Contents
Fostering a customer culture to drive business growth ................................................................. 4
Embedding Indigenous ways of knowing in physiotherapy curriculum ........................................ 4
The future of rehabilitation is here: Medibank’s rehabilitation at home program ............................ 5
Complaints about physiotherapists – balancing public safety with the notifier/practitioner experience .......... 6
Physiotherapist not counsellor: Quick and easy steps to address patient thinking barriers to treatment advice .... 6
Peer patient: Students’ abilities to portray patient roles in simulation based education .................. 7
Engaged patients, digital health and mobile health apps: Driving change in healthcare .................. 8
Using Indigenous place and voice to guide physiotherapy students towards culturally safe practice ........ 8
Health Financing: What’s NEXT on the horizon? .......................................................................... 9
Who is NEXT? Empowering Emerging Leaders within a multidisciplinary team in a public setting .......... 9
Innovative curriculum development ............................................................................................... 10
Creative risk ................................................................................................................................... 10
NEXT! ..............................................................................................................................................
Using wearable technology to identify musculoskeletal injury risk in the workplace ......................... 11
The global learning partnership: Health promotion and community engagement in an international and inter-professional partnership ........................................................................ 12
Physiotherapy business models and increasing the value of your business into a valuable and sellable commodity ......................................................................................................................... 12
Practice management and the science of moving numbers ............................................................... 13
The NEXT wave of healthcare funding reforms .............................................................................. 14
Gate keeping the next generation of physiotherapists: Assessing adequate standard in clinical practice ............................................................................................................................... 14
Is telehealth revolutionising or destroying the physiotherapy profession? You decide ...................... 15
The future physiotherapy workforce – under or over supply? .......................................................... 16
Enriching physiotherapy student education with interdisciplinary Aboriginal and Torres Strait Islander health curriculum .............................................................................................................. 16
An argument for competency-based training in pelvic floor physiotherapy practice .......................... 17
How great patient experiences lead to healthier physiotherapy businesses ....................................... 18
Admin mastery: The value of a good reception and support team in a physiotherapy business .......... 18
There’s an App for that - Apps and technology for physiotherapy businesses .................................... 19
Digital disruption - balancing increased patient access with regulating to manage risk ....................... 19
How to fix Workers Compensation; a cure for a broken system, a NSWPF initiative ......................... 20
What is the future brand of physiotherapy? ....................................................................................... 20
Delivering a successful private practice research program - evolving insights ................................... 21
Social media for millennials: Current policy education in entry-to-practice physiotherapy programs .... 22
Leading physios to lead .................................................................................................................... 22
Micro-ambition to combat SMAT goals..........................................................23
Preventing harm before it happens - using data to inform risk-based regulation of physiotherapists .............24
Leading the future workforce...........................................................................24
'Bounce Back' clinic: A primary care multidisciplinary one stop clinic for frailty..............................................25
First contact physiotherapist in primary care; the art of possible ..............................................................25
The role of clinical placements in Indigenous health ..................................................................................26
My Life: a digital platform and wearable technology to deliver a heart disease rehabilitation program ..........27
The ‘Spinal Log’: Providing enhanced feedback on spinal passive accessory assessment and mobilisation ....27
Student fitness to practise self-declaration - an innovative approach ......................................................28
Student fitness to practise – strategies from the coalface ........................................................................29
Innovating upstream - engaging older adults in the development of exercise tools for PREhabilitation ..........29
Does culture really matter? .........................................................................................30
The global physio practice has arrived .............................................................................30
Vexing or vexatious – when complaints are vexing and not vexatious ..................................................31
Enhancing health professional workforce capacity within the National Disability Insurance Scheme: A pilot study .................................................................................................................................32
Evidence in your inbox: Free delivery of up-to-date, practice-relevant research direct to physiotherapists ......33
Perceptions about the implementation of physiotherapist prescribing in Australia: A national survey ..........34
Using technology to grow and market your clinic in 2018 (not 1998!) ......................................................35
Growing a values-led team that drives clinic growth ...........................................................................35
Embedding student research in clinical practice: Strategies to maximise mutual success ......................36
Supporting future Indigenous health researchers using a PhD familiarisation program .........................37
Fully online higher degrees: the NEXT step towards competency milestones in the physiotherapy career pathway? ..........................................................................................................................37
No more studying but plenty of learning: Overcoming the barriers to success in private practice ..........38
Building research capacity in allied health practice ...........................................................................39
Transformational leadership – putting theory into practice ...................................................................40
Welcome to the era of cognitive healthcare. Empowering heroes, transforming health. Big data & AI ....40
Can we sell our beige Torana (or will our advocacy fail)? ......................................................................41
Australian health system and funding reform. What do we know that works? ........................................41
Fostering a customer culture to drive business growth

