



AUSTRALIAN
PHYSIOTHERAPY
ASSOCIATION

APA ADVOCACY NEWS

JULY 2021



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Workforce: stronger skills focus needed

The APA has called on the National Skills Commission to set the skills mix and roles that will deliver quality and safe care across aged care, disability, veterans and mental health care.

In responding to the Care Workforce Labour Market Study, the APA welcomed the National Skills Commission's approach to setting objectives to developing a responsive and capable care and support workforce to drive workforce development for the care sector. The study has come at a critical time in the policy cycle and finally puts into focus the demand and supply factors impacting on the care and support workforce in delivering vital care.

Valuing skills must be core to the response to attract optimal staff and skill mix appropriate to need to strengthen quality of care and quality of life outcomes.

The lack of investment at this level has seen the skills profile of the workforce deteriorate, leading to serious policy impacts that translate as missed or rationed care and resultant neglected care.

Care and support workers remain the most undervalued, resulting in low job satisfaction and low relative pay. In addressing Australia's insecure work crises, a priority focus must be placed on this essential component of the care workforce.

In our submission we have called on the Commission to use this opportunity to finally set the skills mix and roles that will deliver quality and safe care.

Policy inaction in aged care and the ineffective iterative reform approach in disability, where pricing, workforce shortages and uncertainty have significantly impacted workforce development, have limited supply planning.

In setting policy directions, the APA agrees that a more diverse skill mix is required to enable more person-centred approaches across sectors. Supportive funding models are needed to fully realise the potential opportunities presented by advanced scope roles. However, it is clear that optimal models cannot work in an underfunded service environment where changing patterns of demand, significant reform and incremental change have not been matched with appropriate changes in funding models.

Significant reform is required to optimise this workforce to allow person-centred, relational models of practice and adequate time for care. This requires a more prescriptive skills focus supporting advanced scope roles that can facilitate more multi-disciplinary, team-based approaches to enable high quality care.

The APA is calling for increased funding to develop the existing physiotherapy workforce including in enabling upskilling and advanced skill acquisition to manage increasing complexity and co-morbidities.

Further details: [APA Submission to the National Skills Commission Workforce Labour Market Study](#)



Aged care

The APA is continuing to pursue our advocacy agenda and engage with a range of key stakeholders across the political spectrum and the aged care sector with a focus on securing dedicated funding for the provision of physiotherapy in residential aged care settings. We briefed Senator for Tasmania Jacqui Lambie, and Greens Senator Rachel Siewart, on our concerns about the inadequacy of the Federal Government's response to the Royal Commission into Aged Care Quality and Safety in regard to funding allied health in residential aged care.

We met with the architect of the new residential aged care funding model, the Australian National Aged Care Classification, Professor Kathy Eager and the Australian Association of Gerontology to advocate on behalf of physiotherapy. The APA is also partnering with the largest providers of allied health care to write to the Minister for Health Greg Hunt to express our concerns. We have scheduled meetings with the peak bodies representing aged care facility providers Leading Aged Care Services Australia and Australia Aged and Community Services Australia to understand how we can work with them to ensure residents receive high quality, evidence-based care. We are also meeting with Shadow Assistant Aged Care Minister Ged Kearney and contributing to AHPA's work with Shadow Health Minister Mark Butler on securing targeted funding for allied health.

The APA is contributing to a number of critical consultations about new allied health provision in residential aged care, including the Department of Health evaluation of temporary MBS item number and the Aged Care Group Therapy program being conducted by The Nous Group. National Gerontology Chair Joanna Tan will represent the profession at a Department of Health-commissioned consultation examining the Royal Commission recommendations in regard to allied health.



Compensable schemes

Australian Capital Territory

The APA has met with the Motor Accident Injury Regulatory Policy and Supervision at the Treasury and Economic Development Directorate about guidelines for the new Motor Accident Injuries scheme. We worked with the Directorate to promote these guidelines to members via a joint lecture.

New South Wales

The APA has met with SIRA on a number of occasions over the past six months. The most recent round of meetings has focused on proposed recommendations to the fee schedule, mainly centred on Consultation C in the fee schedule and the definition of the eligibility for patients.

The APA has also collaborated and developed a submission for SIRA's research program. This submission forms part of the ongoing involvement the APA has with compensable schemes and the role of contributing and leading ongoing policy development to help patients achieve optimal health outcomes.

