Probe below the surface

If your patient presents with unusual symptoms, you may want to make it a priority to find out what really lies behind the complaints. From time to time, vague symptoms such as aches and pains indicate a deeper problem of a social, psychological or financial nature. Investing some initial time and effort in listening to and exploring the reasons for making an appointment, rather than quickly giving a quick treatment can save a considerable amount of time in the long term. A simple question "What do you think is wrong with you?" can sometimes produce surprising revelations about what is going on in your patient's mind.

5.2 Examine your patient - Therapy, not just diagnosis

Physical examination is being taught as mainly diagnostic but can also be a very powerful therapeutic tool. You learn to focus your examination on the presenting problem, and at times it may become very tempting to take short cuts. However even if you are sure from the history that a condition is benign, you can sometimes only reassure your patient adequately if you examine the affected part of the body thoroughly. For instance, taking some time to explain that you are checking for signs of 'pressure of the head' when examining the cranial nerves in a patient with headache may be very helpful if there is an underlying concern about a brain tumour.

Similarly, listening to a patient's chest could make a small but significant difference, as it may alleviate unfounded fears about a serious condition such as tuberculosis or cancer. Appropriate and thorough physical examination may reduce the number of follow-up consultations for reassurance if you can confidently lessen your patient's concerns and worries. On the other hand, you may sometimes uncover surprising findings that you would never have expected from the history. For many patients there is still some 'magic' in using gadgets such as your sphygmomanometer, which may be a surprisingly effective form of treatment.

Break down patients' problem lists and tackle each problem individually

A small number of patients occasionally bring a long list of complaints with them into the consultation, and these are usually impossible to deal with in a single session. Take a deep breath and relax, as you do not need to solve all of the problems at once! Asking your patient to run through the whole list at the beginning can help to identify and prioritise the most important items. It is often much easier to come to an agreement when the boundaries and time constraints during a single consultation are made clear from the start. Most patients are happy if you prioritise their problems, so long as you indicate that you will attend to the rest of them at some stage.

Deflate patients' expectations

You will encounter individuals whose demands may be quite unreasonable with regard to their management, and this is often not their own fault but due to incorrect or inadequate information that they have received. Rather than blaming the patients for these high expectations, it is often more important to educate them and to make it clear that you are not omnipotent.

Demands for certificates

Requests for sick notes and medical reports are common. Dealing with these inappropriately and being judgmental in either direction may have far-reaching consequences. Always make sure that you know the purpose of a certificate, and try to get all the facts right. If you have to refuse a sick note, be honest with your patient and explore other ways of helping them. Offer to discuss the problem, and consider referring them for a second opinion if you are unsure whether a problem is genuine.

Using written messages for your patient to take home

Some patients do not like leaving without something written down; therefore think about writing down a personal management plan. Some practices have patient information leaflets loaded on their computer so that copies can easily be printed, or you could hand out relevant leaflets from your own filing cabinet and underline the information that is relevant for that particular patient.

Share difficulties with someone else

If you are really struggling with a patient, talk to your mentor or Regional Tutor about the problem. Just sharing your thoughts can be invaluable in itself. Older colleagues in particular, who may have known that patient for many years, can often provide new insights and interesting details about your patient's history that you may not have found in the notes. These may completely change your perspective on the matter and increase your understanding of the problem.

Keep your sense of humour

Occasionally it is easy to get frustrated with some patients, despite all your best efforts. Try to remain positive and even enjoy your problem patient by regarding them as a challenge and by trying to appreciate the humorous side of absurd situations. If you have to see a patient whom you do not particularly like, try to find some common ground to talk about, such as sports or local issues. Although you may never become close friends, it often can often improve your professional relationship dramatically. If you are lucky and discover the reason responsible for making the patient such hard work, you may even be able to transform your 'heart sinks' into your 'gold star patients'!

Aggressive patients

It seems fair to say that aggressive patients and relatives are rare, although this may vary depending on the practice area. However, intimidating or violent patients can be extremely frightening and nerve-racking. It is often difficult to maintain an objective view and not to take aggression personally, as becoming aggressive is commonly a reaction to frustration, anger or guilt.

