

International Maitland Teachers Association

Postgraduate Educational Programme

Curriculum

Assessment, examination and treatment of neuromusculoskeletal disorders based on the principles of the Maitland® Concept of Manipulative Physiotherapy

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Update 2015: T. Davies-Knorr, B. Ferber-Busse, R. de Ruijter

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Welcome

Welcome to IMTA's (International Maitland Teachers Association) Postgraduate Educational Programme. This programme leads to specialisation in neuromusculoskeletal (NMS) Physiotherapy/Manipulative Physiotherapy^{1,2}.

In order to meet current educational requirements IMTA's curriculum has been designed to accommodate the educational requirements of institutes of higher education and the IFOMPT Standards Document.

IMTA is dedicated to the delivery of a high standard clinical education, which enables the immediate application in the clinical setting.

The programme particularly emphasises:

- The practical application of evidence informed clinical reasoning.
- A patient centred approach.
- Knowledge transfer into clinical practice.
- The application of various assessment and reassessment procedures.
- The continual gathering of clinical evidence and consequent adaptation of treatment procedures.
- Open mindedness with regards to other methods and concepts within physiotherapy and medicine.

This document will lead you through the IMTA Programme, its background, outcomes and competencies as well as general information on assessment and certification.

The IMTA curriculum document will be updated on a regular base.

IMTA's Teachers' Manual (Syllabus) provides detailed information with regards to all modules.

Internationally the terms "manipulative physiotherapy" and "manual therapy" are both used to denote the same field of physiotherapy / physical therapy. Furthermore it is recognised that currently a trend exists towards the term "neuromusculoskeletal" or "musculoskeletal" physiotherapy to define this field of clinical practice. The IFOMPT (International Federation of Orthopaedic Manipulative Physical Therapists) defines manipulative physiotherapy as follows: "Orthopaedic Manual Therapy (OMT) is a specialized area of physiotherapy / physical therapy for the management of neuromusculoskeletal conditions, based on clinical reasoning, using highly specific treatment approaches including manual techniques and therapeutic exercises. Orthopaedic Manual Therapy also encompasses, and is driven by, the available scientific and clinical evidence and the biopsychosocial framework of each individual patient."

In addition the IFOMPT also uses the terms in a mixed way, as can be observed in IFOMPT's vision statement: "World-wide promotion of excellence and unity in clinical and academic standards for manual/musculoskeletal physiotherapists."

(source: www.ifompt.org; Date 2009_07_05)

In this document the term "neuromusculoskeletal physiotherapy" will be used to describe the field of practice as defined by IFOMPT.

Preface

About IMTA

IMTA is a financially, politically and religiously independent organisation of postgraduate teachers of manipulative physiotherapy. Founded in 1992 in Zurzach, Switzerland, the IMTA has become known for having a strong clinically based educational system.

The association is committed to the standardisation, development and promotion of manipulative physiotherapy based on the Maitland® Concept, to the training of the therapists applying it as well as to the training and certification of IMTA recognised teachers.

The IMTA's programme of postgraduate education in manipulative physiotherapy aims to improve the skills of learners in the treatment of movement dysfunction and thereby to contribute to the improvement of the management of patients with neuromusculoskeletal problems.

IMTA certified teachers

IMTA's teachers are qualified according to IMTA's rigorous training programme, which takes at least 5 years. It includes:

mentorship training through assisting module delivery, developing advanced handling skills and training in educational methods.

All IMTA teachers continue to practice clinically for at least 600 hours a year in the field of NMS physiotherapy and maintain regular continual professional development.

For detailed information of the teachers' training programme please visit www.imta.ch

Curriculum revision 2013

IMTA continually integrates new theoretical knowledge and recent scientific findings into their educational programme. The programme has always aimed to support clinicians in improving their practical skills and knowledge.

Changing demands of the market and changes in the educational systems of physiotherapists worldwide necessitates constant adaptations of the programme. Especially after the implementation of the Bologna process in 2010, major revisions of the curriculum were necessary. IMTA consequently implemented a revised version in 2013.

Without compromising the main goal of improving the learner's clinical competencies, the revised curriculum aims to stay attractive to the current and future market by seeking academic recognition at a master's level. In order to achieve this, the main changes were in the assessment procedures and quality control.

The revised IMTA Curriculum was developed to accommodate the latest educational standards and requirements.

It moved towards a learner based programme with a competency-based framework in line with contemporary educational practice. This includes regular feedback from teachers and peers to promote deep learning and understanding. The programme is adapted to the Standards Document of the International Federation of Orthopaedic Manipulative Physical Therapists (IFOMPT) 2008. Furthermore, the CanMeds 2005 Competency Framework describing the various roles and core-competencies of a specialist has been acknowledged.

To maintain the strong clinical focus, supervised patient treatment sessions within the module system remained. This has proven to successfully promote the direct transfer and applicability of the module contents.

The format of this document has been chosen in order to align IMTA's programme with documents that are formally accredited by institutions of higher education.

Acknowledgements

The IMTA's curriculum revision process was supported by Sheffield Hallam University UK. IMTA is very grateful for their assistance in the continuing development of IMTA's curriculum.

There are many people we need to thank: Elaine Brookes, Helen Batty, Ed Bakker.

Our special thanks go to Kate Grafton and Katherine Yorke for their critical appraisal of the documents and their valuable support and assistance in putting everything into place.

Curriculum update 2015

The 2015 curriculum update incorporates changes made between 2013 and 2015. These include most notably the introduction of IMTA's "Accreditation Examination".

Contact Information

Further information about IMTA can be found by visiting www.imta.ch

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1 IMTA Programme of Postgraduate Education in neuromusculoskeletal (NMS) Physiotherapy

1.1 Overall Aim of IMTA's Postgraduate Educational Programme

The IMTA offers a part time postgraduate educational programme in manipulative physiotherapy. The overall aim of the programme is to equip learners with clinical problem solving and manual skills and therefore enhance clinical practice in the manipulative physiotherapy management of patients with neuromusculoskeletal disorders.

The programme aims to facilitate deep learning processes in order to integrate learning with clinical practice. Learners will be supported in their academic and clinical development towards becoming enquiring, highly skilled and challenging manipulative physiotherapists who are able to critically evaluate information and transfer it into clinical practice.

1.2 Programme Learning Objectives

The learner will explore, critically evaluate, and develop ideas and use evidence relating to:

The role of manipulative physiotherapy based on the principles of the Maitland® Concept in clinical practice within a biopsychosocial framework.

The integration of other NMS approaches with the Maitland® Concept for the management and rehabilitation of NMS dysfunction.

Clinical reasoning, assessment, examination and treatment procedures of patients with NMS dysfunction.

The role and application of mobilisation and manipulation (Grade V) as well as self-management programmes for arthrogenic, myogenic, soft tissue and neurodynamic conditions, and neurophysiological pain mechanisms.

Underpinning theoretical knowledge with regards to manipulative physiotherapy, levels of scientific evidence and the relation to clinical practice.

Clinical patterns and their specific role in clinical decision making processes with regards to manipulative physiotherapy and management of NMS of movement disorders.

