

APA Musculoskeletal Spinal Courses – information and FAQ's

The future of Musculoskeletal courses

The APA and MPA are rolling out a new suite of spinal courses that consist of highly contemporary and relevant information for a musculoskeletal physiotherapy audience. They are/will be considered foundational courses for the MPA, representing the most important knowledge and skills for postgraduate musculoskeletal physiotherapists.

The new suite of spinal courses will consist of eight online modules and four separate weekend courses:

- 4 x Part A online pre-requisite modules
- 4 x Part B online pre-requisite modules
- Part A (Lumbar)
- Part B (Lumbopelvic)
- Part A (Cervical)
- Part B (Cervicothoracic).

Physiotherapists must complete the four Part A online pre-requisite modules to be eligible to undertake the first of any of the two Part A face-to-face courses. Similarly, the four Part B online pre-requisite modules must be completed before a physiotherapist is eligible to undertake the first of any of the two Part B face-to-face courses.

After completing the four online modules for each Part, a physiotherapist will be able to complete any of the face-to-face courses in any order at any time. This flexibility will enable a physio to skill up in one area at a time when it suits them best.

The new Spinal Physiotherapy Part A (Lumbar) and Spinal Physiotherapy Part A (Cervical) courses are now available on the APA PD calendar and taking registrations. The Spinal Physiotherapy Part B courses are not likely to be available on the APA PD calendar until 2020.

What about the Spinal Physiotherapy Level 1 and Spinal Physiotherapy Level 2 courses?

The Spinal Physiotherapy Level 1 course has been retired. For the time being, it is recommended that physiotherapists complete the Part A online modules then enrol in either or both of the new Spinal Physiotherapy Part A courses that are currently available on the APA PD calendar.

The current Spinal Physiotherapy Level 2 course will remain on the calendar and available for registrations. We continue to update the material in this course by working with presenters to update/add information as required to ensure it remains a relevant professional development opportunity for our members. This course will not be retired until the Part B online modules and the two new Spinal Physiotherapy Part B courses have been developed and are available on the APA PD calendar. This is likely to be in 2020.

I have already attended the retired Spinal Physiotherapy Level 1 course. Should I wait until 2020 when the new Spinal Physiotherapy Part B courses may be available?

For the sake of consistency of material and participant learning experience, we recommend those who have already completed the retired Spinal Physiotherapy Level 1 course, to continue on with Spinal Physiotherapy Level 2 course whilst it is offered on the APA PD calendar. We continue to update the material on the Spinal Physiotherapy Level 2 course by working with presenters to update/add information as required to ensure it remains a relevant professional development opportunity for our members.

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If I have already attended the retired Spinal Physiotherapy Level 1 course, but miss an opportunity to attend the Spinal Physiotherapy Level 2 course, what are my options?

If you do not have a chance to take Spinal Physiotherapy Level 2 before the Part B courses are developed and available on the APA PD calendar (likely in 2020), Part B courses will still be a rich addition to your PD portfolio.

Can I undertake Spinal Physiotherapy Level 2 course if I have not undertaken the retired Spinal Physiotherapy Level 1 course?

If you have completed equivalent training to that learned in the retired Spinal Physiotherapy Level 1 course, you may be able to enrol straight into Spinal Physiotherapy Level 2. Information and learning outcomes of the retired Spinal Physiotherapy Level 1 course can be found on the next page for your information.

If you believe you possess the equivalent training, please submit your CV, including an outline of the training you have undertaken, to the APA Event Delivery staff member managing the Spinal Level 2 course you wish to attend. This will be assessed by the local MPA Committee to determine your eligibility.

Course title changes to Spinal Part A courses

Effective 3 August 2018, the course titles for the new Spinal Part A courses have been amended. The new titles are as follows:

Spinal Physiotherapy Part A (Lumbar)
Spinal Physiotherapy Part A (Cervical)

The amended titles more accurately reflect the content covered within the Part A courses. Please note: it is simply a change in course title only - the content and learning outcomes in each of the Part A courses remain unchanged. The pelvis and thorax will be covered in the Part B courses.

Path to Musculoskeletal Titling and Specialisation

The Musculoskeletal experiential pathway has been temporarily placed on hold whilst the framework is under review.

This should not prevent you from attending any of the musculoskeletal courses, whether it be the new Part A and B courses, or the current Spinal Physiotherapy Level 2 course. In keeping with other disciplines, it is very likely that each of these courses (including the retired Spinal Physiotherapy Level 1 course) may contribute in some way to a musculoskeletal physiotherapist's experiential application, once the experiential pathway is reinstated.

The new Spinal Part A and B courses are not at this point in time, part of the MPA's experiential pathway.

Musculoskeletal titling may still be achieved via the [Musculoskeletal academic pathway](#). Once Musculoskeletal titling is achieved via the Musculoskeletal academic pathway, physiotherapists may continue on to apply for Fellowship of the Australian College of Physiotherapists by [Specialisation](#), or [Original Contribution](#).

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Information on the retired Spinal Physiotherapy Level 1 Course

The four day course aimed to provide the recent graduate physiotherapist, or those returning to musculoskeletal practice with a more detailed exploration of the clinical skills needed for assessment and treatment of the cervical, thoracic and lumbar spine. The course content included theoretical and practical components relating to assessment and management of neural, myofascial, articular and motor control systems within a clinical reasoning framework. The safe use of high velocity thrusts was taught with a high tutor to participant ratio.

Why did physiotherapists undertake it?

- Provided post-graduate learning experience and training to graduate physiotherapists in the musculoskeletal physiotherapy
- Extended participants biomedical knowledge, professional handling skills, clinical reasoning and appraisal in a biomedical/biosocial musculoskeletal paradigm.

Duration

4 days

Learning Outcomes

At the completion of this course, participants should...

1. have a greater understanding of the clinical reasoning processes, including pain mechanisms and models of health and disability, relevant to musculoskeletal physiotherapy.
2. be able to recall current theories and evidence for motor control and motor learning and their relevance in assessment and treatment of musculoskeletal conditions.
3. have furthered their skills in appraising posture and understanding of postural variance.
4. have enhanced their skills in the application and interpretation of a variety of manual lumbar and cervical spine assessment tasks.
5. have a greater understanding of the theory of normal soft tissue repair, factors influencing healing and developed their manual soft tissue assessment skills.
6. have more effective lumbar and cervical manual treatment skills
7. have developed their skills in assessment and treatment of lumbar and cervical spine motor control.
8. be better able to combine clinical reasoning with assessment and treatment strategies in the management spinal musculoskeletal conditions.
9. have a greater understanding of the clinical reasoning processes, including pain mechanisms and models of health and disability, relevant to musculoskeletal physiotherapy.
10. be able to recall current theories and evidence for motor control and motor learning and their relevance in assessment and treatment of musculoskeletal conditions