

# Submission for the formal approval of the osteopathic profession in the Western Australian Workplace Rehabilitation Scheme



Osteopathy Australia  
Suite 4, 11 Railway St, Chatswood NSW 2067  
PO Box 5044, Chatswood NSW 1515  
Ph (61) 02 9410 0099  
[www.osteopathy.org.au](http://www.osteopathy.org.au)

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Osteopathy Australia would like to formally lodge the following submission in response to the current open consultation - *Modernising WA's Workers Compensation Laws* - for the recognition of the osteopathic profession to provide workplace rehabilitation services as per consultation paper 13.

To assist WorkCover WA in its assessment of osteopaths for recognition, we will present two recommendations, both supported with information on the profession's capabilities, professional regulations, the governance standards it is held against and some of the contributions it can make to the workplace rehabilitation program.

## Recommendations:

**Recommendation 1:** that WorkCover WA enacts the powers provided in Section 156 of the *Workers' Compensation and Injury Management Act 1981*<sup>i</sup> to approve the osteopathic profession as appropriately qualified to deliver workplace rehabilitation services, per the profession's scope of neuromusculoskeletal practice.

**Recommendation 2:** that WorkCover WA accept as suitable for employment by its contracted workplace rehabilitation providers:

- a. osteopaths with either 12 months' professional experience in providing such rehabilitation services; or
- b. osteopaths supervised by another individual who has at least 12 months' professional experience in providing such rehabilitation services<sup>ii</sup>

This submission supports the above two recommendations through the provision of information on the osteopathic profession, the professional regulations and governance standards it is held to, the competencies and capabilities of practice and how these can contribute to WorkCover WA's workplace rehabilitation program.

In approving osteopathy as a profession eligible to provide workplace rehabilitation services, WorkCover WA would be following the decisions made by WorkSafe Victoria, the State Insurance Regulatory Authority (SIRA) in New South Wales, WorkSafe Queensland, WorkSafe Tasmania and the national Comcare scheme. Osteopathy Australia is also aware that since changes have occurred in other states many osteopaths are already working as workplace rehabilitation consultants and increasingly organisations are advertising to recruit osteopaths in such roles.

## About Osteopathy Australia

Osteopathy Australia is the national peak body representing the interests of osteopaths, osteopathy as a profession, and consumer rights to access osteopathic services. The majority of registered osteopaths are members of Osteopathy Australia.

Osteopathy Australia is a key osteopathy sector stakeholder. We have close working relationships with osteopathy regulators (Australian Health Practitioner Regulation Agency (AHPRA) and the Australian Osteopathic Accreditation Council (AOAC), tertiary institutions offering osteopathy courses and professional indemnity insurers.

As the national peak body, we reinforce AHPRA's regulatory requirements, and promote the professional standards for behaviour over and above the minimum requirements for registration. We are a full member of the umbrella national peak allied health body, Allied Health Professions Australia (AHPA), where we work in collaboration to advocate for all allied health professionals. Our core work is liaising with state and federal government, all other statutory agencies, professional bodies, and private industry regarding professional, educational, legislative, and regulatory issues.

In our capacity as national representative body, we welcome this opportunity to lodge a formal submission to WorkCover WA in seeking the approval for the osteopathic profession to be recognised as being eligible to provide workplace rehabilitation services.

## About Osteopathy

Osteopaths in Australia are university qualified, government regulated allied health professionals who have inbound and outbound referral relationship with other health professionals. Osteopathy is one of the fastest growing musculoskeletal allied health professions in Australia, providing an increasing supply of skilled professionals to the workplace rehabilitation sector nationally<sup>iii</sup>.

Osteopaths complete a dual Bachelor or Bachelor/Masters qualification covering functional anatomy, biomechanics, human movement, the musculoskeletal and neurological systems as well as functional assessment, clinical management, and functional rehabilitation. Osteopaths work in a variety of healthcare settings including workplace rehabilitation, workers compensation and motor vehicle accidents schemes, private practice, disability, aged care and within the Medicare and Department of Veterans (DVA) affairs schemes.

The osteopathic profession emphasises the neuromusculoskeletal system as integral to client function and uses client-centred biopsychosocial approaches to return clients to work or activity following a work injury or motor vehicle accident. Evidence-informed reasoning and practice is fundamental to case management and clinical intervention.

Osteopaths perform activity based functional assessments, prescribe skilled clinical exercise, pacing approaches, work hardening activities, offer health promotion strategies, and other active interventions aimed at enhancing functional skills. Self-management and early return to safe, productive and meaningful work are core objectives for osteopaths. This is consistent with the *Clinical Framework for the Delivery of Health Services*<sup>iv</sup> and the Royal Australasian College of Physicians' *Realising the Health Benefits of Good Work Consensus Statement*<sup>v</sup>, both of which the profession is signatories to via Osteopathy Australia.

## Professional regulation and governance standards

In assessing the osteopathic profession for eligibility to work within the workplace rehabilitation scheme, WorkCover WA can be assured that the profession meets the National Principles of administration within the Heads of Workers Compensation Australia (HWCA) *Principles of Practice for Workplace Rehabilitation Providers* (Principles of Practice). Below we present how the osteopathic profession meets *Principle six: Competent and qualified professionals* of the HWCA Principles of Practice.