The APA is contributing to a quantitative study being undertaken by Monash University on the certificate. We are working with icare on upskilling case managers and allied health providers to complete the certificate.

Victoria

The APA has had its quarterly meeting with the Transport Accident Commission (TAC). We will also be presenting to the TAC on high-value care models and collaborating with the TAC to build the evidence base about this. The TAC wants to work with, and learn from, the APA and value-based health care leaders within the physiotherapy profession.

Queensland

The APA is continuing to meet regularly with WorkCover Queensland in relation to a number of topics including:

- improving communication with WorkCover Queensland (WCQ) and customer advisors
- continuing to advocate for changes to items and descriptors and adequate remuneration for services provided
- recognition of titling and experience, and
- certification.

The APA is continuing to meet with Maurice Blackburn quarterly and working with the Aquatic Group to express concerns about the removal of a dedicated Gold Coast hydrotherapy pool.

We are holding a member online event on Tuesday, 27 July entitled Rehabilitating a Complex Workers' Compensation Claim at 7pm. This presentation is being made by Matthew Bannan, Executive Professional Services at WorkCover Queensland, and Tom McMillan FACP and Director at PhysioPlus.

Further details: [registration](#)

COVID Related Advocacy

NSW

The ongoing advocacy work and relationship building of the APA has seen the continued recognition of physiotherapy as an essential service during lockdown, enabling the delivery of essential care face to face during these difficult times. The APA is actively working to ensure private practices impacted by restrictions are included in business financial support programs now and into the future.

To further support our members, we have re-activated a digital campaign to educate consumers about telehealth and common conditions associated with working from home and limited sport/activity that physio can assist with.

Victoria

Victoria's Business Costs Assistance Program was implemented to assist businesses impacted financially by lockdowns. The program did not initially include allied health businesses in the list of those eligible for assistance. However, the APA's strong, ongoing advocacy efforts paid off with physiotherapy businesses classified as eligible to receive assistance in second round of the program. This win would not have been possible without the individual advocacy efforts of APA members to lobby their local MPs.

The ability for physiotherapists to deliver essential/urgent care face to face during lockdowns was also secured.

South Australia

Amendments to South Australia's Level 5 restrictions were secured during the latest lockdown enabling physiotherapy to be delivered in the aged care or disability sectors and for the relief of pain by private practitioners.

Western Australia

The APA continues to lobby the West Australian Government strongly through a range of channels to allow physiotherapists to deliver essential care face to face during lockdowns. We will continue to advocate strongly for this change.

Small Business Lockdown Grants have not been made available to private practices impacted financially by lockdowns. The APA is undertaking ongoing advocacy, including using a range of media channels, to broaden the eligibility criteria to include physiotherapy private practices.

Federal

The APA is leading promising discussions with the Federal Chief Allied Health Officer (CAHO) to secure a single, consistent and universally accepted definition of essential work that includes the delivery of critical-care physiotherapy and physiotherapists as essential workers. We are driving for this definition to then be accepted by all state/territory CAHOs as a consistent and predictable guideline for future lockdowns across the country.

The APA has continued to advocate strongly for the physiotherapy profession throughout the recent lockdowns and restrictions across the nation.

Digital health

Collaboration with the Australian Institute of Health and Welfare

The APA continues to engage with the Australian Institute of Health and Welfare (AIHW) and support them with their physiotherapy data capacity and capability project.

The number of respondents to the Digital Health Audit exceeded expectations and the APA and AIHW thank those members who took part. The data captured provided a valuable insight into the uses of digital technology in physiotherapy practice and will play a vital role in our advocacy efforts.

In the next phase, the AIHW will seek to undertake a physiotherapy demonstration project with physiotherapists who expressed interest in further collaboration. The aim of this phase is to understand in more detail the clinical information being captured through the use of digital technologies in physiotherapy practice.

Engagement with Australian Digital Health Agency

The APA has recently met on a number of occasions with the Australian Digital Health Agency (ADHA), the lead organisation driving the digital health journey for Australia.

These meetings have provided us with the opportunity to outline the value of physiotherapy and understand the work being undertaken by the ADHA.

