

Guest editorial

Having just finished my 4-year term as ACPWH Chairman, the invitation to write the editorial for this edition of the *Journal* seemed like a wonderful opportunity to seal the end of my tenure. It allows me to convey some of my perceptions about our organization in terms of both its past, and more importantly, its future role supporting the membership, on a larger scale nationally and as a professional network of the Chartered Society of Physiotherapy (CSP).

The ethos of ACPWH remains fundamentally the same. The Executive Committee has an agreed collective opinion, and together with the various subcommittees, constantly reviews and reflects on its work, staying focused on the Association's objectives, which are primarily the needs of the members it serves. Despite the need for paid support, the work is predominantly done on a voluntary basis, and in my view, this should remain the case. Voluntary support brings people with passionate views and new ideas together. Above all, it makes it easier to keep self-serving behaviour, whether for financial gain or self-promotion, to a minimum, allowing for an efficient group effort. Of course, there does have to be a team leader in order to tease out the skills and individual strengths of the committee members, and most importantly, there needs to be a driving force to ensure that new blood is recruited.

I first joined the Executive Committee of the Association of Chartered Physiotherapists in Obstetrics and Gynaecology (ACPOG), as it was then called, in 1991, having become a full member in 1988. I was a self-opinionated young woman who was fired up by my passion for the profession, and although respectful of my elders, I believed that they could not possibly be aware of the constant problems facing those of us working at the "coalface". I started to voice my views: changes to the National Health Service, the pressure of job cuts, and the constant and very real threat of our role as physiotherapists being subtly eroded by other healthcare professionals were my main concerns. With similar anxieties facing the profession today, it seems that not much has changed.

Before I had time to contemplate what I had agreed to do, I was nominated for and then

voted onto the Executive Committee. Needless to say, finding myself among a group of very accomplished professional women with many more years of experience than I had in terms of clinical practice, the running of the organization as well as life in general, I soon realized how naive I was. I made a conscious decision to observe and learn from those who were far more knowledgeable than myself. It turned out to be the best decision that I ever made. Over my two terms of office as ACPWH Chairman, I have drawn on those early experiences so many times, and been very much influenced by the wise words of others.

Being part of the ACPOG Executive Committee meant that I was able to stay in touch with the very latest developments on a clinical level and also from the point of view of the physiotherapy profession. The Association has always had a strong relationship with its professional body, the CSP, both as a clinical interest group and, more recently, a recognized professional network. That relationship is as important today as it was 24 years ago. The CSP is the well-established and respected voice of the profession both nationally and globally, and we can best influence Government and campaign through them. In my experience, going it alone without its support is a tortuous and often unfulfilling route. In addition, the CSP sets the gold standards for both our education, and the way in which we conduct ourselves as professionals towards our fellow colleagues, students and other healthcare specialists.

Our Association has grown steadily over the past 10 years, and with this expansion, the support that we offer and the requirements of the membership have also evolved in ways that none of us could have predicted back in 1991. I feel privileged to have witnessed so much of this. The swell in membership numbers has largely been responsible for the need to seek secretarial support for the Executive Committee: it was essential to release more of its voluntary members' time so that they could address more important issues. There have also been influences beyond our control that have made it very necessary to change, one of the most influential being technological progress. The organization

had just got to grips with the concept that the Internet and the World Wide Web would be the primary way to communicate and distribute information in the future when I finished my first term as Chairman in 2000. Who could have possibly foreseen the innovative ways and diverse forms of multimedia that we would have at our disposal in 2014?

The introduction of self-governance and the requirement for all members of ACPWH to be responsible for their own continuing professional development created a need to record any learning experience. Governance has also had a phenomenal influence on our organization, leading to the further development of our well-established team of area representatives, postgraduate courses and approved workshops. In turn, these must stand up to the scrutiny of both the CSP, and even more importantly, the high standards expected by the Health and Care Professions Council.

During my most recent period as Chairman, which has seen the development of and changes in the needs of the membership, and also current

trends and fashions in the delivery of healthcare, it has been essential to continue to embrace change, as well as to be innovative and forward-thinking. Along with mandatory alterations to the process by which we affiliate to the CSP, these changes have led to us exploring the ways in which we can work with other, similar professional networks while recognizing and upholding the core values and high standards that have sustained ACPWH over the 66 years of its existence so far.

The Association will soon have a new name, Pelvic, Obstetric and Gynaecological Physiotherapy (POGP), as well as an updated constitution with expanded and clearly defined objectives (see p. 87). This is the third change in the title of our organization over its long history, and it shows how it has continued to accept the need to adapt and evolve. We have a bright future providing that we embrace change, and most importantly, members put themselves forward as volunteers to help manage our Association.

Ruth Hawkes FCSP
Vice-Chairman

Cover image: Outgoing going and incoming ACPWH chairmen Ruth Hawkes (left) and Doreen McClurg (right) photographed at the Association's 2013 Annual Conference in The Bristol Hotel, Bristol, UK.

Copy deadline

Copy for the Autumn 2014 and Spring 2015 editions of the *Journal* (Nos 115 and 116) must be submitted to the editors by **7 March 2014** and **7 September 2014**, respectively. Please note that academic and clinical articles must be received well before the deadline since time must be allowed so that these can be peer-reviewed. Manuscripts should be printed **double-spaced** with a wide margin, and adhere to the author's guidelines found on pp. 92–94 and on the ACPWH website (<http://acpwh.csp.org.uk/documents/acpwh-journal-writing-guidelines>). Articles for consideration should be sent to Ms Wendy Rarity, Physiotherapy Department, Cowal Community Hospital, Sandbank Road, Dunoon, Argyll PA23 7RL, UK.