As AHPRA registered practitioners, the osteopathic profession is bound to the codes, guidelines, professional standards, and minimum requirements that all registered health practitioners must adhere to. These are also the same standards as other AHPRA registered professions currently eligible to provide workplace rehabilitation services in Western Australia such as physiotherapy, psychology, and occupational therapy. Osteopathy Australia promotes these standards to its members.

In approving osteopaths for eligibility, WorkCover WA can be confident that it would be accepting a profession that adheres to the nationally recognised compliance regime put into place to protect the public and uphold professional standards. This includes requirements for professional indemnity insurance, financial and informed consent, record keeping, privacy, confidentiality, and scope of practice standards<sup>viii</sup>. Furthermore, the profession already has extensive recognition and experience working in injury management schemes with Comcare, SIRA NSW, WorkSafe Victoria, WorkSafe QLD and WorkSafe Tasmania all recognising osteopaths as eligible to provide workplace rehabilitation services. This includes all state, and territory workers compensation and motor accident schemes to provide injury management services. Further, osteopaths are well versed and actively adhere to the five principles of practice within the *Clinical Framework for the Delivery of Health Services* when providing injured management services.

AHPRA enforces compliance with these standards through regular audits and a notification system where, other health professionals, or third parties can report non-compliance or misconduct to the regulator for investigation.

As a part of an osteopath's registration requirements, they must complete a minimum of 25 hours of continued professional development (CPD) each year. Professional development allows a practitioner to maintain, improve and broaden their knowledge, expertise and competence and further develop the skills that are required within their professional practice such as injury management, return to work and workplace rehabilitation skills<sup>ix</sup>.

All osteopaths are also well educated in the legal, ethical and professional standards of practice through their tertiary qualifications, including within supervisory units. Further, osteopaths develop their soft skills such as effective communication, collaboration with various stakeholders, empathy, resilience and emotional intelligence from an early stage in their studies and continue to cultivate these skills throughout their career with professional development and self-reflection.

This history and consistency in adhering to regulations and standards supports that osteopaths will easily adopt and adhere to the *WorkCover WA Workplace Rehabilitation Providers Principles and*

*Standards of Practice*<sup>x</sup> in their workplace rehabilitation service delivery and practice. Osteopaths will ensure that they are well-versed in the overarching principles and how these affect the decision-making process, as well as understand and enact the *Priority Areas* and *Standards of Practice* so workers and their employers can be confident that they will have a fair and equitable experience. Osteopaths are willing to participate in the assessment and monitoring by WorkCover WA against the Performance Indicators to ensure that each provider is meeting their aim and complying with the *Principles and Standards*.

## Osteopathic competencies and capabilities of practice

The Osteopathy Board of Australia regulates the capabilities that are taught within tertiary osteopathy degrees, including the requirement that courses will upskill participants in a range of capabilities directly relevant and transferable to workplace rehabilitation. The capabilities that an osteopath should be equipped with and should continue to develop are outlined in the Osteopathy Board of Australia's *Capabilities for Osteopathic Practice* (2019)<sup>xi</sup>. These are grouped into the seven core roles below, each of which hold a defined set of capabilities:

- Osteopath
- Professional and ethical practitioner
- Communicator
- Critical reflective practitioner and lifelong learner
- Educator and health promoter
- Leader and manager.

We draw WorkCover WA's attention to the following clinical roles and capabilities osteopaths must possess which hold direct transference to workplace rehabilitation and align with the capabilities set out in WorkCover WA's *Workplace Rehabilitation Providers Capability Framework*<sup>xii</sup> and the *Workplace Rehabilitation Providers Principles and Standards of Practice*:

Role	Key Capabilities
<b>Osteopath</b>	<ul style="list-style-type: none"> <li>• Practice osteopathy within the accepted scope of practice and understanding when outbound referral is required</li> <li>• Apply a client-centred approach</li> <li>• Enable and empower clients to enhance their participation in work and other life roles</li> <li>• Plan and implement efficient, effective, culturally safe and client-centred assessments</li> <li>• Implement, monitor and review evidence-based interventions including manual therapy, rehabilitation, pain education and health promotion</li> </ul>

	<ul style="list-style-type: none"> <li>• Develop management plans based on sound clinical reasoning, scientific evidence and client-centred preferences to inform decision-making</li> <li>• Implement and review management plans using sound clinical reasoning to facilitate optimal client participation in work and activities of daily living</li> <li>• Apply knowledge of safe and quality use of medicines to practice</li> <li>• Explain and negotiate planned assessments including risks and options with clients and relevant others</li> <li>• Establish a prognosis in conjunction with clients and relevant others that incorporates appropriate outcome measures and anticipated milestones of client’s progress</li> <li>• Incorporate the key biopsychosocial and environmental factors and risk factors that contribute to client wellbeing when planning, implementing and reviewing client care</li> </ul>
<b>Professional and ethical practitioner</b>	<ul style="list-style-type: none"> <li>• Comply with legal, professional, ethical and other relevant standards, codes and guidelines</li> <li>• Understand and comply with relevant legislative and regulatory frameworks, including the Board’s Code of Conduct and guidelines relevant to the workplace</li> <li>• Manage risk effectively and responsibly in such a way that minimises impact on all concerned</li> <li>• Make and act on informed and appropriate decisions about acceptable professional and ethical behaviours</li> <li>• Act within bounds of personal competence, recognising personal and professional strengths and limitations and seeking assistance where appropriate</li> <li>• Recognise and effectively manage conflict of interest</li> <li>• Ensure clients are not discriminated against based on age, culture, disability, gender, sexuality, social status, economic status, language or ethnicity, consistent with legislative requirements</li> <li>• Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of healthcare quality and client safety</li> <li>• Advocate for clients</li> </ul>
<b>Communicator</b>	<ul style="list-style-type: none"> <li>• Consider and demonstrate socio-cultural awareness in communication and management</li> <li>• Communicate effectively on all aspects and through all stages of the care process with clients and relevant others</li> <li>• Document and appropriately share written and electronic information about client’s care to optimise clinical decision-making, client safety, confidentiality and privacy</li> </ul>