As a part of this new relationship we have been invited to monthly ADHA Digital Health Forums. The forums are attended by key health stakeholders such as state governments, Primary Health Networks and peak bodies, and provide an opportunity to share and discuss points of interest regarding digital health.



PROMS

The APA has organised a number of meetings to progress the current PRF-funded research program on PROMs collection. One such meeting is with the Victorian Transport Accident Commission (TAC) to look at how PROMs could be used effectively as part of the TAC Beyond 2020 Strategy. These meetings are working toward the next phase of advocacy efforts when the PRF-funded research project is completed and the learnings can be used to progress further activities.

Telehealth

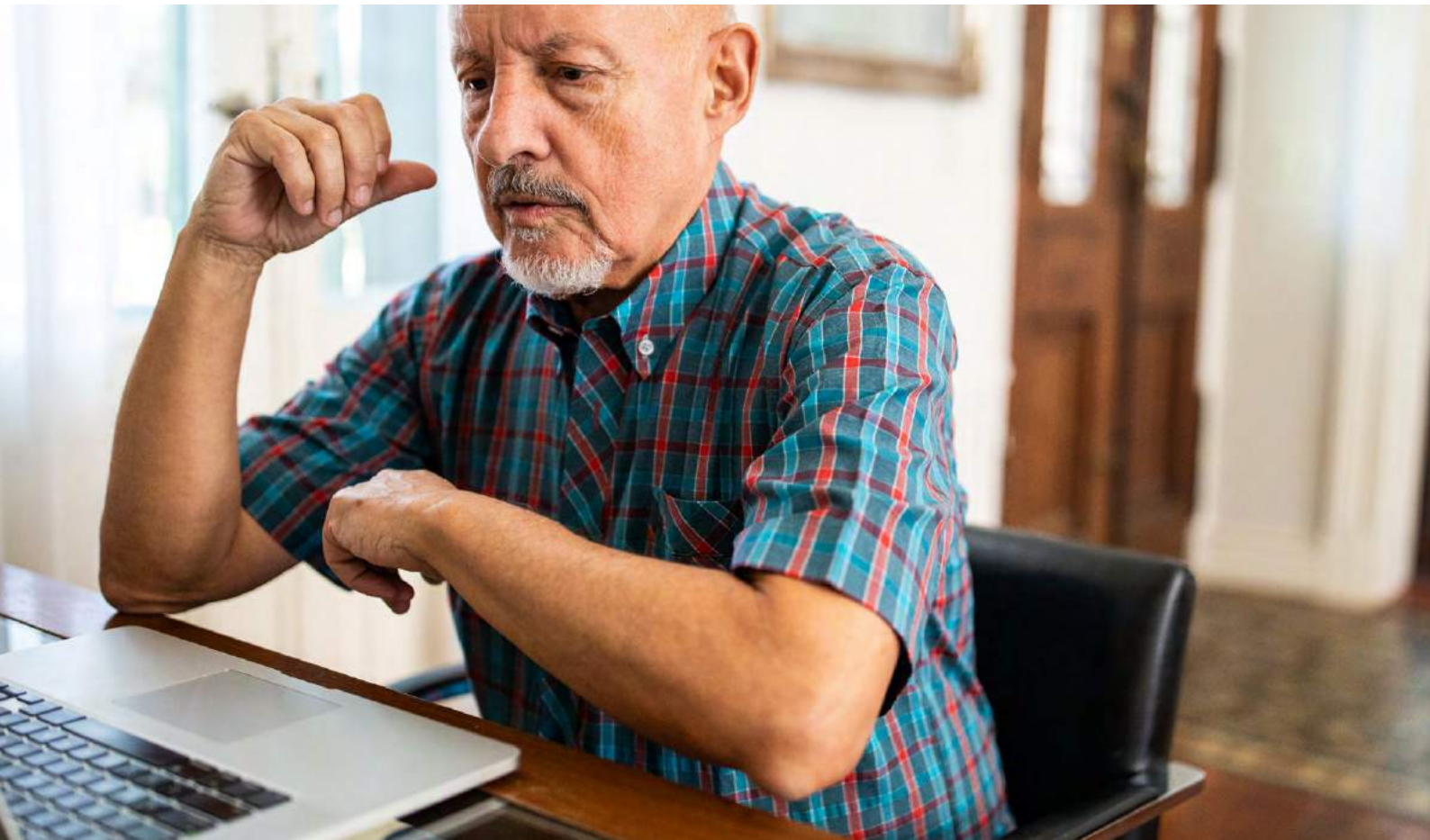
The APA supports the Department of Health's recent announcement to extend telehealth to the end of June 2021.