Alex Allwood
All Work Together Pty Ltd, Sydney, Australia

Keynote 4, Grand Ballroom, October 6, 2018, 4:05 PM - 5:05 PM

Fostering a Customer Culture to Drive Business Growth discusses how to empower customer-led cultural change to improve customer experience. Using insights, research and stories, Alex shares her five-drivers to foster a ‘One Company, One Standard’ of customer experience to distinctively differentiate and enhance business value.

Embedding Indigenous ways of knowing in physiotherapy curriculum

Shawana Andrews
University of Melbourne, Melbourne, Australia

Concurrent 2C, Ballroom 3, October 5, 2018, 2:15 PM - 3:00 PM

The School of Health Sciences, (in which the Department of Physiotherapy sits) at the University of Melbourne (UoM) is asking its students to consider their role in the context of Indigenous health and ongoing disparities. The School, through the employment of its first Indigenous lecturer, has developed an Indigenous curriculum framework, Many Ways Learning – Indigenous Curriculum Framework, with which to structure an Indigenous narrative throughout each course and engage students in transformative learning. This presentation will outline the features of the framework and highlight how the Department of Physiotherapy has taken a lead role in the process.

The framework places an emphasis on cultural safety, reflexive practice and critical understandings and requires students to consider their identities, both personal and professional. The School of Health Sciences’ Indigenous curriculum brings together Indigenous knowledges and ways of being and doing with western pedagogy to produce graduates who can think and act critically, ground their practice within self-reflection and imagine possibility.

Connecting with Indigenous ideas, listening to Indigenous communities and engaging with Indigenous perspectives are the key principles of the Indigenous curriculum framework that is currently being implemented across the School, including within the Doctor of Physiotherapy. The implementation of the framework within physiotherapy has involved engaging students with the concept of ‘place’ by stepping outside of the classroom and considering the university’s position on Wurundjeri country. Extending students further, the curriculum seeks to make explicit connections between cultural perspectives and knowledges, clinical practice and good health outcomes. Using Indigenous spaces, case studies or policy documents, students engage in reflective discussion about the themes that rest at the intersection of history, culture, politics and physiotherapy practice.

In privileging Indigenous voice through the curriculum framework the teaching team is offering students a perspective and an insight to a worldview and way of knowing they have not come across before and its fostering an engagement with Indigenous health that will serve both graduates and Indigenous communities well.
The future of rehabilitation is here: Medibank’s rehabilitation at home program

Anna Barker1,3, Sanjeewa Senanayake1, Andrew McLaren1, Leonie Katekar1,5, Stephen Wilson2, Nicola Waller1, Rebecca Bell1,4
1Medibank Private, Melbourne, Australia, 2Mater Hospital, North Sydney, Australia, 3Monash University, Melbourne, Australia, 4University of New South Wales, Sydney, Australia, 5East Melbourne Primary Healthcare Network, Melbourne, Australia

Concurrent 7A, Ballroom 1, October 7, 2018, 11:20 AM - 12:05 PM

Project:
Despite evidence of the value of home-rehabilitation following joint replacement, in-hospital rehabilitation persists as the norm. Medibank has partnered with physiotherapists across Australia to translate RCT evidence into practice via the establishment of a national home-rehabilitation service following hip or knee replacement. This paper reports on the evaluation of the pilot and now national-service.