<b>Critical reflective practitioner and lifelong learner</b>	<ul style="list-style-type: none"> <li>• Evaluate their own practice against relevant professional benchmarks and act to continually improve practice</li> <li>• Engage in the continuous enhancement of professional activities through ongoing learning</li> <li>• Maintain the knowledge and skills needed to support practising as an osteopath in accordance with the requirements of the current regulatory environment, including the Board’s CPD registration standard and Guidelines for CPD.</li> <li>• Integrate the best available evidence into practice</li> <li>• Contribute to the refinement and dissemination of knowledge and practices applicable to health</li> </ul>
<b>Educator and health promoter</b>	<ul style="list-style-type: none"> <li>• Use education for self-empowerment and to empower others in the practice context</li> <li>• Demonstrate commitment to the principles of health education; disease prevention; rehabilitation; and amelioration of impairment, disability and limited participation</li> <li>• Evaluate the effectiveness of the education provided to clients and modify the content and delivery methods where appropriate to facilitate client compliance</li> </ul>
<b>Collaborative practitioner</b>	<ul style="list-style-type: none"> <li>• Engage in an inclusive, collaborative, consultative, culturally safe and client-centred model of practice</li> <li>• Work with clients and relevant others when necessary to enable clients’ access to appropriate health and community services</li> <li>• Work effectively as a member of a diverse, inter-professional healthcare community</li> <li>• Demonstrate safe and appropriate handover of care, using both verbal and written communication to share or transfer responsibility to, and accept responsibility from others</li> </ul>
<b>Leader and manager</b>	<ul style="list-style-type: none"> <li>• Lead others effectively and efficiently in relevant professional, ethical and legal frameworks</li> <li>• Organise and prioritise workload and resources to autonomously provide safe, effective and efficient osteopathic care</li> <li>• Facilitate change informed by the best available research evidence and a clients’ needs when new ways of working are adopted in the practice context</li> </ul>

A full list of the minimum osteopathic capabilities can be found in the Osteopathy Board of Australia’s *Capabilities for osteopathic practice (2019)* document.



## Contributions to the Workplace Rehabilitation Scheme:

Including osteopathy as an eligible profession that provides workplace rehabilitation services would provide many benefits and contributions to WorkCover WA, individual workers and employers. This will also help to provide a consistent supply of appropriately qualified providers to the scheme.

The competencies and capabilities outlined above enable osteopaths to provide the following high-value contributions to the WorkCover WA workplace rehabilitation scheme, consistent with the *WorkCover WA Workplace Rehabilitation Providers Principles and Standards of Practice* as well as the *HCWA Principles of Practice*.

**Contribution 1:** osteopaths will support robust assessment of functional capacity for the specific work environment and review the biopsychosocial risk factors that may be preventing return to work in an early intervention framework. Within this framework, osteopaths will make a skilled contribution to work readiness by planning coordinated services to address unhelpful beliefs, promote self-management and engage workers in tasks they can do, as appropriate in the workplace. Throughout the case management lifecycle, osteopaths will collaborate with workers, their treatment providers and workplaces, to frequently negotiate goals and work tasks with a view to progressive recovery.

**Contribution 2:** osteopaths will actively collaborate with the worker and their employer, seeking their involvement in rehabilitation program development and partnering to set individualised SMART – specific, measurable, achievable and timed goals. Osteopaths will empower workers through tailored, culturally appropriate and clear education on the value of work for biopsychosocial wellbeing and recovery, per the *Health Benefits of Good Work* position statement to which the profession is committed as a signatory. In the spirit of commitment to the statement, osteopaths will similarly offer clear support to workplaces by educating them on benefits of work task adjustments for the worker and the environmental factors driving progress. The profession will balance the needs of workers with those of workplaces in strong partnership with treating practitioners.

**Contribution 3:** osteopaths will gather information from workers, treatment providers and workplaces using targeted interviewing/case conferencing and benchmark measures, to gauge work capacity, performance, and the biopsychosocial barriers present to inform goal setting with the worker. Osteopaths will encourage reasonable and necessary clinical therapies for growing capacity for work and liaise with treatment providers to ensure goal collaboration. Osteopaths will work in a seamless way with all parties in workplace rehabilitation to identify root biopsychosocial determinates, review goals for suitability, and/or offer outbound referrals to other providers or services. For workers with limited capacity, osteopaths will coordinate with treatment providers to encourage the uptake of screening tools for gauging capacity and discussing health promotional strategies with direct application to return-to-work. Osteopaths will also empower workplaces in identifying reasonable tasks or work adjustments for recertification. Osteopaths provide education on the role work plays in helping recovery and the benefits to the worker's overall health and wellbeing.