1.3 IMTA Programme overview

The programme consists of 5 modules (see Fig 1). Completion of all modules is considered to be essential for sound clinical practice within the Maitland® Concept. Other approaches for the management of NMS dysfunction such as muscular control are integrated throughout the programme. The modules must be attended sequentially. Successful completion of the Level 2a module is mandatory before progressing to Level 2b. Successful completion of the Level 2b module is mandatory before progressing to Level 3. In order to attain the IMTA's Certificate of Clinical Competence the summative assessments during Levels 2a and 2b must be passed. It is expected that completion of all modules will take between 3 to 5 years depending on preferred study pace. During this time learners will usually continue to work in clinical practice.

It is usual that learners will start at the Level 1 module. Direct entry to Level 2a, 2b or Level 3 will be considered on an individual basis according to the learner's prior experience.

IMTA programme of postgraduate education in NMS physiotherapy

MODULE		INDICATIVE MODULE CONTENT
Level 1 – foundations of manual therapy		■ Basics Maitland® Concept
4 weeks	⇒	 Communication
EU academic level 6		Clinical Reasoning
		Assessment & Treatment
		techniques all body areas
		 Documentation
U		
Level 2a – underpinning concepts and		Neurodynamics
developing skills		Biomechanics of the spine
2 weeks	⇒	 Combined movements
EU academic level 7		Compression
		Clinical patterns
.		
Level 2b – advanced skills and reasoning		Cervical instability
2 weeks	⇒	Lumbar instability
EU academic level 7		HVT Grade 5
		Clinical reasoning
		Pain mechanisms
\		
Level 3 – integrating approaches		Pain management
3 weeks	⇒	Muscle balance lower extremities
EU academic level 7		Craniomandibular dysfunction &
		dysfunction of cranium
Ų		
IMTA Accreditation Examination	⇒	Written examination (MCQ)
1 day		Critical reflection of a given article
		 Practical skills assessment
		Case based assessment of clinical
	i	1

Fig. 1

1.4 Certificates and Registration

An IMTA Certificate of Attendance will be awarded for each module on completion.

Successful completion of the Module Assessments at Level 2a and Level 2b will be noted in the relevant Module Certificate of Attendance.

On successful completion of the assessments at modules Level 2a and 2b and after attendance at Level 3 learners can apply for **IMTA's Accreditation Examination**.

On successful completion of IMTA's Accreditation Examination learners will be awarded IMTA's Certificate of Competence in advanced neuromuskuloskeletal Physiotherapy based on the Maitland® Concept.

Learners who have acquired this **IMTA Certificate** may register with IMTA as an IMTA accredited manipulative physiotherapist. Their professional details will be added to IMTA's register and published at www.imta.ch.

All certificates have an unlimited time of validity.

2 Methods of Delivery

The individual modules of the programme are held at selected postgraduate study centres in various countries.

Learning takes place during contact time of 3 to 5 days consecutively:

The programme will be delivered by IMTA certified teachers and selected guest teachers.

Learner's clinical experience and prior knowledge will be utilised as a learning resource.

The IMTA programme will build on the knowledge, skills and understanding of undergraduate physiotherapy. It will include:

- · the development of precise and sensitive handling skills
- the further development of clinical reasoning competencies
- · improved clinical practice
- a broader and deeper knowledge and understanding of neuromusculoskeletal disorders
- a greater awareness of the context and scope of practice of manipulative physiotherapy and its application
- · the encouragement of innovative patient management

The programme is based on a competence-orientated curriculum and facilitates learners in the further development of their roles as clinical decision makers, communicators, collaborators, managers, health advocates and professionals.

During the module of the programme emphasis of teaching and learning will shift from a focus on teacher oriented towards learner oriented. This shift is accompanied by a progression of the level of learning, as reflected in learning outcomes and assessment criteria.

Active participation of learners as well as peer support and peer assessment will facilitate deep learning & understanding.

The **learning process** is embedded in a learning environment of active participation, which includes self-directed and teacher-guided learning activities. Lifelong learning attitudes and the development of qualities of a reflective practitioner are facilitated and encouraged. Learning throughout the modules is supported by a variety of educational methods. This accommodates the learners individual learning styles. Teaching methods include lectures, practical demonstrations and hands-on practice, clinical case examples, clinical reasoning exercises, patient demonstrations and clinical supervised practice and learner verbal presentations.

- Patient treatment sessions under supervision are an integrated part of the programme.
 This allows the application of principles and practice during patient treatment demonstrations by the teachers as well as during supervised patient treatment sessions by the learners.
- As learners progress through the programme they will be increasingly familiarised with their role as a scholar and made aware of the relevance of this role from a clinical perspective and in a clinical setting.
- Self-directed learning between the modules includes: transfer of the concept into everyday clinical practice, practice of techniques, reading and appraising background literature, clinical reasoning and reflection and documentation.

To promote and support the attitude of a "reflective practitioner" each learner will receive a study logbook at the beginning of IMTA Level 1. This serves as a framework for an individual study portfolio. Learners will work actively with this document and use it to store and record directed and self-directed learning tasks and reflections throughout the whole programme.

Current practice will be explored and evaluated by critical appraisal and synthesis of literature.

Blended learning is promoted through the use of various module materials that support the learner such as module handbooks, selected papers, video and e-learning.

3 Assessments

3.1 Introduction

The learners will receive feedback on individual performance by various kinds of formative and summative assessment throughout all modules.

Feedback is given to support learning and to develop practice.

Formative assessments are carried out to help structure teacher contact time and to maximise feedback opportunities.

Summative assessment takes place at the end of Levels 2a and 2b and during IMTA's Accreditation Examination.

A progression of assessment tasks, e.g. from formative to summative, from group presentations to individual presentations, provide various opportunities for feedback so that learners can develop their practice.

Clear assessment criteria and marking allocation are available to all learners in the participant log in area at www.imta.ch.

Learners are free to choose not to take part in summative assessments. In this case, assessment results will not be noted in the certificate of attendance. Learners aiming to obtain the IMTA's Certificate of Competence in advanced neuromuskuloskeletal Physiotherapy based on the Maitland® Concept must however successfully complete all summative assessments.

Rules and regulations, appeals procedure, marking and marking criteria, and organisational aspects are found at www.imta.ch.

3.2 Overview of summative assessments throughout the programme

Module	Formative	Summative	Academic level	Equivalent Credits (ECTS)
Level 1 – foundations of manual therapy	 Continuous feedback throughout contact time Practical skills examination Patient assessment and treatment 	None at Level 1	6	9
Level 2a – underpinning concepts and developing skills	 Continuous feedback throughout contact time Patient assessment & treatment including case discussion 	Case based practical skills examination (100%)	7	6
Level 2b – advanced skills and reasoning	 Continuous feedback throughout contact time MCQ (40%) Skills examination (60%) 	None at Level 2b	7	6
Level 3 – integrating approaches	 Continuous feedback throughout contact time 	None at Level 3	7	7
IMTA's Accreditation Examination		 40 MCQ Skills examination Summary and discussion of a randomly allocated scientific article Case discussion including demonstration of relevant practical skills 	7	1

4 Organisation

Entry procedures and entry requirements

The following professionals are eligible to enter this educational programme:

Physiotherapists who are registered or recognised to practice in their country of origin by an organisation, which is a member of the World Confederation for Physical Therapy (WCPT).

