



MDT Professional Development for Credentialed Clinicians and Diplomates

McKenzie (MDT) certified clinicians are now required by the McKenzie Institute International (MII) to continually upgrade their MDT knowledge and skills to ensure their application of the McKenzie Method is of the highest standard.

Goal:

To establish a global network of McKenzie (MDT) certified clinicians who apply MDT in a competent and contemporary manner, and who consumers can access knowing that they will receive quality patient care based on the principles of MDT.

Objectives:

- ◆ To promote and assist in the Continuing Professional Development (CPD) of McKenzie certified clinicians.
- ◆ To recognise the CPD achievement of McKenzie certified clinicians by promoting them on the MII Clinician locator.
- ◆ To demonstrate to external bodies the commitment of the McKenzie Institute International to achieving the highest standards of MDT.

History:

The McKenzie Institute International Credentialing exam was established in 1991 and clinicians have attained a Diploma in MDT since the 1992. A number of these clinicians have not up-skilled their knowledge of MDT since the time they attained these qualifications yet they can continue to advertise that they are trained in the McKenzie Method. This is in contrast to other clinicians who have remained focused on MDT, attended MDT update days, and provide MDT to their patients in the way that Robin McKenzie intended. This is the group of MDT trained clinicians that MII is keen to promote and support.

Credentialed clinicians and Diplomates (whether updated in MDT or not) are regarded as the “experts” in MDT by patients, doctors, researchers, and other external bodies such as Insurance companies. However how they use MDT is extremely varied.

To date this has resulted in the following:

- ◆ complaints to MII and Branches from patients when they access a “MDT” clinician only to find the treatment they are provided is not what is outlined in the TYOB /TYON.
- ◆ research results that have reflected poorly on MDT because the “MDT experts” were not aware of the changes that have occurred in the MDT Method in recent years. These changes were introduced to keep MDT abreast of contemporary management of musculoskeletal conditions.
- ◆ clinical outcomes that do not truly reflect the efficacy of MDT because it is applied by clinicians who are not using MDT in its contemporary form.

Summary:

It is imperative that the clinicians who are eligible to promote themselves as MDT trained i.e. “MDT experts” remain updated in the McKenzie method. If not, it will have a detrimental effect on all MDT clinicians. Robin McKenzie had a vision - that all those clinicians who stated that they were trained in MDT should be using it in its “purest” form. Whilst this goal may be impossible to achieve, ensuring that those clinicians who are promoted through the MII / MII Branch clinician locator remain up-skilled in MDT is a small step towards attaining this vision.