Osteopaths will justify the functional assessment used and return to work strategies with objective assessment information collected from the worker, employer and treating providers and will

continue to do so with the use of outcome measures. Osteopaths will translate functional gains into meaningful work tasks or adjusted tasks to promote worker inclusion and recovery through work. Costs will be reviewed regularly by osteopaths and workplace rehabilitation providers for the reason and necessity of services. Osteopaths will balance achievable outcomes with claim financial sustainability as well as reducing service duplication and waste.

**Contribution 4:** osteopaths will identify the evidential basis for the use of specific workplace rehabilitation strategies, their modification or cessation. By applying pain science, functional rehabilitation reasoning, health promotion principles, physiological/musculoskeletal injury and recovery knowledge, activity guidelines, as well as clinical intervention awareness, osteopaths will further early intervention, empowerment and reduce worker passivity. Osteopaths will continue to maintain currency in workplace rehabilitation guidelines as well as developing and furthering their knowledge and skills in the industry, while seeking out emerging academic and clinical evidence.

**Contribution 5:** osteopaths will be able to demonstrate the effectiveness of their service delivery to the worker, support team and employer using appropriate objective measures. These measures will be used to track and demonstrate progress towards the worker's goals for the employer and wider treatment team. These measures will also indicate to the osteopath when their services are no longer required or if a different approach should be investigated.

All Australian universities providing osteopathy courses ensure osteopaths complete an extensive education in health sciences where they are continuously assessed for skills required by WorkCover WA. These skills will enable osteopaths to provide workplace rehabilitation services.

The **Appendix A: Osteopathy units of study** outlines the study units undertaken by osteopaths that are applicable to workplace rehabilitation reasoning in each osteopathy degree offered in Australia, including Victoria University, RMIT University and Southern Cross University.

We request that review and consideration is given to this course content when assessing this application.

Osteopathy Australia would again like to thank WorkCover WA for this opportunity and the time taken to assess our application for the profession approval of osteopathy to work workplace rehabilitation providers.

If you have any questions or require any further information, please contact [REDACTED] via email on [REDACTED] or via phone on [REDACTED].

## Appendix A: Osteopathy units of study

Health science units relevant for workplace rehabilitation within osteopathic courses of tertiary

Table 1: table of relevant units in osteopathy qualifications				
Course	Duration	Institution	Number of credit points overall	Summary of relevant units
Bachelor of Health Science/Bachelor of Applied Science (Osteopathy)	Five years (full time)	Royal Melbourne Institute of Technology (RMIT)	480 (double Bachelor, both of which are needed to qualify)	REHA2215 – Occupational & Adjunctive Therapeutics (12 points) REHA2217 – Primary Care Management and Rehabilitation (12 points) REHA2225 – Osteopathic Practice Portfolio (24 points) BIOL2506 – Biomechanics and Functional Anatomy (12 points) MEDS2146- Medical Examination 1 (12 points) MEDS2049 – Differential Diagnosis in Western Medicine (12 points) OHTH2160 – Research in Health Science (12 points) OHTH2163 – Law & Ethics for Health Professionals (12 points) PUBH1410 – Professionalism & Evidence Based Health Care (12 points) PUBH1412 – Working with Psychological Health and Disease (12 points) REHA2214 - Osteopathic Clinical Practice 2 (12 points) REHA2216 - Osteopathic Clinical Practice 3 (12 points) REHA2219 - Osteopathic Clinical Practice 4 (12 points)
Bachelor of Science (Osteopathy)/ Master of Health Science (Osteopathy)	Four and a half years (full time)	Victoria University	432 (Bachelor & Masters, both of which are needed to qualify)	HBS1004 – Clinical Skills 1 (12 points) HBS1204- Clinical Skills 2 (12 points) HBS 3004- Patient & Health Care System 2 (12 points) HMO7001- Applied Clinical Theory & Skills 1 (12 points) HMO7004 – Applied Clinical Theory & Skills 4 (12 points) HMO7005- Advanced Clinical Theory & Skills 5 (12 points) HBO2005- Biomedical Science for Osteopathy 5 (12 points) HBO2007- Biomedical Science for Osteopathy 7 (12 points) HRE1000 – Evidence & Research (12 points) HBS2001- Evidence Based Practice for Osteopathy 1 (12 points) HCM1000- Health Professional Communication (12 points) HBS3005- Introduction to Clinical Practice (12 points) HMM7301- Patient, Practitioner and Health System 9 (12 points) HMM7073- Clinical Practice 3 (12 points) HMM7105- Clinical Practice 1 (12 points)