Medical Doctors who are registered or recognised to practice in their country of origin. Medical Doctors are not eligible for the IMTA's accreditation examination.

In order to be accepted into the Level 1 – foundations of manual therapy applicants need to be working in the field of NMS physiotherapy or medicine.

Application procedures

Application for module participation: Learners apply directly to the educational institution, which organises the module.

The application must include a copy of relevant IMTA certificates of attendance from previous pre-requisite modules.

Contact addresses and planned modules may be found on IMTA's website: www.imta.ch

Accreditation of prior experience and learning

Learners can apply for accreditation of prior experience and learning, in order to gain direct entry into the Level 2a, 2b and 3 modules. Applications must be submitted to IMTA's business centre.

Period of validity of certificates

Unlimited: If a 4-year period is exceeded between modules an update course is recommended.

Registration on IMTA's Website: Successful completion on IMTA's Certificate of Clinical Competence leads to eligibility for registration on IMTA's website. This serves as information to interested patients, colleagues, medical doctors and insurance companies.

Accreditation with institutes of higher education / professional associations: This programme is accredited by some institutions of higher education. These institutions may accept completed modules for Accreditation of Prior Experiential Learning (APEL process), e.g. in a bachelor or masters programme. For further information about IMTA's cooperation partners please contact IMTA's business centre. Learners who seek acknowledgement of IMTA's

programme with other institutions of higher education should address the institution's accreditation offices or the professional association of the country concerned.

5 Quality management

IMTA values a quality management programme, which involves all stakeholders.

PDCA Cycle

IMTA sees quality management as an on-going process and follows systematically a PDCA-Cycle: *Plan, Do, Check, Act.*

Plan, Do: definition of goals and planning; execution of goals

Check: evaluation if goals are achieved

Act: based on evaluation, formulation of activities to improve or consolidate

Stakeholder's in IMTA's Quality Management

- IMTA and its members
- IMTA teacher candidates
- IMTA teaching assistants
- IMTA clinical mentors
- IMTA business centre
- Learners
- Postgraduate study centres
- · Professional associations
- Patients

Quality Management Procedures

- IMTA Teachers:
 - IMTA teachers are obliged to undertake regular intervision sessions with IMTA peers or other similarly qualified teachers. Standard forms are used to document written feedback.
 - IMTA teachers receive feedback from learners via module evaluation forms. The forms are specific to each postgraduate study centre. A minimum content is required by IMTA. The postgraduate study centre submits an annual summary to the IMTA business centre annually.

- IMTA teachers receive feedback during an annual feedback discussion with a representative of the relevant postgraduate study centre.
- Continued professional development of IMTA teachers is required. This includes:
 - IMTA teachers attend two annual educational meetings of two days each.
 - IMTA teachers are obliged to keep up to date through adequate reading, visiting congresses and postgraduate courses.
- IMTA members are obliged to follow IMTA's code of conduct and core values document.
- Any stakeholder can submit complaints concerning an IMTA member to IMTA's board. Complaints are considered by IMTA's appeals committee.
- Promotion within the IMTA is regulated by IMTA's career path working group.

Teacher candidates:

- 2 IMTA members are responsible for the coordination of the teacher training programme, the further development of the teacher training programme.
- Each teacher candidate has an IMTA teacher as a personal mentor.
- Continuous feedback on progress is given as specified in the teacher training curriculum and syllabus.
- IMTA's teacher candidates and teaching assistants have a representative that is
 present at IMTA's annual general meeting. The representative can call topics for
 the agenda. He or she has no voting rights. The representative is elected by the
 assistants.
- Teaching assistants: IMTA teaching assistants support IMTA teachers during the course without seeking an IMTA teacher career.
- IMTA's educational programme:
 - IMTA's programme working group reviews the curriculum annually.
- Institutes of higher education:
 - IMTA's business manager and a representative from IMTA's board meet annually with partner institutes of higher education. In these discussions the exchange of feedback is encouraged, local national legislative requirements or changes are discussed.
 - Each partner Institute of Higher education has a delegated IMTA member who
 acts as contact person. An annual meeting between both is held and
 documented which includes a mutually agreed action plan for change as
 necessary.

IMTA Quality Manager:

- Is qualified in the field of quality management.
- Is defined by the IMTA's Board.
- Coordinates all activities regarding quality management and reports on all quality management procedures to the board.
- Develops, where necessary, a plan of action for the next year / next period in cooperation with the IMTA's Board and other stakeholders. They are responsible for monitoring the implementation of agreed procedures.

Proposes refinements and improvements of IMTA's quality management system to the IMTA's board.

6 Module Descriptors

6.1 Level 1 – Foundations of Manual Therapy

Module Title	Level 1 – foundations of manualtherapy
Level of Learning	EU academic level 6
Credit Points (ECTS)	Equivalent 9 ECTS
Indicative Summative	No summative assessment in this module
Assessment	
Components & Percentage	
Weightings	
Pre-Requisite	A WCPT recognised physiotherapy qualification or qualification
	as a medical doctor working in the field of NMS physiotherapy
	or wishing to qualify to start working in this field
Delivery Pattern	Usually 4 weeks of 5 days contact time including self-directed
	learning sessions
	Self-directed learning and teacher-directed learning between
	contact weeks
Module Language	If possible the module will be held in the language of the
	country where the module takes place
	The same applies for the module material and
	documentation
	If this is not possible the module language will be English
Contact Hours	Total: 160 hours of 60 minutes
	■ 35 x 4 = 140 hours course contact time
	20 hours teacher-directed learning/revision during the
	module weeks
Self-Study Time	120 hours over approximately 12 months

6.1.1 Module Aims

This module introduces the Maitland® Concept of manipulative Physiotherapy and its application in the management of patients with neuromusculoskeletal movement disorders. It promotes the development of clinical skills to a level adequate for safe and effective patient centred management. It builds on existing knowledge and enhances understanding of relevant concepts, theory and mechanisms based on the current evidence. It enables the direct application in clinical practice immediately after each module week.

6.1.2 Module Learning Outcomes

By the end of this module the learner will be able to:

Describe and discuss the contribution and role of the Maitland® Concept of manipulative physiotherapy.

Undertake, discuss and document the assessment and treatment of NMS dysfunction.

Apply and evaluate effective communication strategies within a patient centred approach.

Describe and discuss hypothesis generation in relation to clinical reasoning models.

Apply and evaluate relevant treatment techniques (grade I–IV) safely and accurately.

6.1.3 Indicative learning, teaching and assessment activities

Teachers will provide the learner with appropriate support and guidance. The teacher is responsible for designing and facilitating relevant learning opportunities to enable the learner to actively engage with and contribute to the learning process. The learner will be required to undertake periods of directed and self-directed learning between the contact weeks.