Dealing with aggressive patients or relatives is a complicated area, and much thought, experience, reflection and training will be required to become confident in dealing with it. Here are just two possible approaches that you may want to try out. When faced with unexpected aggression it may help to try to distance yourself and to attempt to put your patient at ease. Rather than responding defensively or aggressively yourself, see whether you can surprise your patient by being extremely polite (which admittedly is not an easy thing to do, but may sometimes be astonishingly effective!). Always think about your own and your staff's security first and summon help if a situation gets out of control.

Using role-play

Role-play can feel embarrassing if you have not done it before, but it is an extremely useful tool for anticipating and preparing for distressing consultations. You could try enacting difficult situations with your Mentor or colleagues, as part of a tutorial on the half-day release course with your Regional Tutor. You can swap roles or experiment with your responses, and practising in a 'safe' environment and receiving feedback about your performance can be a great learning experience. It should also be far less intimidating than the real situation. Unless your counterpart goes over the top, of course!

5.3 Puzzling problems

It is not uncommon to be confronted with symptoms or signs in your patients that either appear too mild or which do not fit any familiar picture. There are various ways to approach these 'mystery' patients' complaints that will probably be discussed as part of your training, or can be read about in more detail in books on the consultation. The following only are a few suggestions that can be tried initially, even with very little experience.

Take trivial presentations seriously

It is very easy to become annoyed with patients who present to you with very minor symptoms; this may include a parent bringing in a child who has just a mild ache for only a few hours when you were expecting a more serious problem. However, quite often concerns of a more serious nature may be hidden behind the side of a minor problem and it may be worth trying to find out about any underlying concerns.

It is the parents' job to worry, but sometimes their fear may escalate out of all proportion, especially at night or if they are tired and at the end of their tether. In these cases, simple reassurance and acknowledgement of their concerns are of most help and will be appreciated much more than a magic cure. Knowing the reasons for a patient presenting with a trivial complaint can often shed a revealing light on the issue, and being able to relieve their underlying worries can be immensely satisfying.

Approach complicated patients systematically

Patients do sometimes present with vague or difficult symptoms, and may have frequently consulted various chiropractors. If you are unsure about what is wrong with a

particular patient who is well known for consulting with non-specific complaints, it can sometimes be quite effective to start again from scratch rather than just treating individual symptoms.

Reviewing the notes thoroughly, repeating a focused history, performing a comprehensive physical examination and designing a new problem list will help you gain a new perspective, and are all particularly important if you do not know the patient very well. This is not to say that you will necessarily find out what the problem is - having to deal with uncertainty is unfortunately part of the game. However, you may be fairly reassured that you have not missed anything obvious.

Get help at a relatively early stage

When patients consult again and again with the same problem this is sometimes a sign that there is something wrong, and it should ring warning bells. The problem may be of a medical nature in that you may not have reached the full diagnosis or started appropriate treatment. Alternatively, it may have something to do with your chiropractor-patient relationship and your patient may not be adequately reassured.

Instead of struggling on by trying out various other treatments, try to get help whenever a patient returns more than twice with the same problem. Ask your mentor for advice and a fresh perspective, or refer your patient to another chiropractor in the practice who may have a special interest in that particular field. However, this should be a general referral rather than a simple dumping of a problem on to someone else so it is only polite to ask your colleague for permission first.

All of this should help to build a relationship of trust with your patient and should not be seen as an admission of defeat on your part.

5.4 Infants

Talk to small babies

Examining newborn babies is usually great fun. However, if they start to cry because they are unhappy for some reason, this can become rather distressing not only for them but also for the parent and yourself. Quite often babies are soothed by a gentle human voice, so talking to them softly may make examination much easier. Moreover, accompanying parents (or the legal guardians) will also have more confidence in you and are more likely to see you as a caring professional if you treat babies as your 'patients of honour'.