Relevance:
Physiotherapy services need to be patient-centred and evidence-based. Home-rehabilitation reflects these and is the NEXT frontier in rehabilitation practice.

Background:
Home-rehabilitation included care coordination and physiotherapy. Other clinical and non-clinical services were provided based on individual patient need.

The pilot operated between September 2016-July 2017 in Victoria with 182 participants. The majority (91%) were aged 60-79yrs with 49% undergoing knee replacement surgery and an average functional improvement score of 32 (p<0.001 pre-post) on the Lower Extremity Functional Scale (LEFS).

The national service launched in October 2017 with 366 participants to-date of similar age to the pilot but more knee replacement patients (57%). Similar improvements in function were observed—mean LEFS improvement of 28 (p<0.001)—greater than changes (16 points) in a similar cohort attending inpatient rehabilitation (Kennedy, 2006).

Patient satisfaction was high—Net Promoter Scores of 73 and 79 for the pilot and national-service.

Conclusion:
Home-rehabilitation achieved positive patient outcomes. Good program fidelity from pilot to national upscale was observed.

Take-home:
*Home-rehabilitation after joint replacement is evidence-based and can deliver significant functional improvements.
*It is often more convenient to patients compared to inpatient care.
*When clinically appropriate, physiotherapists should support patients to access home rehabilitation.
Complaints about physiotherapists – balancing public safety with the notifier/practitioner experience

Alison Bell1, Charles Flynn1
1Physiotherapy Board Of Australia, Melbourne, Australia

Concept Description:
Notification is the term applied to a complaint or a concern about a physiotherapist. The primary focus of the Physiotherapy Board of Australia (PhysioBA) and the Australian Health Practitioner Regulation Agency (AHPRA) when making decisions about notifications is public safety. This paper reveals indications for considering the notifier and practitioner experience, whilst maintaining public safety focus, and discusses approaches to optimising this experience.

Relevance to Themes:
Physiotherapy practitioners in both practice and leadership roles have various exposure to, and obligations in relation to the notifications process, through either lodging complaints or being the subject of them.

Background:
Complaints or concerns can be raised by health practitioners, patients, relatives, employers, health complaints entities and Boards. In 2016/17 eighty notifications were lodged about physiotherapists. In 2015 AHPRA commissioned KPMG to review how notifications are assessed and managed in Victoria. A series of recommendations were published in response to the review. Since November 2016 individuals who have made notifications have been asked to provide feedback about their experience. Perceived strengths of the process, as well as areas for improvement have been identified.

Conclusion:
Ways to improve the information provided to the public about how notifications are managed, and what to expect have been identified.
Strategies to support a better notifier experience are informed by data collected from notifiers.

Take home messages:
- Decisions about notifications focus on public safety.
- AHPRA and the PhysioBA are committed to optimising the notifier and practitioner experience of the notifications process, whilst maintaining patient safety focus.

Physiotherapist not counsellor: Quick and easy steps to address patient thinking barriers to treatment advice

Caroline Bills1
1Healthchange Associates, Port Melbourne, Australia, 2Own Body Mobile Physiotherapy, Melbourne, Australia

Background:
For physiotherapists to achieve the best results with their patients, they need to recognise that a person’s thoughts and feelings will influence their motivation and confidence to follow treatment recommendations in both acute and chronic settings. Our clinical practice needs to expand to include behaviour change skills and techniques without over-stepping professional boundaries and becoming a counsellor. Many physiotherapists
recognise when thinking and emotional barriers exist, however they may not know how to address them efficiently within their usual consultations.

Relevance to conference themes:
Usual physiotherapy practice needs to include fast and efficient behaviour change techniques to improve adherence to treatment recommendations.

Aims:
This session will show clinicians quick and easy steps to identify and address common thinking patterns that affect patients’ adherence to treatment recommendations.

Objectives:
• To understand how everyday thinking patterns and emotions impact on motivation, readiness and confidence to follow treatment recommendations.
• To be able to use a simple series of questions to identify these barriers.
• To know two techniques that can be used to address these common barriers when present.