Teacher activities

Teacher led learning will include activities such as:

Presentations

Skills demonstration and practice under supervision

Demonstration of patient assessment and treatment

Provide advice and feedback

Facilitate group-discussions and group-work

Supervision of patient assessment and treatment by the learners

Support during self-directed learning sessions

Facilitate peer assessment activities

Set relevant student-directed tasks

Self-directed learning

The learner will be expected to carry out independent and directed study to complement their learning and development. These activities will include:

During teaching weeks:

Reflection on practice during and after clinical supervised practice sessions.

Preparation of presentations, individually or in small groups.

Practice of examination and treatment techniques with peers during the module weeks.

In-between teaching weeks:

Keeping a logbook / reflective study diary to include at least one case study.

Reading of identified background information and literature to help to develop theoretical background relevant to module content (reference list in the learner's handbook).

Practice of examination and treatment techniques with peers in between the module weeks.

Reflective clinical practice with the application of learning in the work place. The learner is expected to work clinically between the module weeks with patients primarily with neuromusculoskeletal problems.

A learner's manual will guide the learner throughout the programme and provide specific information regarding learning activities and organisational issues.

Formative assessment

Formative assessment will be integrated throughout the module.

A variety of types of formative assessment will be used, such as:

Questioning, discussion and debate

Observation of learners' performance of new techniques/skills

Peer assessment in small groups

The following formative activities will take place during all Level 1 modules

- A 10-minute practical examination towards the end of the 4th week. A technique list for preparation can be found in the learner's manual.
- The examination and treatment of patients by learners in small groups during the second, third and fourth weeks.

• Between the module weeks, learners document patient treatments. Selected examples will be peer evaluated during contact time. This will be monitored by the teacher.

Feedback on all formative activities will be given during and immediately after the activity. Written overall feedback will be provided by the teacher at the end of the Level 1 module.

Feedback documentation should be kept in learner's personal logbook.

Summative assessment

No summative assessment will take place during this module.

6.1.4 Indicative module content/topics

Maitland Concept and fundamentals of manipulative physiotherapy skills with regards to the subjective examination (C/O), physical examination (P/E), reflection and planning, and treatment, (including documentation), as an integral part of NMS physiotherapy management and self-management.

The principles of communication, assessment, management and treatment progression of arthrogenic, myogenic and neurogenic components of movement disorders. Both the upper and lower quadrants of the body are covered. A biopsychosocial framework of rehabilitation underpins all content.

The principles of clinical reasoning and its application in patient-centred management.

Fundamentals of relevant theoretical background including anatomy, biomechanics, physiology, neurophysiological pain mechanisms and behavioural sciences.

6.1.5 Further information about this module

The module will be supported by both a teacher's and a learner's manual specifying the programme and content, assessment criteria, weighting and feedback details. The learner's manual will only be available for enrolled learners.

Online and paper-based learning resources will be available to learners.

Learning Resources

Module teacher, teacher assistant, hand-outs/reader distributed by the teacher, patient case examples (paper or videotape) provided by the module teacher, real patients, E-learning facilities.

Essential Reading

IMTA module handbook Level 1.

Recommended Reading

Banks K., Hengeveld E. (2009) *Maitland's* Clinical Companion: An Essential Guide for Students, 1sted. Churchill Livingstone

Hengeveld E., Bank K., Maitland G.D. (2014) *Maitland's* Vertebral Manipulation: Management of Neuromusculoskeletal Disorders – Volume one, 8thed. Elsevier, Edinburgh

Hengeveld E., Banks, K. (2005) *Maitland's* Peripheral Manipulation: Management of Neuromusculoskeletal Disorders – Volume two, 5thed. Elsevier, Edinburgh

Jull G., Moore A., Falla D., Lewis J., McCarthy C., Sterling M. (eds.) (2015)Grieve's Modern Musculoskeletal Physiotherapy. Elsevier, Edinburgh

Other Resources

- Online resources and paper-based learning resources will be available to learners via IMTA's website
- Electronic databases for example Google Scholar
- Peers
- · Logbook, Individual study diary

6.2 Level 2a - Underpinning Concepts and Developing Skills

Module Title	Level 2a - underpinning concepts and developing skills
Level of Learning	EU academic level 7
Credit Points (ECTS)	Equivalent 6 ECTS
Indicative Summative	Case based practical skills examination 100%
Assessment	
Components & Percentage	
Weightings	
Pre-Requisite	Completion IMTA Level 1-foundations of manual therapy
Delivery Pattern	Usually 2 weeks of 5 days contact time including self-directed learning sessions
	Self-directed learning and teacher-directed learning between contact weeks
Module Language	 If possible the module will be held in the language of the country where the module takes place The same applies for the module material and documentation If this is not possible the module language will be English
Contact Hours	Total: 80 hours of 60 minutes 2 x 35 = 70 hours course contact time 10 hours teacher-directed learning/revision during the module weeks
Self-Study Time	100 hours

6.2.1 Module aims

This module enables the learner to gain a deepened understanding and application of the Maitland® Concept and manipulative physiotherapy. It promotes the development of analytical and reflective patient management. It facilitates the further development of the learner's understanding and application of the relevant underpinning theory and evidence informed clinical and reasoning skills.

6.2.2 Module learning outcomes

By the end of the module the learner will be able to:

Critically evaluate and discuss the concepts underpinning the Maitland® Concept and manipulative physiotherapy and their application within a patient centred framework.

Critically evaluate the role and application of examination and treatment techniques (grade I–IV).

Modify and analyse examination and treatment techniques and strategies according to the individual patients needs, based on advanced clinical reasoning skills.

Identify, appraise and integrate relevant theory and clinical reasoning processes, current scientific evidence into the patient centred management of NMS dysfunction.

6.2.3 Indicative learning, teaching and assessment activities

Teachers will provide the learner with appropriate learning activities, support and guidance. The learner will be required to undertake periods of directed and self-directed learning between the contact weeks.

Teacher activities

Teacher-led learning will include activities such as:

Presentations

Skills demonstration and practice under supervision

Demonstration of patient assessment and treatment

Clinical examples to underpin the practical application of patient management

Provide advice and feedback

Facilitate group-discussions, group-presentations and group-work

Patient assessment and treatment by the learners

Support during self-directed learning sessions

Facilitate peer assessment activities

Set relevant student-directed tasks

Self-directed learning

The learner will be expected to carry out independent and directed learning to deepen and complement their learning and development. These activities will include:

During teaching weeks:

Reflection on practice during and after clinical supervised practice sessions.

Preparation of presentations, individually or in small groups.

Practice of examination and treatment techniques with peers during the module weeks.

In-between teaching weeks:

Keeping a logbook / reflective study diary to include at least two case studies.

Read and identify relevant background information and literature to help to develop theoretical background relevant to module content (reference list in the learner's manual).

Practice of examination and treatment techniques with peers during and in between the module weeks.

Reflective clinical practice with the application of learning in the work place. The learner is expected to work clinically between the module weeks with patients primarily with neuromusculoskeletal problems.

A learner's manual will guide the learner throughout the programme and provides specific information regarding learning activities and organisational issues.