				HMO7002- Applied Clinical Theory & Skills 2 (12 points) HBS2003- Patient & Health Care System 1 (12 points) HMO7006- Applied Clinical Theory & Skills 6 (12 points)
Bachelor of Clinical Sciences (Osteopathic Studies)/ Master of Osteopathic Medicine	Four years (full time)	Southern Cross University	432 (Bachelor & Masters, both of which are needed to qualify)	OSTP5005- Osteopathic Medicine II (12 points) OSTP6010- Osteopathic Medicine III (12 points) OSTP6001- Osteopathic Clinical Practice and Research I (12 points) OSTP6002- Osteopathic Clinical Practice and Research II (12 points) OSTP6005- Osteopathic Clinical Practice and Research III (24 points) OSTP6004- Osteopathic Clinical Practice and Research IV (24 points) OSTP2003- Osteopathic Diagnosis 1 (12 points) PBHL1002- Health Promotion and Wellness (12 points) PSYC1003- Psychology and Sociology for Health Professionals (12 points) STAT2001- Introduction to evidence for Health Practitioners (12 points) OSTP6009- Translating Research into Practice (12 points) OSTP5002- Osteopathic Medicine (12 points) HLTH3003- Transition to Professional Practice (12 credit points)

**Table 2: RMIT University Unit Overviews in detail**

Course unit	Subject description	Unit outcomes
REHA2215- Occupational & Adjunctive Therapeutics	Overviews occupational adjunctive therapies and devices. Students develop their awareness of occupational health and worker skills analysis, as well of workplace physiological therapeutics, their mechanisms of action and when to use them.	The unit enhances competency in development in the practice of job task analysis developing skills in: <ul style="list-style-type: none"> <li>-Analysis of work specific worker movements/habits and movement hazards</li> <li>-Activities of Daily Living Assessments (functional and standardised)</li> <li>- Workstation and other ergonomic assessment and adjustment</li> <li>-Manual handling techniques review and prescription</li> <li>- Biopsychosocial case screening for factors impacting work skills</li> <li>- Analysis and redesign of hazardous manual tasks</li> <li>- MSD risk assessment and identification of control strategies, including hierarchies of control.</li> </ul>
REHA2215- Occupational & Adjunctive Therapeutics CONT	Instructs on frameworks for grading functional capacity impairment in work related rehabilitation	Encourages students to learn systematic tools for grading gait, whole body coordination, balance, proprioceptive skills, falls risks, and to relate clinically relevant findings to ICF and PEO classification of function/impairment principles.

		Further, unit encourages students to reflect upon functional rehabilitation programs, reflect and convey how they may or may not be working to eliminate injury risks.
REHA2217 – Primary Care Management and Rehabilitation	Delves into strengths and roles of functional capacity assessment and rehabilitative programs in client care	<p>Furthers awareness of physiological underpinnings of functional capacity assessments and rehabilitation programs.</p> <p>Equips students to examine client plans to identify how management can be complemented via functional capacity assessment and rehabilitation programming.</p> <p>Encourages active review/revision of client management strategies against best practice functional movement and activity guidelines.</p> <p>Students are trained in interviewing clients/patients to determine their current status and providing appropriate advice and/or further referral for co-management with other health professionals. A core focus of the unit is student ability to determine health status to form the basis of clinical management and use clinical guidelines as basis for evaluating and communicating management options and recommendations for activity and exercise rehabilitative strategies.</p>
REHA 2225 – Osteopathic Practice Portfolio	Portfolio based practical application unit requiring concrete demonstration of skills learnt in REHA 2215	<p>As a component of this unit, students’ concrete skills in developing an individually tailored work modification/return to work plan are appraised.</p> <p>A major assessment requires the student to develop a hypothetical medicolegal report incorporating:</p> <ul style="list-style-type: none"> <li>-Job task analysis for client</li> <li>-ICF classification</li> <li>-ICD code</li> <li>-Outcome Measures to be utilised</li> <li>-An overview of applicable support services and strategies.</li> </ul> <p>The unit encourages students to apply their skills in set WorkSafe Victoria reporting frameworks. students must complete a hypothetical work task analysis and adjustment report drawing on employer information and client information to meet Victoria WorkSafe reporting requirements. This includes showing</p>

		<p>patient/client-centred communication, ability to gather and interpret health related information, communicate findings to a wide range of audiences (patients, clients, health professionals and agencies) with sensitivity to cultural safety and diversity. Students must demonstrate ability to work autonomously and collaboratively to lead and contribute to interprofessional care partnerships.</p> <p>Students also must demonstrate that they can develop strategies to meet personal and professional demands, have strategies to manage disputed clinical encounters and resolution strategies to overcome conflict. Students must also engage in critical reflective practice for self- assessing gaps as a professional skillset.</p>
BIOL2506 – Biomechanics and Functional Anatomy	<p>This unit examines the biomechanics behind human motion and physical performance during exercise, sporting, recreational, rehabilitation and “daily living” activities. It provides the foundation for understanding, analysing and assessing human motion and physical performance in these settings.</p>	<p>Specifically, this course examines the mechanics of non-moving (static) and moving (dynamic) systems, space and time aspects of human motion (kinematics), external and internal forces that act on a body (kinetics), human energy expenditure, power and work (ergometry), mathematical principles behind the measurement, analysis and assessment of human motion, and quantitative measurement of human motion through technology.</p> <p>It also covers muscle mechanics during exercise, sporting, recreational and “daily living” activities, unsafe movement practices, movement patterns and biomechanical mechanisms behind musculoskeletal injuries, human anthropometry, physique and somatotype</p>
MEDS2146- Medical Examination 1	<p>Instructs on comprehensive client screening for broad factors impacting on a presentation or condition and recovery efforts.</p>	<p>Encourages contextual consideration of influences over injury, presentation/complaint, with emphasis on physical/social/lifestyle and environmental influencing recovery injury, and pain management.</p>
PUBH1412- Working with Psychological Health & Disease	<p>Referring to cognitive, developmental and social psychological principles, students the unit covers psychological and social dimensions of health and function, indicators of concern, and how common conditions</p>	<p>Enhances knowledge of strategies helping graduates communicate with clients that may have a mental health concern and recognise when onward referral is needed to assist rehabilitative planning to mitigate psychosocial barriers to recovery.</p>