Take home messages:
• Everyday thinking and emotional barriers explain why many physiotherapy patients don’t adhere to treatment recommendations.
• Physiotherapists need to expand their skill set to apply a person centred behaviour change approach to deal with these barriers.
• Behaviour change techniques can be used without “counselling” or overstepping professional boundaries.
• Conscious practice is required for clinicians to become confident in using these simple techniques in consultations.

Peer patient: Students’ abilities to portray patient roles in simulation based education

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1Department of Physiotherapy, School of Primary and Allied Health Care, Faculty of Medicine, Nursing and Health Sciences, Monash University, Frankston, Australia, 2Physiotherapy, School of Science and Health, Western Sydney University, Campbelltown, Australia

Concurrent 7C, Ballroom 3, October 7, 2018, 11:20 AM - 12:05 PM

Project:
An observational study of students’ abilities to portray simulated patient roles in Peer Patient, a new model of simulation based education (SBE).

Background/Methods:
Students enrolled in 2nd year of an entry-level physiotherapy program completed an 8-week SBE experience using peer simulation. Blended learning using the website Peer Patient (www.peerpatient.com.au) was augmented with preparatory activities, including structured rehearsal with feedback, to train students to accurately portray a simulated patient role. Portrayal abilities were rated using a study-designed 13-item tool adapted from the NESP and MaSP. Students’ portrayal was rated from poor (1) to excellent (5) on items examining accuracy and quality, and an overall rating (from zero to six). Ratings were completed by the “peer-therapist”, “peer-observer”, an academic, and student themselves (the “peer-patient”). Descriptive analyses were completed with medians and 25-75% inter-quartile range (IQR25-75). A one-way ANOVA was used to compare ratings; significance set at p<0.05.
Outcomes:
Thirty-nine students participated (68% of cohort, 149 ratings collected). The median overall portrayal rating was 5.0 (IQR25-75%=4.5-6). The median rating for all aspects of patient portrayal was 4 or 5. Academic and peer-patient rating (self-rating) were significantly lower than therapist or observer for quality and accuracy in portrayal of the physical characteristics. There was no significant difference between ratings for accuracy of patient communication portrayal.

Conclusion:
With preparation and training, students are able to accurately portray patient cases for SBE designed to teach physiotherapy skills. Further investigation into the impacts on learning of peer simulation is needed.

Engaged patients, digital health and mobile health apps: Driving change in healthcare
Tim Blake¹
¹Semantic Consulting, Australia

Engaged patients are demanding more from healthcare, and empowered by the technologies and techniques underpinning digital health, are driving an unprecedented amount of change and disruption of the sector. Hear more about the "Healthcare reformation", the key role that mobile devices and apps are playing in the democratisation of medical knowledge, and how physiotherapy can harness digital health to deliver more to patients.

Using Indigenous place and voice to guide physiotherapy students towards culturally safe practice
Shawana Andrews¹, Joanne Bolton²
¹School of Health Sciences, The University Of Melbourne, Carlton, Australia, ²Department of Physiotherapy, The University of Melbourne, Carlton, Australia

Project/concept description:
As the Australian Physiotherapy Association applies it’s Reconciliation Action Plan, ensuring physiotherapeutic practice is culturally safe is evident. To develop the applied knowledge and skills to be effective in Indigenous health, students need to be exposed to learning environments that foster critical thinking using Indigenous perspectives. This presentation explores one activity within the Doctor of Physiotherapy program at the University of Melbourne that engages Indigenous place and voice for physiotherapy students through a class visit to the Bunjilaka Gallery at Melbourne Museum.

Relevance to conference themes:
This presentation aligns with education.

Background:
The RAP’s vision of health equity with the physiotherapy profession driving advocacy and reconciliation requires physiotherapists to be critical thinkers who can inform culturally safe practice and challenge the systems that frame it. The Museum visit is one of a series of structured learning activities that offers an Indigenous space for students to explore themes of deep listening, resilience, country and community, white privilege and racism. Supported with teaching and learning activities, it intersects Indigenous health and physiotherapy practice.
Conclusion/Outcome:
The Museum activity takes students out of their comfort zone and safely enables them to build a professional and personal position in the context of Indigenous health.