So far more than 51 million telehealth services have been delivered to 13 million patients and almost \$2.6 billion in benefits paid. More than 82,000 providers have used telehealth services nationwide. The Government will continue to review the ongoing role of COVID telehealth to support the pandemic in the short term, while we plan the permanent post-pandemic telehealth arrangements with peak doctor groups.

Prime Minister Media Release 14 March 2021

The APA also continues to meet with Private Health Insurance funds. At this stage there has been overwhelming support from the Insurers with both Medibank and BUPA supporting the ongoing use of telehealth by physiotherapists.

Further details: [Updated items and codes for telehealth via Private Health Insurance](#)



Disability

NDIS consultations open for contributions

There are currently two National Disability Insurance Scheme (NDIS) consultations open for contributions. These are online surveys consisting mostly of multiple choice questions on the topics of Home and Living, including matters related to assistive technology and home modifications, and Support for Decision Making. Respondents can choose to have their contributions published or kept private.

Although the consultations are targeting participants, they are also open to providers. As allied health professionals working with people with disability, APA members are strongly encouraged to have their say in the consultations. Deadline to complete both consultations is 27 August 2021. Introduction videos and consultation papers are available on the consultations' respective pages.

[Further details:](#)

[Home and Living consultation – An Ordinary Life at Home](#)
[Support for Decision Making](#)



NDIS Independent Assessments

On Friday 9 July, following a meeting with the State Ministers for Disability, Minister for the National Disability Insurance Scheme (NDIS) Linda Reynolds announced that NDIS Independent Assessments (IA) would not proceed. The disability sector as a whole, participants and their representatives, and health peak bodies, have all advocated tirelessly for months against the introduction of this unfair measure.

During this time, the APA contributed various submissions to oppose the introduction of IAs, and published media releases broadcasting our position. All are available on APA's website.

In terms of political engagement, the Policy team has met with Bill Shorten, Shadow Minister for the NDIS, and with Minister Reynolds' NDIS advisor. Follow-up material was provided to Mr Shorten to further explain the context of the work of our members in the NDIS.

Minister Reynolds and the NDIA have committed to a co-design approach to review the current eligibility assessment model. The APA is already working with AHPA on how best to approach the next phase.

Build Your Confidence in Disability Management course

The six eLearning modules of Build Your Confidence in Disability Management training are now available online in the cpd4physios catalogue. Enrolments have grown from an initial 239 physiotherapists during the trial phase to more than 500 participants.

The training, developed by the APA as part of our Department of Social Services Jobs and Market Fund grant project, is online and self-paced, so very easy to accommodate in the busiest schedules.

The advertising campaign to promote the free eLearning modules to physiotherapists and other health professionals started in May and you probably have seen it on APA social media, newsletters or in InMotion. There is also an APA YouTube playlist with awareness videos that we highly recommend you watch.

The teams are now working on the second phase of the project to deliver an additional module to complement initial modules.

Further details:

[Enrol](#)

[Youtube playlist](#)



Submissions

[Inquiry into the purpose, intent and adequacy of the Disability Support Pension \(DSP\) – Senate Standing Committee on Community Affairs](#)

The APA took the opportunity of an inquiry on the purpose, intent and adequacy of the Disability Support Pension to reiterate the critical role of physiotherapy for people living with disability. The right level of income support via the DSP can unlock access to critical health support and in turn increase mobility, social participation and access to suitable employment.

Further details: APA's submission is available on the Committee's [website](#).

[National Disability Insurance Scheme \(NDIS\) Psychosocial Disability Recovery-Oriented Framework](#)

The APA responded to a targeted consultation on the NDIS Psychosocial Disability Recovery-Oriented Framework, particularly on the draft principles of the framework. With input from the Chair of the National Mental Health Group, the APA reaffirmed the importance of recognising the link between physical and mental health, and recommended a person-centred approach that supports people across the whole continuum of care.

Submissions to this consultation are not publically available.