Formative assessment

Formative assessment will be integrated throughout the module.

A variety of types of formative assessment will be used, such as:

Setting tasks, questioning, discussion and debate

Observation of learner's performance of new techniques / skills

Peer assessment in small groups

Specific observation tasks during the demonstration of patient assessment & treatment

Assessment and feedback on patient examination and treatment sessions

Feedback on all formative activities will be given immediately after completion.

Summative assessment

For learners wishing to attain IMTA's Certificate of Competence in advanced neuromuskuloskeletal Physiotherapy based on the Maitland® Concept successful completion of the summative assessment during Level 2a is compulsory. Learners who choose not to participate in the summative assessment will receive an IMTA Certificate of Attendance for Level 2a.

The summative assessment consists of:

- A case based practical skills assessment will take place during the 2nd week of the Level 2a. A list of techniques that will be assessed can be found in the learner's manual. Verbal feedback will be provided immediately after the examination by the teacher.
- The clinical assessment and treatment of 2 patients over three sessions will also be appraised. Verbal feedback will be provided immediately by the teacher.

Written overall feedback will be provided by the teacher at the end of the Level 2a module.

All feedback documentation should be kept in learner's personal logbook.

6.2.4 Indicative module content/topics

Consolidation and expansion of the Level 1–foundations of manual therapy content with special attention to differentiation processes, use of compression, combined movements, assessment and treatment of neurodynamic disorders and selected clinical patterns.

Comprehensive range of Manipulative Physiotherapy skills with regards to the subjective examination (C/O), physical examination (P/E), reflection, planning and application of treatment, documentation, integration into overall physiotherapy management and self-management. Grade I–IV mobilisation.

Relevant theoretical background of neurodynamics and neuropathodynamics, selected clinical patterns, combined movements and biomechanics of the spine and applied behavioural sciences.

Review and application of Clinical Reasoning in patient-centred management.

6.2.5 Further information about this module

The module will be supported by both a teacher's and a learner's manual specifying the programme and content, assessment criteria, weighting and feedback details. The learner's manual will only be available for enrolled learners.

Online and paper-based learning resources will be available to learners.

Learning Resources

Module teacher, teacher assistant, hand-outs/reader distributed by the teacher, patient case examples (paper or videotape), real patients, peers, E-learning facilities

Essential Reading

Westerhuis P., Wiesner R. (2015) Clinical Patterns in Manual Therapy. Thieme, Stuttgart

A current list of key articles is given during each module.

Recommended Reading

Banks K., Hengeveld E. (2009) *Maitland's* Clinical Companion: An Essential Guide for Students, 1sted. Churchill Livingstone

Butler D. (2000)The sensitive nervous system. NOI Publications, Adelaide

Hengeveld E., Banks K. (2005) *Maitland's* Peripheral Manipulation: Management of Neuromusculoskeletal Disorders – Volume two, 5thed. Elsevier, Edinburgh

Hengeveld E., Bank K., Maitland G.D. (2014) *Maitland's* Vertebral Manipulation: Management of Neuromusculoskeletal Disorders - Volume one, 8thed. Elsevier, Edinburgh

Jull G., Moore A., Falla D., Lewis J., McCarthy C., Sterling M.(eds.) (2015) Grieve's Modern Musculoskeletal Physiotherapy. Elsevier, Ediburgh

Shacklock M. (2005) Clinical Neurodynamics. A new system of musculoskeletal treatment. Elsevier, Edinburgh

Westerhuis P., Wiesner R. (2015) Clinical Patterns in Manual Therapy. Thieme, Stuttgart

A regularly updated reference list is available in IMTA's teacher's Manual as well as in the individual learner's manual.

Other Resources

- Online resources and paper-based learning resources will be available to learners via IMTA's website
- Electronic databases for example Google Scholar and Pubmed.
- Peers
- Logbook / Individual study diary

6.3 Level 2b-Advanced Skills and Reasoning

Module Title	Level 2b – advanced skills and reasoning
Level of Learning	EU academic level 7
Credit Points (ECTS)	Equivalent 6 ECTS
Indicative Summative	No summative assessment on this module
Assessment	
Components & Percentage	
Weightings	
Pre-Requisite	Successful completion of the assessment during IMTA Level 2a
	– underpinning concepts and developing skills
Delivery Pattern	Usually 2 weeks of 5 days contact time including self-directed
	learning sessions
	Self-directed learning and teacher-directed learning between
	contact weeks
Module Language	If possible the module will be held in the language of the
	country where the module takes place
	The same applies for the module material and
	documentation
	If this is not possible the module language will be English
Contact Hours	Total: 80 hours of 60 minutes
	■ 2 x 35 = 70 hours course contact time
	10 hours teacher-directed learning/revision during the
	module weeks
Self-Study Time	100 hours

6.3.1 Module aims

This module enables the learner to build upon their understanding and application of the management of neuromusculoskeletal dysfunction. It enables further development of reflective and evaluative practice. It explores and facilitates critical appraisal of current concepts of spinal instability, high velocity thrusts (HVT, Grade V's) and pain management including underpinning theory and evidence. It facilitates competent assessment and management of instability as well as the application and integration of a range of manipulative techniques. Learning is informed by the evidence based practice.

6.3.2 Module learning outcomes

By the end of this module the learner will be able to:

Critically appraise and discuss the use of manipulative physiotherapy in the context of interdisciplinary patient centred management for NMS dysfunction.

Describe and discuss the theory and management of spinal instability, as well as indications and conditions for grade V techniques.

Critically evaluate, and discuss relevant examination and treatment techniques, integrating current research evidence.

Demonstrate the safe and relevant performance/set-up of spinal manipulative (grade V) techniques and critically discuss their role and application.

Demonstrate relevant instability tests and critically discuss their role and application.

Critically appraise and discuss the literature and current evidence underpinning pain theory, management and treatment.

6.3.3 Indicative learning, teaching and assessment activities

Teachers will provide the learner with appropriate learning activities, support and guidance. The learner will be required to undertake periods of directed and self-directed learning between the contact weeks.

Teacher activities

Teacher led learning will include activities such as:

Presentations

Skills demonstration and practice under supervision

Demonstration of patient assessment and treatment

Clinical examples to underpin the practical application of patient management

Provide advice and feedback

Facilitate group-discussions, group-presentations and group-work

Patient assessment and treatment by the learners

Support during self-directed learning sessions

Facilitate peer assessment activities

Set relevant learner-directed tasks

Self-directed learning

The learner will be expected to carry out independent and directed learning to deepen and complement their learning and development. These activities will include:

During teaching weeks:

Reflection on practice during and after clinical supervised practice sessions.

Preparation of presentations, individually or in small groups.

Practice of examination and treatment techniques with peers during the module weeks.

In between teaching weeks:

Keeping a logbook / reflective study diary to include at least two case studies.

Read and identify relevant background information and literature to help to develop theoretical background relevant to module content (reference list in the learner's manual).

Practice of examination and treatment techniques with peers during and in between the module weeks.

Reflective clinical practice with the application of learning in the work place. The learner is expected to work clinically between the module weeks with patients primarily with neuromusculoskeletal problems.