Give children time to start trusting you

Seeing children in practice can be the highlight of your clinic – or a nightmare if they are in a bad mood. It may take a while to become confident in seeing children, and a little practice as well as patience is often required. As you only have a short time for each consultation, it is tempting to get down to business quickly and home in on the painful area. However, if one move is made too quickly the child can become very uncooperative, making further examination almost impossible.

Children are probably more likely to trust you if their parent does so and therefore it is usually a good idea to try to establish a good rapport with the mother or father first.

Talking in a calm voice and carefully establishing eye contact with the child, holding back a little as soon as the child withdraws may help.

5.5 Toddlers

Threat reduction

Gently touching or stroking a foot while they are still sitting on their parent's lap is a far less threatening first contact than examination. Children often feel more at ease if you get down to or below their level. They can feel vulnerable when lying down and spines can usually be palpated with the child sitting on their parent's lap or, in the case of older children, standing. If a child is completely uncooperative or distressed and there is no obvious serious illness, it is better to defer examination rather than forcing the issue and fostering resentment.

Use indirect and playful language

With a disobedient or uncooperative child, an indirect approach can be employed. For example, to look at a neck you can ask if they have washed behind their ears and then make a play of looking for potatoes behind the ears whilst examining the neck. Looking at teddy's or mum's neck first helps to alleviate a child's apprehension.

Bring toys into the arena

It is often easier to examine children if you can manage to distract them. Small children (and also many chiropractors) enjoy playing with toys and the more outrageous the better! You can often attract children's attention by putting some noisy and wind-up toys on your desk. For example, little monsters or 'walking dentures' are great fun for everyone involved and can help to keep a child relaxed and attentive during your examination.

5.6 Adolescents

Beware of potential pitfalls

Young people who are experiencing all the ups and downs of puberty form their own group of patients that can be very rewarding but also challenging to work with. Often a fair amount of experience and training is necessary to become confident in managing all the different problems with which adolescents present. This section can therefore only touch on this difficult area. For example, the issues of confidentiality can become particularly difficult. You will need to feel confident in this field, and should make sure that it is dealt with in sufficient detail during your probationary year.

It is relatively unusual for adolescents to present on their own and, ordinarily, you should never treat anyone under the age of 16 (and, arguably, 18) without informed parental consent. If in any doubt, your mentor should be consulted. If an adolescent comes to see you about an apparently trivial problem, this should ring some warning bells, as there are sometimes deeper underlying reasons for making an appointment, which can be missed easily. However, the trivial symptoms can also be completely genuine, so do not get too alarmed too soon.

Listen attentively

It is easy to regard adolescents as young adults, but in fact their position is unique, as they may show the conflicting attitudes and behaviour of both children and grown-ups at

the same time. Try to make them feel at ease, as it may be difficult for them to talk to adults openly, and make it clear that you are listening to their point of view and are not automatically taking their parents' side. You may find that using clear and simple language mixed with humour can be a good way to avoid lecturing or sounding patronising. Often adolescents who come to see you accompanied by a parent may find it difficult to open up and historical detail may be withheld. Whereas it is tempting to find some excuse to send the parent out of the room for a while, it is highly inadvisable to see the person alone - if it becomes necessary, ensure you have a colleague present (this can be done under the guise of seeking a second opinion).

If you are told something in confidence by a legal minor in the absence of a parent or guardian (e.g. pregnancy, drug habit), this can open a "can of worms" when it comes to balancing confidentiality and patient trust against medical need. Remember that your primary duty is to the patient and consult your mentor, your professional association or the College's paediatric faculty if you are unsure of how to proceed. This is one area where even an experienced practitioner would wish to seek clarification, so never act in haste.

5.7 Record Keeping

Structure your records in the case-notes

Especially in a clinic with a number of chiropractors, good communication about patients is important. As the records tend to be relatively brief, using a framework for jotting down the essential information can both help you to focus and enable others to understand your management more clearly. If your practice is fully computerised and no longer uses case-notes, find out how you can structure and highlight any of your entries.