Mental health and suicide prevention

APA National President Scott Willis has given evidence at the Mental Health and Suicide Prevention Committee inquiry. Scott told the Committee that the best way to help people experiencing mental and physical health problems is through multi-disciplinary team-based care. The health system cannot continue to separate mental and physical health, and the inclusion of physios in multidisciplinary teams will help address the crisis in mental health.

He also noted the barriers to effective communications between allied health providers and access to the digital infrastructure that are needed for effective health care. As the APA submission to this inquiry stressed, every door must be the right door. Physios have the skills and rapport with their patients to prevent escalation of mental illness but also to understand when to refer patients on for other specialist care.

As part of our engagement in the Mental Health sector, APA President Scott Willis has met with Shadow Minister for Mental Health Emma McBride, and with Professor Ian Hickie from the Brain and Mind Centre.

Further details: [APA Select Committee on Mental Health and Suicide Prevention submission](#)

Rural health

PRIMM grants

Members may be aware that the National Rural Health Commissioner is working with regions to support the development of 'trial ready' localised innovative models of care through the Primary Care Rural Innovative Multidisciplinary Models (PRIMM) grants.

The Commissioner and the Department released a grant opportunity in February 2021 to develop local, integrated, multidisciplinary models of primary care through a co-design process with rural and remote communities. This grant closed in March and feedback has been developed for all applicants.

This feedback document provides important detail for members in clarifying the objectives of the grant and useful tips on how to shape future applications.

For more information and register to receive updates regarding future funding rounds, search 'PRIMM' on GrantConnect.

Further details:

[Department of Health feedback for all applicants](#)

[Grantconnect](#)



Have your say on rural policy

Prioritising rural physiotherapy

Physiotherapists play a crucial role in our rural health workforce and we work hard to ensure decision makers understand our value.

Despite some policy attention in recent weeks in the Federal Budget, it is clear that a single training package measure that targets the broader allied health workforce will not lift workforce constraints to address the entrenched disadvantage faced by rural communities.

The recent workforce investment for the allied health sector, in the form of the Allied Health Rural Generalist training package, is welcomed. But the training package is clearly not enough to address the issues facing rural health and impacting on rural physiotherapy workforce development, particularly when compared to the investments in medical training over the past decade.

This single policy measure falls well short on the level of investment required to fix the access constraints that limit rural patients from accessing essential physiotherapy services. Meanwhile, maldistribution persists and practice viability remains under threat for our discipline.



What's needed?

We need more discipline specific action to address these issues and we'd like our members input on some immediate policy issues impacting on workforce.

The Allied Health Rural Generalist Pathway (AHRGP) offers an early career workforce development solution and has been successful across public settings for some jurisdictions. The AHRGP has great merit for early career physiotherapists to enter the rural workforce in a supported way but our profession needs much more than this. A stronger policy focus is required to strengthen supports to address the policy barriers for rural physiotherapy service provision.

In contrast to medicine, physiotherapy graduates who choose to take rural positions do not currently have access to a national scheme. Our rural members don't have access to a rural Practice Incentive Program Teaching Payment to compensate for supervision and teaching time. We need a flexible and funded 'rural pipeline' that provides a framework of entry to rural practice that can be applied at any stage of their career.

In supporting the existing workforce, recognition of rural physiotherapists as a highly skilled, supported and a valued resource is needed to incentivise career choices in rural health. Strategies to support retention require a strong commitment to improving the policies, programs and infrastructure specifically targeted to building capacity for physiotherapy service provision.

More focus on the value of physiotherapy

A key part of our strategy to increase access to rural physiotherapy lies in defining our value.

Recruitment and retention of physiotherapists is challenging and requires more policy attention with a focus on skills. If we are to value the existing workforce, there is a need to prioritise retention strategies, including incentivised upskilling and advanced skill acquisition to build workforce capacity.

We know that strategies to strengthen the workforce and improve quality of care are closely aligned to skills and skill recognition. This requires a more prescriptive skills focus supporting advanced scope roles that can facilitate more multi-disciplinary team-based care in enabling high quality care.

Support for the existing workforce to meet the shifting skill requirements to address patient and community need is often overlooked. This is an area we want to test further with our rural members. To enable patient access we must focus effort on areas that provide both a training benefit and meet a community health need. A significant and resource intensive project is required to facilitate this shift and we will need a policy consensus.