	including anxiety, depression and stress relate to recovery or illness.	
OHTH2163- Law and Ethics for Health Professionals. Students critically examine legal frameworks that underpin the accountabilities of health practitioners to promote safe client/patient-centred practice.	Students critically examine legal frameworks that underpin the accountabilities of health practitioners to promote safe client/patient-centred practice.	As an aspect of OHTH2163, students are taught the principles driving professionally acceptable behaviours, as well as principles of patient/client centred practice. Behaviours applicable to primary and tertiary level care systems between the public and private sectors are focused upon. Workplace rehabilitation spans private and public sector players.
PUBH1410-Professionalism & Evidence Based Healthcare.	Students study features of Australian health care systems, AHPRA, third party funding schemes, as well as their role within them, and driving concepts in service governance and law.	As a component of PUBH1410 - Professionalism & Evidence Based Healthcare students learn their role in third party schemes with an injury management model, covering: evidence-based health care and its underpinnings, cultural competence and safety. These fundamental principles in allied health professional practice directly align with early intervention, biopsychosocial approaches, collaborative goal setting and coordination. Students also learn to manage core aspects of practice to comply with ethical, legal and regulatory standards in care. An introduction to Codes of Conduct, compliance requirements and adherence to them is one focus of the unit. Privacy, confidentiality and consent, as well as limits to consent or privacy in schemes and third party programs is a focus.
MEDS2049 - Differential Diagnosis in Western Medicine.	An introduction to clinical decision making and western medical terminology supporting achievement of communication capabilities that are important in communication across clinical practice disciplines.	In MEDS 2049- Differential Diagnosis in Western Medicine, students must demonstrate effective and concise communication of important details of a case including physical, historical and laboratory data that identify the important issues underlying a clinical presentation. Skills are developed supporting data collection from multiple sources and integration for plans of recovery or review of plans.
OHTH2160- Research in Health Science.	Covers knowledge and skills to work in a research informed manner. Students are taught literature- based research and critical appraisal of research evidence.	In OHTH2160- Research in Health Science, students are taught how to identify credible research to guide their practice as based on research design, statistics and methodology. This is a skill directly transferrable to the workplace injury rehabilitation practice review.
REHA2214 - Osteopathic Clinical Practice 2;	These practical units require students to engage in	As part of these units students:

<p>REHA2216 - Osteopathic Clinical Practice 3;</p> <p>REHA2219 - Osteopathic Clinical Practice 4</p>	<p>simulated learning addressing rehabilitative scenarios.</p>	<ul style="list-style-type: none"> <li>▪ Perform role play activities where they consider the perspectives of employers and workplace needs in accommodating musculoskeletal injury; this includes examining examples of questions employers may ask in client injury planning.</li> <li>▪ Discuss the impacts of short and long term workplace absence for individuals and society overall as a basis for sound clinical decision making.</li> <li>▪ Cover case study examples drawing out the interests of schemes, employers, case managers and insurers in workplace injury management, as a basis for effective coordinated professional injury practice.</li> <li>▪ Cover case study examples on the importance of early detection of blue flags in client workplace injury management and good practice in cross organisational/multidisciplinary management of blue flags.</li> <li>▪ Undertake reflective learning on integrated case planning practice with examples drawn from planning with employers and injured clients.</li> <li>▪ Cover content relating to the prognosis of key injuries in workplaces and their effects on working practices.</li> <li>▪ Undertake reflecting learning on integrating the perspectives of insurers, employers, and workers in professional communication for injury management and blue flag risk reduction.</li> </ul>
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**Table 3: Victoria University unit overviews in detail**

<b>Course unit</b>	<b>Subject description</b>	<b>Unit outcomes</b>
HMO7005- Advanced Clinical Theory & Skills 5	Workplace ergonomics and task analysis, covering task risk identification & control strategies	<p>The unit enhances competency in:</p> <ul style="list-style-type: none"> <li>-common orthopaedic presentations and rehabilitative strategies</li> <li>Work task process breakdown -Hazard/injury/risk identification i</li> </ul>