One of the most useful ways of recording is still the widely used SOAP system:

- Subjective: complaints and symptoms
- Objective: clinical findings
- Assessment
- Plan

Although it is a little rigid and not necessarily appropriate for all problems encountered in practice, it is often useful as a basic tool and starting point. In addition, it can be helpful to use problem lists liberally and to write down your views, which will make it easier for your colleagues (as well as yourself!) to follow your thoughts. It can also help to jot down what you want to do in the next consultation. This can give you a swifter start at follow-up, as it is sometimes easy to lose the plot.

Highlighting important findings and test results

Time is often limited during a busy clinic and it is difficult to review the case-notes in detail. You can make life easier for yourself and others by marking abnormal or key results with highlighted boxes, or by underlining them in red pen. A cross-reference to any significant investigation report that has been filed elsewhere in the case-notes will also help to prevent important results being overlooked in the future.

READY TO MOVE ON

There are a variety of job options available on completion of your probationary year. Starting as an associate in your existing practice or moving to another seems to be the most popular choice at the moment. Some chiropractors begin work as a locum as this allows you to be more flexible and provides the opportunity to work in many different practices before settling into a more permanent position.

6.1 Self-employed status

Becoming an associate may involve a change to being self-employed, which basically requires you to set up your own business. The local department of social security (DSS) provides free leaflets that contain some useful general information about issues to consider when becoming self-employed. Your national insurance (NI) contributions are normally deducted from your salary if you are employed but as an associate you need to pay NI contributions yourself, so contact your local NI office to arrange payment. Unfortunately, benefits such as sick pay and paid holidays are lost.

6.2 Contact local faculties and national organisations

Working on your own can be quite lonely and difficult initially, especially if you had a very supportive mentor and training practice. Therefore it is important to try to keep in touch with your old practice and other graduate colleagues, even if you move. You should definitely join a professional association and the College of Chiropractors with their regional faculty system. Most faculties meet regularly about once a month and provide an opportunity to exchange views about national issues, and any news on continuing professional development. Meeting others will help you to assess your own expectations and experiences and to compare them with those of your peers.

6.3 Getting help from your accountant

The costs involved in employing an accountant depend on the extent to which they need to sort out your financial affairs. Ideally, you will have prepared your accounts yourself and they should only need to approve. To find an accountant, you can speak to your local colleagues. You can often negotiate a fee, and should always ask for a written quote.

6.4 Looking after yourself

As you are not entitled to sick pay if self-employed, it is important to consider taking up personal health insurance and life cover, especially if you have any dependents. It is worth obtaining information about this and talking to an independent financial adviser. Also try to pencil in some holidays for yourself, as it is very easy to find yourself accepting more and more work once the ball is rolling. Unfortunately, you will not get any 'paid' leave, but if you recharge your batteries every so often, your work as a chiropractor will be much more efficient and enjoyable.

6.5 Joining a practice

Outline your ideal practice before you apply

When looking for a practice that you would like to join, the variety that is available can be overwhelming. It can be useful to write down all the desired features of your ideal practice, not that you are likely to find your ideal post easily, but you may come very close if you decide on your preferences in advance. For instance, the practice area can greatly influence the type of patients that will be presented to you. There is a huge difference between rural and inner-city practices and, even within those areas, the demographic features may vary and can have a significant impact on your work.

If you plan to live near your practice, you may want to consider your personal needs and those of your family if you have any. Factors such as house prices, public transport, the availability of nurseries, schools and leisure facilities could play an important role in determining which practices you approach. Before applying for posts, it is often best to clear in your own mind which features of a new job are important to you and your family and which are not. Do not go for posts that have any features which could be unacceptable to you.

Consider your optimum workload

Your work pattern is largely dependent on the general attitude of the principals. If you prefer to have longer appointments, shorter clinics, more time off and a generally more relaxed working atmosphere, but are prepared to accept a lower income, you probably do not want to join 'workaholic' colleagues who may be high-earning but stretched to the limit. Your professional goals and aspirations are also worth bearing in mind. If you have any special interests that you wish to develop, it is important to know whether your future practice will be able to accommodate these.