Take home messages:
• Students benefit from exposure to an Indigenous learning space to develop critical thinking skills
• This approach develops self-reflection skills essential for culturally safe practice
• The accompanying learning activities enables students to engage Indigenous perspectives as a framework for applied clinical practice

Health Financing: What’s NEXT on the horizon?
Craig Bosworth
Concurrent 1A, Ballroom 1, October 5, 2018, 1:25 PM - 2:10 PM

Australia has one of the most efficient and equitable health systems in the world; within one of the most fragmented and frustrating ones. Commentators call for more funding while total health expenditure increases around 5% per year. The political landscape continues to shift, while reforms are underway in health, aged care and disability financing that will significantly change the landscape of service delivery.

This presentation discusses, within the current political and fiscal environment, the changing face of healthcare financing in Australia, and its likely impact on providers and consumers alike over the NEXT decade.

In particular, three areas will be highlighted:
• Government funding models: Exploring different allocative financing models, here in Australia and internationally, and what might be NEXT on the agenda?
• Private Health: With PHI membership falling, private hospital admissions dropping and consumers voting with their feet over out-of-pockets, what’s NEXT for private health financing?
• Financing our ageing needs: With a changing ageing demographic what will be the NEXT big approach to financing our retirement and our health needs?

Who is NEXT? Empowering Emerging Leaders within a multidisciplinary team in a public setting.
Sara Brentnall\textsuperscript{1}, Catherine Lucas\textsuperscript{1}
\textsuperscript{1}Austin Health, Heidelberg, Australia
Concurrent 1D, Harbour View Room 1, October 5, 2018, 1:25 PM - 2:10 PM

Background:
This Leadership program was designed to improve the capacity and communication within a multidisciplinary team, including various allied health disciplines, medical, and nursing clinicians and administrative staff. Within a workshop style, the program gives participants the space away from work pressures to explore what makes a good leader, and how they might begin to embed the skills required.
The program explores the themes of leadership, emotional intelligence, communication styles, and having difficult conversations. Participants are encouraged to reflect on learnings between modules, and set personal goals to reinforce skill acquisition. The facilitation of the program also enhances leadership with it's 'train the trainer' design.

Relevance to Conference Themes:
NEXT - who are our NEXT leaders? How can we empower them to think about what is NEXT for them in their leadership journey. Leadership and business - This program aims to improve all team members understanding of
leadership qualities, and how this relates to their own personal development and contribution regardless of seniority, role or position within the team.

Aims:
This session will outline the Emerging Leaders Program, in a way that will be easily transferred, and modified to any setting.

Activities, information and various models will be provided for personal and team use.

Take Home Messages:
1. Leadership is not a title, nor a position, but a way of relating to others.
2. Leadership qualities and skills are important for everyone to develop.
3. Improving leadership skills, improves team dynamics, satisfaction and patient care.

Innovative curriculum development
Tina Brock
Concurrent 1C, Ballroom 3, October 5, 2018, 1:25 PM - 2:10 PM

The Monash Faculty of Pharmacy and Pharmaceutical Sciences has recently implemented a new vertical integrated masters (VIM) course designed to graduate more practice-ready and team-ready pharmacists. Key features of this new course include new skills (problem solving/oral communication/written communication/empathy/reflective practice/integrity/teamwork/inquiry), new frameworks (reflection/feedback), new instructional models (discover/explore/apply/reflect), new threads (integrated/interprofessional/intercultural), new values (collaboration, global citizenship), and new technologies (ePortfolio, curricular mapping, e-assessment). This session will outline briefly these features and describe how we have applied principles of implementation science to support the academics and students through the complex change process. We will share what has worked, what has worked only after adaptation, and what has not worked despite best intentions.