A sustainable solution that meets both attraction and retention aims is needed. We recognise the value of the AHRGP for all allied health professions including physiotherapy, however this alone will not achieve these aims for our profession across the stages of a physiotherapist's career. Our profession needs more discipline-specific and rural-context advanced skill development opportunities with clinical experts across several clinical streams. An APA titling pathway that is accessible to physiotherapists across the nation and includes targeted incentives to progress skill levels throughout one's career is one possible solution.

Early career workforce attrition remains a key issue impacting on the profession and future supply. There is a need to prioritise retention strategies, including incentivised upskilling and advanced skill acquisition to build workforce capacity.

A skill acquisition pathway

In valuing skills, one way to acknowledge the increased clinical skills held by rural physiotherapists is in formalising a skill acquisition pathway.

The APA's National Rural Advisory Committee has discussed the need for a discipline specific skills solution over recent months. There is a need to formally recognise in policy the APA's Physiotherapy Career Pathway as a skill acquisition pathway acknowledging the increased clinical skills held by rural physiotherapists in addressing unmet service need. This includes exploring how advanced rural skills are defined by rural physiotherapists.

The committee sees significant benefit in pursuing a discipline-specific Rural Generalist – Physiotherapist Pathway. A discipline-specific pathway would help to formally recognise the role including the comprehensive skillset across many clinical areas held by rural physiotherapists. The proposed pathway would ensure both profession-specific and context-specific content offering a flexible skill acquisition pathway for rural members that can be tailored to community need across targeted clinical areas of rural practice expertise.

More broadly, by defining our skill differential, decision makers can better understand our value and the specific skills that rural physiotherapy provides and the associated gains to patients and the healthcare system. However, the preference to pursue an APA Rural Generalist Physiotherapist career pathway needs to be fully tested with the broader rural membership.

What can you do? Take the poll

We are asking our rural members to undertake a short poll so we can fully test need and build a policy consensus around prioritising a skill acquisition pathway for rural physiotherapists.

The following Quick Poll will provide the National Rural Advisory Committee with a greater understanding of your preferences for future direction on this matter. The APA values your contribution and welcomes you to complete the following survey.

The survey should take approximately five minutes to complete and your responses will be anonymous.

Further details: [Poll](#)



Sports injury

Australia does not have a national sport injury data collection mechanism that can provide information on injuries occurring during community sport (that do not result in admission to hospital). Without good quality data, it is difficult to understand the positive impacts of sports participation in the context of the risks associated with injury. Furthermore, this makes it difficult to understand the true risks of participation in community sport, or the effectiveness of injury prevention policies and programs.

The Australian Institute of Sport and Australian Institute of Health and Welfare have partnered to improve national sporting injury surveillance.

They are seeking input from physiotherapists about injury data reporting and collection in a new survey.

Further details: [survey](#)



Veterans

Telehealth

Telehealth services and other temporary COVID-19 arrangements for Department of Veterans' Affairs (DVA) clients have been extended until 31 December 2021.

Treatment cycle arrangements continue to apply for DVA clients seeking to access allied health services through telephone and video conferencing. Where required, clients may also access a GP referral for clinically required allied health treatment via a telehealth consultation.

Updated information on temporary COVID-19 health arrangements is now available on the DVA website. DVA is also updating the allied health fee schedules with the extension of the telehealth items and to apply indexation, with effect on 1 July 2021.

Active Choices

Active Choices, a University of Queensland (UQ) research project funded by DVA, has closed recruitment with 35 participants signed up. The main focus now is to deliver the intervention and outcome measures, with program sessions running until mid-October. The aim of the project is to link and empower DVA clients towards group-based physical activity opportunities.

The purpose of the research is to collect information on best practices that may help DVA clients' transition to active lifestyles that are socially connected to local communities.

The UQ team partners with exercise physiology and physiotherapy service providers, to offer access to the Active Choices support program for DVA clients who are interested in self-managing their physical activity. The program may also benefit DVA clients seeking to reconnect with their local communities following the easing of COVID-19 restrictions.

Boosting Local Care Workforce

The APA is attending a roundtable meeting coordinated by the Boosting Local Care Workforce as requested by the Department of Social Services to explore the service profile, nature, and composition of DVA-administered services. The information will be used to inform our understanding of issues impacting the delivery of services and inform future policy development.





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