6.6 Update your CV

A good CV is the key to being short-listed for an interview. Using a decent word-processing package and laser printouts on good-quality paper will make a more favourable impression. Clear presentation and layout will make your CV easier to read and may just tip the balance in your favour during the short-listing process. A considerable amount of detail should be included to help your potential employer to gain an initial impression of your background and assess your suitability as a future partner. Try to emphasise those areas of your experience that would be relevant to a particular practice setting.

6.6 Partnerships

In most cases a partnership is a long-term commitment and both sides should make every effort to find out whether it is likely to work in the long term. Decide what kind of working relationship you would like to have with your future colleagues, and try to find out about their philosophies, interests and general involvement in practice affairs. Consider whether you are prepared to work in a slightly hierarchical structure, or whether you would prefer to be treated equally from the start. You also need to decide how important meeting the other partners on a regular basis is for you, as this can vary a lot from one practice to another.

You need to give serious thought as to whether partnership is what you want. Many associates have considerable autonomy over their working practices without all the headache of running a clinic, employing staff etc that can add hours to your working week. It is also common for a good associate to earn more than a junior (or even senior) partner and not to have the burden of repaying any capital sum invested in the practice. As an associate, your potential liabilities will also be less. On the minus side, you will not have a tangible asset that will provide a 'nest egg' for the future so investments, savings and pension plans become more important.

Check the practice accounts and practice organisation

Partnerships are like marriage - easier to get into than out of. It would be wise to work as an associate or locum within the practice to become fully cognisant with its workings and personalities before tying yourself down. Make sure you have seen all the accounts, day books and other financial documents and feel happy that you can trust the individuals and the infrastructure.

Partnership agreement

Employ a lawyer and make sure everything is written down. This document will be your lifeline should things go wrong - make sure it is that, and not a millstone. Although the agreement should not be a consideration when things go well - most partnerships work on a good deal of give and take; it becomes essential should you wish to dissolve the arrangement. It is also useful for both sides to formalise matters such as drawings, holidays, study and sick leave, decision-making to ensure both parties are thinking along the same lines.

6.8 Dipping into other ponds

A number of alternatives are available to newly-qualified chiropractors who may find working as an associate straight away too unsettling to begin with and would rather become a locum. You may become involved in research, expeditions, do some exchanges or go back into teaching. As the profession expands, these options will become more common and more diverse.

This Guide offers some help in common problem areas. Generally you are more competent than you think you are – so trust your own judgement. Talk to colleagues when you need to though. You will develop your own practice style so don't be afraid to experiment until you find your own way. Chiropractic is one of the most rewarding careers around. Getting to know a wide range of people with different backgrounds and ideas is interesting. People are generally great fun and if you enjoy yourself they will enjoy coming to see you.

HAVE A GREAT CAREER!

APPENDIX A

Consulting room equipment

1. Stationery

Patient Record Cards, continuation sheets
Neurological and Orthopaedic Testing sheets
Patient information leaflets
Wall posters – skeleton, nervous system, etc.
Headed notepaper and envelopes
Dictation equipment
Spare pens

2. References

British National Formulary
Telephone Directory
GCC Register
Association Register
GCC Code of Practice and Standards of Proficiency
Local map

3. Examination

Patient Gowns
Ophthalmoscope/auriscope
Spare earpieces
Spare batteries
Sphygmomanometer
Stethoscope
Tuning Forks
Tendon Hammer
Medipins plus sharps box, or pinwheel
Cotton wool
Tape measure
Weighing Scales
Paper Towel
First Aid Box

APPENDIX B

An Emergency Bag

Suggested contents of the emergency bag

Stationery
Practice headed notepaper
Envelopes
Post-it notes
Patient Record Cards, continuation sheets
Neurological and Orthopaedic testing sheets
Notebook
Spare pen
Dictating machine
Diagnostic equipment
Thermometer
Sphygmomanometer
Stethoscope
Tendon hammer
Tuning Forks
Medipins or pinwheel
Cotton Wool
TENS machine
Sharps box
Ice pack
Activator
NSAI gel