Learning objectives: At the conclusion of this session, the active participant will be able to:
• Describe representative features of innovative health professions curricula
• Explain how principles from implementation science can support the complex change associated with a new curricular launch

Creative risk
Leigh Carmichael
Guest Presentation, Grand Ballroom, October 7, 2018, 9:30 AM - 10:30 AM

Out of box thinking doesn’t have to be an unattainable end goal. Embracing creative risk is about removing the barriers to creativity that are in place and working together to come up with new ideas and new ways of approaching challenges.
The simple fact is that the world is changing at an ever increasing rate. Technological advances are creating shifting paradigms in every industry across the globe, and it’s a trend which we need to stand up and take notice of. In this rapidly changing world, the only certainty is that what works today will not work tomorrow. Old business models won’t work, old leadership styles won’t be tolerated and slow moving industries and businesses will become extinct. The successful players will be the ones with the greatest agility, creativity and foresight.

Take home messages: You will:
- Understand the imperative to implement
- Move from change management to change leadership
- Learn how to disrupt your own work deliberately
- Explore frameworks for managing complexity
- Position you, your career and your business to succeed in the future

Using wearable technology to identify musculoskeletal injury risk in the workplace

Scott Coleman
Preventure Pty Ltd, Pyrmont, Australia

Concurrent 6A, Ballroom 1, October 6, 2018, 2:45 PM - 3:30 PM

Background:
A growing body of evidence is indicating that workplace injury prevention methods, including manual handling training and work task performance assessments, are not effective at reducing injury risk for workers who perform physically demanding work tasks. In order to effectively reduce workplace injury risk, we need to measure the physical demands of the work tasks, and measure the capacity of individual workers who complete these tasks.

Wearable technology, involving small sensors positioned on the worker, can enable the measurement of a worker’s movements whilst they are performing their work tasks throughout a shift. This information can then be used to identify injury risk, enabling informed decisions to be made to reduce these risks.

Relevance to conference themes:
Wearable technology is the future of injury risk identification, prevention and management. The information received from wearable technology in the workplace can help physiotherapists to create data-driven programs to deliver better results in reducing the incidence of injury.

Aims/objectives: Delegates will develop an understanding of;
- The wearable technology available
- The relevance of the data that is captured
- Methods to interpret the data
- Capacity to use technology to provide feedback to the workers

Take home messages: Wearable technology will allow Physiotherapists working in WHS to reduce injury risk by:
- Increasing their capacity to assess a larger number of workers in a shorter period of time.
- Providing a cost-effective and sustainable method of injury risk reduction and monitoring
- Supporting their subjective assessments with accurate and valid data
The global learning partnership: Health promotion and community engagement in an international and inter-professional partnership

Carolyn Cracknell\textsuperscript{1,2}, Gillian Webb\textsuperscript{1,2}, Jessica MacCubbin\textsuperscript{1,2}, Louisa Remedios\textsuperscript{1,2}

\textsuperscript{1}University Of Melbourne, Parkville, Australia, \textsuperscript{2}Universitas 21, Birmingham, United Kingdom

Concurrent 3C, Ballroom 3, October 5, 2018, 3:35 PM - 4:35 PM

Project/concept description:
The Global Learning Partnership (GLP) program is a global health placement initiative developed to promote the Sustainable Development Goals (SDG) through an inter-professional community placement in Nepal. This global project was run twice (2016 and 2018) to determine feasibility and sustainability, and to measure students’ achievement of learning outcomes related to SDGs, cultural competence, leadership and health promotion.

Relevance to conference themes:
Innovative inter-professional models of education are important for developing key physiotherapy competencies in complex settings.

Background:
The GLP was designed to build collaboration and knowledge exchange between universities in developed and developing countries. Health professional students (including physiotherapy, medical, dental and nursing students) from universities from a global consortium of research intensive universities joined physiotherapy, medical and dental students from Kathmandu University for a 4 week community placement in Nepal. Pre and post survey and qualitative data was collected to determine achievement of learning outcomes and quality of experience.