A learner's manual will guide the learner throughout the programme and provides specific information regarding learning activities and organisational issues.

Formative assessment

Formative assessment will be integrated throughout the module.

A variety of types of formative assessment will be used, such as:

Setting tasks, questioning, discussion and debate

Observation of learner's performance of new techniques / skills

Peer assessment in small groups

Specific observation tasks and a paper based set of questions to be filled out during the demonstration of patient assessment & treatment

Assessment and feedback on patient examination and treatment sessions

Towards the end of the module a formal assessment will be carried out consisting of:

Multiple Choice Questionnaire

A practical skills assessment

Written overall feedback will be provided by the teacher at the end of the Level 2b module.

Feedback on all formative activities will be given immediately after completion.

All feedback documentation should be kept in learner's personal logbook.

Summative assessment

There is no summative assessment during this module.

6.3.4 Indicative module content / topics

- Consolidation and deepening of previous module content such as behavioural sciences and neurodynamics, theory and practice associated with pain mechanisms particularly the management of central nervous system and sympathetic nervous system pain mechanisms.
- Advanced skills in the assessment and management of arthrogenic, myogenic and neurogenic components of movement disorders of the spine.
- The relevant theoretical background, assessment andmanagement of lumbar and cervical instability.
- Introduction to theory and application of grade V techniques including relevant vascular assessment and dysfunction.
- Advanced Clinical Reasoning and its application to patient centred management.
- Relevant theoretical background of selected clinical patterns, particularly lumbar and cervical spinal instability, neurophysiological pain mechanisms.

6.3.5 Further information about this module

The module will be supported by both a teacher's and a learner's manual specifying the programme and content, assessment criteria, weighting and feedback details. The learner's manual will only be available for enrolled learners.

Online and paper-based learning resources will be available to learners.

Learning Resources

Module teacher, teacher assistant, hand-outs/reader distributed by the teacher; patient case examples presented by teachers and learners; visiting patient; learners self-reflection and peers, Journals, text-books and e-resources.

Essential Reading

Westerhuis P., Wiesner R. (2015) Clinical Patterns in Manual Therapy. Thieme, Stuttgart A current list of key articles is given during each module.

Recommended Reading

Boyling J.D., Jull G.A. (2004) Grieve's Modern Manual Therapy. The vertebral column, 3rded. Elsevier, Churchill Livingstone, Edinburgh

Hengeveld E., Banks K. (2005) *Maitland's* Peripheral Manipulation: Management of Neuromusculoskeletal Disorders – Volume two, 5thed. Elsevier, Edinburgh

Hengeveld E., Bank K., Maitland G.D. (2014) *Maitland's* Vertebral Manipulation: Management of Neuromusculoskeletal Disorders – Volume one, 8thed. Elsevier, Edinburgh

Jones M., Rivett D.A. (2003) Clinical Reasoning for Manual Therapists. Butterworth & Heinemann

Jull G., Moore A., Falla D., Lewis J., McCarthy C., Sterling M. (eds.) (2015) Grieve's Modern Musculoskeletal Physiotherapy. Elsevier, Edinburgh

Westerhuis P., Wiesner R. (2015) Clinical Patterns in Manual Therapy. Thieme, Stuttgart

A regularly updated reference list is available in IMTA's teacher's manual as well as in the individual learner's manual.

Other Resources

- Online resources and paper-based learning resources will be available to learners via IMTA's website
- Electronic databases as for example Google, Google Scholar, Pubmed, Cochrane collaboration, PEDro, CINAHL
- Peers
- Logbook / Individual study diary

6.4 Level 3 – Integrating Approaches

Module Title	Level 3 – integrating approaches
Level of Learning	EU academic level 7
Credit Points (ECTS)	Equivalent to 8 ECTS
Indicative Summative	No summative assessment on this Level
Assessment	After completion of Level 3, learners can participate in IMTA's
Components & Percentage	accreditation examination
Weightings	
Pre-Requisite	Successful completion of IMTA Level 2b – advanced skills and
	reasoning
Delivery Pattern	Usually 3 weeks of 5 days contact time including self-directed
	learning sessions
	Self-directed learning and teacher-directed learning between
	contact weeks
Module Language	If possible the module will be held in the language of the
	country where the module takes place
	The same applies for the module material and
	documentation
	If this is not possible the module language will be English
Contact Hours	Total: 120 hours of 60 minutes
	■ 3 x 35 = 105 hours contact course time
	15 hours teacher-directed learning/revision during the
	module weeks
Self-Study Time	120 hours

6.4.1 Module aims

This module enables the learner to develop a conceptual understanding of a range of complementary conceptual approaches to the management of NMS dysfunction. It explores the management of complex case presentations utilising an integration of conceptual approaches, within an evidence base framework. It facilitates the learner's analysis, evaluation and synthesis with a critical awareness of complex case presentations. The module aims to utilise learner's clinical experience and to facilitate a self-directed approach to knowledge and practice development.

6.4.2 Module learning outcomes

By the end of this module the learner will be able to

Discuss, critically appraise and integrate a range of relevant concepts approaches appropriate for the management of complex NMS dysfunction.

Demonstrate advanced and innovative clinical reasoning to facilitate effective and pertinent problem solving for complex NMS presentations.

Critically appraise, justify and reflect upon communication, examination and treatment techniques in the management of complex patient presentations.

Critically appraise, synthesise and apply pertinent literature to support the management decisions of complex patient presentations.

Demonstrate innovative, sensitive and relevant patient handling skills.

6.4.3 Indicative learning, teaching and assessment activities

Teachers will provide the learner with appropriate learning activities, support and guidance. The learner will be required to undertake periods of directed and self-directed learning between the contact weeks.

Teacher activities

Teacher led learning will include activities such as:

Presentations

Skills demonstration and practice under supervision

Demonstration of patient assessment and treatment

Clinical examples to underpin the practical application of patient management

Provide advice and feedback

Facilitate group-discussions, group-presentations and group-work

Patient assessment and treatment by the learners

Support during self-directed learning sessions

Facilitate peer assessment activities

Set relevant student-directed tasks

Self-directed learning

The learner will be expected to carry out independent study/self-directed learning to deepen and complement their learning and development. These activities will include:

During teaching weeks:

Reflection on practice during and after clinical supervised practice sessions.

Preparation of presentations, individually or in small groups.

Practice of examination and treatment techniques with peers during the module weeks.

In between teaching weeks:

Keeping a logbook / reflective study diary.

Select complex case study to present for the final summative assessment.

Read and identify relevant background information and literature to help to develop theoretical background relevant to module content (reference list in the learner's handbook).

Reflective clinical practice with the application of learning in the work place.

A learner's manual will guide the learner throughout the programme and provides specific information regarding learning activities and organisational issues.

Formative assessment

Formative assessment will be integrated throughout the module.

A variety of types of formative assessment will be used, such as:

Assessment and feedback on demonstration of innovative techniques and management strategies developed during the module.

Assessment and feedback on patient examination and treatment.

Questioning, discussion and debate.