		<p>-Office workstation ergonomics assessment and intervention</p> <p>-Vehicle ergonomics assessment and intervention</p> <p>-Manual handling reviews and adjustment principles.</p>
HMO7005- Advanced Clinical Theory & Skills 5 CONT	Rehabilitation programs within the workplace	Grows student ability to apply rehabilitation principles to workplace musculoskeletal presentations and complaints, including aiding recovery through working processes.
HMO7004- Applied Clinical Theory & Skills 4	Peripheral and core rehabilitation assessment	Encourages awareness of movement/activity assessments as a specific class of functional capacity assessment for fundamental movements and capabilities associated with specific components of the body.
HBS1004- Clinical Skills 1; HBS1204- Clinical Skills 2; HBO2005- Biomedical Science for Osteopathy 5; HBO2007- Biomedical Science for Osteopathy 7	Each of the four subjects focuses on analysing bodily mechanics and functional capacity for activities of daily living including limb use (upper limb, lower limb), spinal functional grading (cervical, lumbar, thoracic)	<p>Grows skills in functional movement/capacity assessment evaluations for regional physiological capabilities used in activities of daily living, including work. Goniometric assessment and relating findings to recovery milestones and estimating impairment is a core feature of units.</p> <p>History taking and recording a case history collecting all relevant information is a core competency to enable thorough informed consent and interdisciplinary care.</p>
HBS3004- Patient and Health System 2	Interdisciplinary management planning within Australian service delivery contexts	Unit instructs on PROM outcome measure use in establishing functional status, monitoring and communicating recovery outcomes with specific emphasis on integrating the interdisciplinary team in relation to PROM findings. Students also analyse osteopathy workforce data and explore ethical considerations, legal and regulatory requirements in various workforce contexts. This prepares students to understand their role in delivery systems, and to adhere to guiding principles and compliance requirements in third party schemes.
HMO7001- Applied Clinical Theory & Skills 1	Persistent pain management planning and rehabilitation	Unit covers the pathophysiology of pain, pain contributor assessment and biopsychosocial contributors to pain experience and multidisciplinary rehabilitation strategies. It also requires students to consider how they would write up and communicate their findings within a medicolegal reporting framework to WorkSafe Victoria.
HMO7004- Applied Clinical Theory & Skills 4 CONT	Psychopathology	Enhances knowledge of strategies helping graduates communicate with clients that may have a mental health concern and recognise when onward referral to the mental health professional is needed to assist rehabilitative planning. The unit helps students articulate the symptoms and implications of prevalent psychopathologies in the Australian population, and to recognise psychosocial risks that may present barriers to recovery.
HBS3005- Introduction to Clinical Practice.	Unit tests students on knowledge developed using	HBS3005- Introduction to Clinical Practice requires students to demonstrate a commitment to identifying biopsychosocial factors influencing a case presentation, to appraise biopsychosocial determinants of health and pain experience to integrate suitable screening procedures into management and

	Case Based Learning and patient simulation.	demonstrate skills in formulating management plans using clinical guidelines and referring to biopsychosocial factors. The biopsychosocial principle is a core aspect of the injury management model for workplace rehabilitation.
HMH7301- Patient, Practitioner and Health System 9	Develops student confidence to practice as a professional and make a contribution to care systems	HMH7301- Patient, Practitioner and Health System 9 requires students to develop skills in appraising management models against evidence informed and cost-efficiency protocols. They must be able to relate the contribution of these principles to their roles within the care system and career pathways post graduating. These principles are directly applicable to the injury management model for workplace rehabilitation.
HCM1000- Professional Communication	The unit develops students' ability to communicate evidence and opinions clearly in the professional world.	In HCM-1000 Professional Communication, students are trained in communication expectations in the professional world, including in the importance of culturally safe communication with diverse groups in the community. The emphasis is on students meeting the specific needs and expectations of differing receivers of clinical communication. This is a skill geared toward stratification of interests and targeting of goals in communication for best outcome, transferrable to workplace rehabilitation. Students must successfully investigate interprofessional practice in communication, show they understand norms of sound communication with minority and ATSi groups, as well as meet professional spoken and written norms for accuracy and ethics in communication. The unit develops students' ability to reflect openly on communication they may receive and how to act on it in practice. The value of constructive feedback for self-assessment in professional contexts is emphasized.
HRE1000- Evidence and Research	Students are supported to convey evidence justifying decisions to produce confident professionals.	HRE1000- Evidence and Research helps students develop skills to interpret and communicate health related evidence in a variety of formats. Students are supported to consume, review and evaluate research products for practice implications.
HMH7303- Clinical Practice 3	An applied clinical placement unit developing capacity for team work, collaboration with peers and patients/clients.	In HMH7303, student self-efficacy skills are tested, in particular showing effective engagement in clinical environments with diverse patient/client populations and empowering people to self manage through delivery of education and rehabilitation.
HBS2001- Evidence Based Practice for Osteopathy	Students investigate the application of qualitative and quantitative research, their biases and confounders.	HBS2001- Evidence Based Practice for Osteopathy assists students to appraise various sources of evidence and develop an awareness of the various levels of evidence justifying interventions. These levels of evidence are transferrable to workplace rehabilitation practices and review of such.
HMH7105- Clinical Practice 1	Applying clinical skills in to practice based scenarios	As part of the practicum subject, students practice and roleplay effective approaches to communicating with employers and workers sensitively pre and post assessment and for modifiable duty recommendation.