Conclusion/Outcome:
This inter-professional and international partnership model was found to be feasible and sustainable when managed by a part-time project officer who worked closely with staff and students from the host university. This program will be repeated in Nepal and trialed in Malawi in 2019.

Take home messages:
- Global learning partnerships should focus on benefits and learning for all members of the partnership.
- Knowledge exchange between visiting and host students and staff is key.
- International and inter-professional student placements are both feasible and desirable for building skills in health promotion in an authentically complex setting.

Physiotherapy business models and increasing the value of your business into a valuable and sellable commodity

John Davie\textsuperscript{1}

\textsuperscript{1}Professional Performance Specialists

Concurrent 2B, Ballroom 2, October 5, 2018, 2:15 PM - 3:00 PM

We’ll explore the various business models such as: sole traders, partnerships (equal and minority), stand-alone practices (of various sizes) as well as the benefits and negatives of being a minority shareholder in group practices (of various structures) and how to position yourself for exiting or succession planning.

There are a number of nuances when it comes to understanding how to maximise and realise the equity in your business as a sellable asset. There is also a lot of misconception as to how various valuations eventuate and whether your business is actually a sellable asset, or just a means to generate a salary.
This presentation is set to clarify these factors and will cover:
1. How to value your business based on its structure, without the emotional attachment
2. How to position your business for maximum asset realisation
3. What are the key features you should be focusing on to turn your business from a salary and lifestyle producing entity, into a valuable business asset with a desirable value
4. The market nuances which determine a high value business asset as compared to one which looks similar but has a much-reduced valuation
5. When, where and how to exit to ensure maximal equity realisation

For many practice owners their businesses are treated as a wage generator rather than as an asset of considerable value. This presentation is designed to help bring clarity to a subject were often the waters are muddied.

Practice management and the science of moving numbers

John Davie
Professional Performance Specialists

Support stream 3, Harbour View Room 1, October 6, 2018, 2:45 PM - 3:30 PM

Great practice managers understand the science moving numbers. Running a successful physiotherapy business requires practice managers who have a good understanding of which activities drive numbers that correspond to overall business performance.

It is a misconception that marketing activities that drive new sources of patients into your business is the most important activity for practice manager. There has to be a mix where quality control activities and marketing work synergistically, where the emphasis is on ensuring that those patients who enter your business are receiving an outstanding service through each step of their journey and determining the best game plan for your business based on your KPIs so that you can grow with predictability and confidence.

A good practice manager will know the metrics of the business through accurate KPIs (key performance indicators) and which activities, (skills or behaviours), need to be performance coached to ensure the ideal clinical outcomes and customer service expectations are being met or superseded. These KPIs should also tell you the balance of new marketing activities in which target markets should be focused on. Thus, proactively working your KPIs to make a change rather than looking at them as a historical event.

Profit and loss statements (P&L’s) are typically considered from a historical perspective, as to what occurred in the previous 12 months, with people often make reactionary decisions to improve and for the next year without understanding the interrelationship they have to KPIs and corresponding performance coaching the skills and behaviours. However, there is a much more proactive way of organising your business so that the activities at the clinician level positively influence the KPIs, which in turn positively influence the P&L’s with predictability and confidence.

This session will focus on:
- understanding the ideal metrics of your business (KPIs)
- how to positively influence your profit and loss statements based on proactively managing your KPIs
- performance coaching fundamentals
- the relationship between KPIs, clinical deliverables and business success.
The NEXT wave of healthcare funding reforms

Marcus Dripps
Corio Bay Health Group, Geelong, Australia

Concurrent 1A, Ballroom 1, October 5, 2018, 1:25 PM - 2:10 PM

Concept/Description:
As business operators, we often construct our services around 3 pillars; clinician preference, patient expectation and access to funding. Increasingly there is a need to maximise alignment between these. In order to plan for the health business of the future, we need to understand what is coming NEXT in the regulatory and funding space.

Relevance:
The practice of the future will need to be ready to adapt to, and anticipate changes in the external health landscape.