Observation of learner's performance of techniques / skills.

Peer assessment in small groups.

The following formative activities will take place during all Level 3 modules:

Verbal presentation of a patient selected from the learners own clinical practice.
 The presentation will: explore an area of complexity underpinning the dysfunction; demonstrate advanced clinical reasoning; be supported by the critical synthesis of pertinent literature; and will include the demonstration of a relevant and innovative examination of treatment technique.

Feedback on all formative activities will be given immediately after completion.

All feedback documentation should be kept in learner's personal logbook.

Summative assessment

No summative assessment will take place during this module.

6.4.4 Indicative module content / topics:

- *Chronic pain theory and management*: Biopsychosocial, behavioural change, cognitive behavioural approaches etc. multidisciplinary working.
- Dynamic control and muscle imbalance theories, movement analysis: Shoulder
 instability theory, examination and management. Upper quadrant nerve entrapment.
 Lower quadrant motor control problems, including sacroiliac, pelvic and hip
 dysfunctions.
- Cervical instability and manipulation review: Craniomandibular dysfunctions, cranium and cranial nerve anatomy, examination and management. Cervical headaches theory, examination and management.

6.4.5 Further information about this module

The module will be supported by both a teacher's and a learner's manual specifying the programme and content, assessment criteria, weighting and feedback details. The learner's manual will only be available for enrolled learners.

Online and paper-based learning resources will be available to learners.

Learning Resources

The module will be supported by a learner's manual specifying the programme and content, assessment criteria, weighting and feedback details. The learner's manual will only be available for enrolled learners.

Module teacher, teacher assistant, hand-outs/reader distributed by the teacher; patient case examples presented by teachers and learners; visiting patient; learners self-reflection and peers, Journals, text-books and e-resources

Essential Reading

A current list of key articles is given during each module.

Recommended Reading

Boyling J.D., Jull G.A. (2004) Grieve's Modern Manual Therapy. The vertebral column, 3rded. Elsevier, Churchill Livingstone, Edinburgh

Butler D.S., Moseley L.G. (2003) Explain Pain. NOI Group Publications, Adelaide

Jull G., Moore A., Falla D., Lewis J., McCarthy C., Sterling M. (eds.) (2015) Grieve's Modern Musculoskeletal Physiotherapy. Elsevier, Edinburgh

Kendall F., McCreary E., Provance P. (2005) Muscles: Testing and Function with Posture and Pain. 5th ed. Lippincott Williams & Wilkins

Sahrmann S.A. (2002) Diagnosis & Treatment of Movement Impairment Syndromes. Mosby, St Louis

Von Piekartz H.J.M. (2007) Craniofacial Pain: Neuromusculoskeletal Assessment, Treatment and Management. Butterworth Heinemann

Waddell G. (2004) The Back Pain Revolution, 2nd ed. Elsevier-Churchill Livingstone, Edinburgh

Westerhuis P., Wiesner R. (2015) Clinical Patterns in Manual Therapy. Thieme, Stuttgart

A regularly updated reference list is available in IMTA's teacher's manual as well as in the learner's manual.

Other Resources

- Online resources and paper-based learning resources will be available to learners via IMTA's website
- · Electronic databases for example Google Scholar and Pubmed
- Peers
- Logbook / Individual study diary

6.5 IMTA's Accreditation Examination

Title	IMTA's Accreditation Examination		
Level of Learning	EU academic level 7		
Credit Points (ECTS)	Equivalent to 1 ECTS		
Indicative Summative	40 MCQs-10%		
Assessment	Summary, presentation and discussion of a given article-20%		
Components & Percentage	Discussion of a complex case presentation, including		
Weightings	demonstration of relevant practical skills-40%		
	Practical assessment of examination and treatment		
	techniques-30%		
Pre-Requisite	Successful completion IMTA Level 2a		
	Certificate of attendance Level 2b		
	Certificate of attendance Level 3		
Delivery Pattern	1 day, separate from Level 3		
	See examination rules & regulations for IMTA's Accreditation		
	Examination www.imta.ch		
Language	If possible the examination will be held in the language of		
	the country where the exam takes place		
	If this is not possible the examination will be in English		
Contact Hours	8 hours of 60 minutes		
Self-Study Time	Minimum of 22 hours		

6.5.1 Module aims

By successfully passing IMTA's accreditation examination learners demonstrate that they have

achieved the learning outcomes of IMTA's 11-weeks programme. They will be awarded

IMTA's Certificate of Competence in advanced neuromuskuloskeletal Physiotherapy

based on the Maitland® Concept. This Certificate of Competence qualifies the learner for

admission to IMTA's register of certified therapists. Detailed information will be available on

the IMTA Website.

The IMTA's Certificate of Competence in advanced neuromuskuloskeletal

Physiotherapy based on the Maitland® Concept is recognised by IMTA's cooperation

partners. These institutes of higher education or professional associations accredit IMTA's

programme in their Masters or OMT programmes.

6.5.2 Module content/assessment activities

The assessment consists of 4 parts

1. A theory examination

2. A summary, verbal presentation and discussion of a given article

3. Clinical reasoning, treatment selection and performance based on a clinical case

scenario

4. A technique examination

1. Theory examination

Procedure

The examination consists of 40 Multiple Choice Questions relating to Level 3 content.

Time frame: 60 minutes.

2. Summary, Verbal Presentation and Discussion of a given article

Procedure

Learners randomly draw an article from a number of selected articles.

Timeframe: 120 minutes to: read, summarise and prepare for a verbal presentation.

Presentation time: 10 minutes

The learners present their summary to the examiners and 4 to 5 other learners. Subsequently

the examiner asks two questions regarding the presented article.

4

3. Clinical reasoning, treatment selection and performance based on a clinical case

Procedure

Two learners each randomly draw a clinical case description from a number of clinical cases known to the learners. All learners receive approximately 12 case descriptions 6 weeks prior to the assessment.

Timeframe: 30 minutes preparation, 20 minutes presentation and discussion.

One learner presents his case to the examiners, discusses possible management scenarios and performs two relevant techniques on the other participant. The discussion should reflect sound clinical reasoning processes and contain the following items: selection of treatment techniques, progression of treatment and patient management including patient education and prognosis.

4. Techniques

Procedure

Each learner randomly selects a card on which two techniques are written. Subsequently they perform the techniques on each other.

A list of possible techniques is sent to the learners 6 weeks prior to the assessment.

Marking criteria

All parts must be passed, in order to be awarded IMTA's certificate of clinical competence.

A minimum of 60% must be reached in each part of the examination. Both examiners rate independently. The final mark for the part consists of the average of both marks. Marks will be rounded up or down (example: 4.5 = grade 5; 4.4 = grade 4).

- **1. Theory:** maximum 10 points. Each multiple-choice question has therefore a value of a ¼ of a point. This part is passed if a minimum of 6 points is achieved (i.e. 24 of 40 questions are correct).
- **2. Summary, presentation and discussion of an article:** maximum 20 points. This part is passed if a minimum of 12 points is achieved.
- **3. Clinical case:** maximum 40 points. This part is passed if a minimum of 24 points is achieved.
- **4. Techniques:** maximum 30 points. This part is passed if a minimum of 18 points is achieved.