HMO7002- Applied Clinical Theory & Skills 2	Students explore associations between activities of daily living and health status	Students learn about the relationship between remaining connected to activities of daily living, including work post injury, for client individual health and social outcomes. Students are encouraged to develop skills to identify and address an employer's requirements within exercise rehabilitation programs to be performed at work for recovery.
HBS2003- Patient & Health System 1	Develops student confidence to practice as a professional and make a contribution to care systems	Students learn about the eight most common non-communicable diseases in Australia, their costs and associated losses for employers as a background to understanding why early management is important. Further, students are encouraged to consider the effects of health status and health related behaviours on workplace operations, and workplace effects on health status and health related behaviours.
HMO7006- Applied Clinical Theory & Skills 6	Develops clinical reasoning skills to prepare students for clinical practice	As part of the unit, students learn about employers' interests in injury management, integrating employer needs into case planning and facilitators/ barriers to workplace reintegration post injury. Referring to cases covering employers and employees, students consider legal and ethical requirements in coordinating parties for recovery outcomes.

**Table 4: Southern Cross University unit overviews in detail**

<b>Course unit</b>	<b>Subject description</b>	<b>Unit outcomes</b>
OSTP5002- Osteopathic Medicine	Students deepen understanding of the diagnostic and assessment methods in primary care, with particular focus on aged care, rehabilitation, psychology and counselling, and pain management	Students develop competency in collecting data and insight through clinical counselling, applying knowledge of psychological influences on health and function.
OSTP5005- Osteopathic Medicine II	Students learn blue and black flags and their indicators linked to biopsychosocial assessment. Students review cases that include the need for rehabilitation for return to work, with practical sessions in activities of daily living and work based functional	Students refine competency in constructing, reviewing and refining plans for recovery based on the principles of activity- based rehabilitation.

	rehabilitation planning and execution.	
OSTP6010- Osteopathic Medicine III	Students evaluate ergonomic issues affecting diverse work groups and negotiate appropriate ergonomic advice for management.	Students develop understanding of ergonomics and their role in ergonomic assessment and prescription as a future osteopath. Students are exposed to principles and issues in WHS and mechanisms of task based injuries. Students cover office workstation ergonomics, vehicle ergonomics, and are instructed in manual handling risk assessment & training. These skills would support integrated communication with the worker, employer and treating providers for injury prevention and recovery strategies.
OSTP6001- Osteopathic Clinical Practice and Research I  OSTP6002- Osteopathic Clinical Practice and Research  OSTP6005- Osteopathic Clinical Practice and Research III  OSTP6004- Osteopathic Clinical Practice and Research IV	All units require students to implement and explain management plans, including for chronic pain and neuromusculoskeletal rehabilitation.	Students must lodge a clinical portfolio showing assessment and management primarily with ancillary modalities for rehabilitation and demonstrate use of standardised Outcome Measures, including functional scales.  Students also demonstrate capacity to engage in self-reflection for improvement and professional attitudes toward patients offering views or feedback. These are skills directly transferrable to responding to issues or complaints in workplace rehabilitation.
OSTP2003- Osteopathic Diagnosis 1	Provides a comprehensive introduction to clinical skills required in the risk managed assessment of the individual.	Students are taught about requirements for professional behaviour and ethical and legal requirements in health care practice.
PBHL1002 - Health Promotion and Wellness. I	Introduces students to lifestyle interventions that promote health and wellness, taking into account the physical, psychological, social and emotional wellbeing of the person. This unit promotes the importance of the therapeutic relationship in promoting healthy lifestyles, including physical activity, good nutrition, and stress management.	PBHL1002- Health Promotion and Wellness assists students to work in an active way with patients/ clients. Students must understand health and wellness promotion, review case studies in health promotion and demonstrate application of principles of wellness coaching and communication in the clinical setting. These are skills specific to motivating the client, identifying the needs of the client and organising stakeholders around those needs for workplace rehabilitation.

<p>PSYC1003- Psychology and Sociology for Health Sciences</p>	<p>Introduces areas of psychology and sociology relevant to health practitioners</p>	<p>Provides the theoretical underpinning required to achieve understanding of the dynamics of human behaviour and the structure of the social world for application in practice. PSYC1003 covers individual, social and personality factors and their impact on health and wellbeing. Students apply psychological and/or sociological theories to individual health contexts and identify strategies to encourage behaviour change for outcome fulfilment.</p>
<p>STAT2001- Introduction to evidence for health science practitioners</p> <p>OSTP 6009- Translating research into practice</p>	<p>Methodologies, data interpretation and application in health science</p>	<p>Students student skills in Identifying problems, purposes, aims, questions, hypotheses, methodological designs, data collection methods, data analysis including descriptive and inferential statistics, and thematic analysis, interpreting and reporting findings. This supports evidence based practice and integration of strategies based on best available evidence for workplace injuries.</p> <p>The units also aim to develop students' ability to disseminate their research findings, including communicating them verbally and in writing appropriate to an identified audience and to promote uptake of research findings in practice.</p>
<p>HLTH3003- Transition to Professional Practice</p>	<p>Application of theoretical and reflective practice skills in scenario based clinical learning</p>	<p>As part of the unit, students are encouraged to reflect on the impact of musculoskeletal injury for greater work practices/work relationships and how integrated case planning can be used to manage impacts. Students explore the benefits of early return to work and daily living activities post injury and the benefits of early and timely communication with workplaces/employers in client care.</p>

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