Final mark:

The final mark is declared as a percentage. The final overall mark consists of the sum of all 4 parts. There is a maximum of 100 points. The table below serves as an international comparison.

ECTS	Percentage		Description
Grades			
А	100 - 96	E	Outstanding performance
			A performance that is
			extraordinarily in excess of the
			requirements
В	95 - 91	VG	Very good performance
			A performance far in excess of the
			requirements
С	90 – 86	G+	Good performance
	85 - 81	G	A performance significantly above
	80 - 76	G-	the requirements
D	75 – 71	M+	Satisfactory
	70- 66	М	In every way an average
	65 – 61	M-	performance that fulfills the
			requirements
E	60 - 56	W	Sufficient
			A below average performance that
			nevertheless reaches the minimum
			requirements
			A below average performance that
	55-50	W-	only just reaches the minimum requirements
			requirements
F	49 - 30	F	Fail
'	49 30	'	A performance that does not reach
			the minimum requirements.
			Improvement is necessary before
			requirements can be reached.
			A repetition of parts of the
			examination is necessary

FX	29 - 0	F	Fail
			A performance that does not reach
			the minimum requirements.
			Substantial improvement is
			necessary before requirements can
			be reached.
			Repetition of the whole
			examination is necessary

Examiner activities

Examiner activities include:

Guidance of learners during the various examinations procedures

Distribution of examination tasks and short explanation

Examination and marking

Provide feedback and grades

Submission of examination results to IMTA business centre for registration

6.5.3 Further information about this module

Learners will receive specific information 6 weeks prior to the examination day.

After successful completion of IMTA's accreditation examination learners will be listed on IMTA's register of certified therapists.

For further information please contact the IMTA business centre.

Learning Resources

Learners are expected to undertake self-directed learning to prepare themselves for IMTA's accreditation examination. Learning resources include:

- Teaching material from previous IMTA modules such as course handbook, personal notes, clinical reasoning and reflection forms, Level 2a/b book, course handouts/readers.
- Online resources are available to learners via IMTA's website e.g. DVDs.
- Electronic databases such as Google Scholar, Pubmed, Cochrane collaboration, PEDro, CINAHL, Logbook / Individual study diary.

Essential Reading

Examination material sent 6 weeks prior to the examination

Recommended reading

Bank K., Hengeveld E. (2009) *Maitland's* Clinical Companion: An Essential Guide for Students. Churchill-Livingstone

Hengeveld E., Banks K.(2013) *Maitland's* Vertebral Manipulation: Management of Neuromusculoskeletal Disorder– Volume 1 8^{th} ed. Churchill-Livingstone

Hengeveld E., Banks K.(2014) *Maitland's* Peripheral Manipulation: Management of Neuromusculoskeletal Disorder - Volume 2. 5thed. Churchill-Livingstone

Westerhuis P., Wiesner R. (2015) Clinical Patterns in Manual Therapy. Thieme, Stuttgart

6.6 IMTA update Level 1 and 2a

Title	IMTA update Level 1 and 2a		
Level of Learning	EU academic level 6/7		
Credit Points (ECTS)	Equivalent to 2 ECTS		
Indicative Summative	There is no summative assessment during this module		
Assessment			
Components & Percentage			
Weightings			
Pre-Requisite	Completion IMTA Level 1		
Delivery Pattern	3 days		
Language	If possible the examination will be held in the language of		
	the country where the exam takes place		
	If this is not possible the module language will be English		
Contact Hours	24 hours of 60 minutes		
Self-Study Time	Minimum of 26 hours		

6.6.1 Module aims

This module enables the learner to repeat and refresh skills and knowledge of prior IMTA modules in order to prepare learners to continue with the IMTA program.

6.6.2 Module learning outcomes

By the end of this module the learner will be able to:

Critically evaluate and discuss the concepts underpinning the Maitland® Concept and manipulative physiotherapy and their application within a patient centred framework.

Critically evaluate the role and application of examination and treatment techniques (grade I–IV).

Modify and analyse examination and treatment techniques and strategies according to the individual patients needs, based on advanced clinical reasoning skills.

Identify, appraise and integrate relevant theory and clinical reasoning processes, current scientific evidence into the patient centred management of NMS dysfunction.

6.6.3 Indicative learning, teaching and assessment activities

Teachers will provide the learner with appropriate learning activities, support and guidance. The learner will be required to undertake periods of directed and self-directed learning prior to the module.

Teacher activities

Teacher led learning will include activities such as:

Presentations

Skills demonstration and practice under supervision

Demonstration of patient assessment and treatment

Clinical examples to underpin the practical application of patient management

Provide advice and feedback

Facilitate group-discussions, group-presentations and group-work

Support during self-directed learning sessions

Facilitate peer assessment activities

Set relevant student-directed tasks

Self-directed learning

Prior to the module the learner will be expected to fill in a questionnaire concerning her/his individual needs for revision. This will guide the actual program of the module.

The questionnaire will be sent to the module teacher in advance.

Self-directed learning activities will include:

Pre-reading

Preparation of presentations, individually or in small groups

Practice of examination and treatment techniques with peers during the module

Keeping a logbook / reflective study diary

Read relevant background information and literature to help to develop theoretical background relevant to module content

Formative assessment

Formative assessment will be integrated throughout the module.

A variety of types of formative assessment will be used, such as:

Assessment and feedback on demonstration of techniques and management strategies.

Questioning, discussion and debate.

Observation of learner's performance of techniques / skills.

Peer assessment in small groups.

Summative assessment

No summative assessment will take place during this module.

6.6.4 Indicative module content / topics:

See module description Level 1 and Level 2a

Content will vary according to the needs of the learners.

6.6.5 Further information about this module

The module will be supported by teachers' and learner's material from Level 1 and Level 2a.

Online and paper-based learning resources will be available to learners.

Learning Resources

- Module teacher and teacher assistant
- Hand-outs/reader distributed by the teacher
- Case examples presented by teachers and learners
- Learners self-reflection and previous peer feedback
- Journals
- Text-books
- E-resources

Essential Reading

IMTA handbook Level 1

Westerhuis P., Wiesner R. (2015) Clinical Patterns in Manual Therapy. Thieme, Stuttgart

Recommended Reading

Hengeveld E., Banks K. (2013) *Maitland's* Vertebral Manipulation: Management of Neuromusculoskeletal Disorder– Volume 1 8th ed. Churchill-Livingstone

Hengeveld E., Banks K. (2014) *Maitland's* Peripheral Manipulation: Management of Neuromusculoskeletal Disorders- Volume 2 5^{th} ed. Churchill-Livingstone

Banks K., Hengeveld E. (2009) *Maitland's* Clinical Companion: An Essential Guide for Students. Churchill-Livingstone

Other Resources

- Online resources and paper based learning resources will be available to learners via IMTA's website
- Electronic databases for example Google Scholar and Pubmed
- Peers
- Logbook / Individual study diary

Note this curriculum document will be updated regularly.