Background:
In any large scale review of funding and policy as it relates to the provision of services, all funders are looking for effective care, value for money and return on investment. In many countries around the world (including to a lesser degree in Australia) funders are turning to "bundled payments" or "outcomes based funding". In this session, we will discuss recent and upcoming reforms in medicare, Private Health Insurance and other compensations schemes (such as TAC and worksafe in Victoria). We will discuss possible steps that healthcare businesses should consider in order to be ready for what is NEXT.

Conclusion:
Many traditional models of business and service delivery are constructed based on available funding models. An understanding of likely future trends in funding will assist in future planning.

Take home:
- The external world is forever changing. Are you ready?
- If funding changes quickly, Are you ready?

Gate keeping the next generation of physiotherapists: Assessing adequate standard in clinical practice

Ruth Dunwoodie, Garry Kirwan, Nikki Milne, Michael Donovan, Carla Dyson, Julie Gauchwin, Andrea Miller, Tanya Palmer, Anne Hill

Concurrent 3C, Ballroom 3, October 5, 2018, 3:35 PM - 4:35 PM

Description:
Recognising and evaluating adequate performance of physiotherapy students in practice settings requires targeted training and calibration. A collaboration of Queensland Universities evaluated the outcomes of participating in a training program, supporting the standardised utilisation of the Assessment of Physiotherapy Practice (APP) instrument.
This collaborative approach, supporting consistency of assessment in practice is a novel initiative and the findings from this study will lead to improvements in gate keeping decisions.
Relevance:
The training program evaluated in this study enables physiotherapists undertaking supervision of students to build knowledge and understanding of the standards for physiotherapy practice and appropriate application of the APP through participating in a peer supported training program involving calibration of perceptions.

Background:
This study used a pre-post survey study design to evaluate perceived knowledge, skills and attributes of physiotherapists in utilising the APP prior to and following participation in a standardised training program. In addition, the program format was evaluated for relative contribution to participant outcomes.

Outcome:
Study results demonstrated a statistically significant increase in participants’ perceived knowledge, skills and attributes relevant to assessment of physiotherapy practice. Additionally, the training format assisted understanding of the APP, encouraged discussion about assessing student performance, enabled challenges in assessment to be addressed, helped to better understand assessment standards using video vignettes, and supported face to face training.

Take home messages:
2. Face to face training improves skill development and confidence.
3. A collaborative approach to training promotes consistency in application of assessment.

Is telehealth revolutionising or destroying the physiotherapy profession?
You decide...
Karen Finnin

1Online Physio, Patterson Lakes, Australia

Concurrent 6A, Ballroom 1, October 6, 2018, 2:45 PM - 3:30 PM

Background:
It’s time to talk about the elephant in the room.

Manual therapy is the skill that Physios have become best known for. So it is understandable that telehealth, a medium that removes physical touch altogether, has been met with some resistance from members of the Physiotherapy community.

Although the online consultation concept is not new, its acceptance in the greater health community has increased over the last 12 months. It’s high time, therefore, that we collectively decide whether to ‘swipe right’ or ‘swipe left’ for telehealth in Physiotherapy.

Relevance to ‘Practice’ theme:
According to the questions that telehealth Physiotherapist Karen Finnin often gets asked, the hesitation in embracing the concept appears to stem from a lack of knowledge of the ‘How to’ practice applications of taking a manual profession online.

So find out more about how telehealth really works, and then you can decide for yourself whether telehealth is revolutionizing or destroying the Physiotherapy profession.
Aims/objectives:
From ‘How do you do a Lachman’s online?’ to ‘How do you make sure the process is safe?’ Karen Finnin will shed light on the most common ‘How to’ sticking points on the concept that is taking our digits and turning them digital.

Take home messages:
- The take home messages are designed to be questions, rather than statements:
  - In Physiotherapy, what can we automate, while still providing a personalized service?
  - For in person consultations, what ancillary aspects of the consultation process can be taken online?
  - What can in person care learn from telehealth?

The future physiotherapy workforce – under or over supply?
James Fitzpatrick1
1Australian Physiotherapy Association, Melbourne, Australia
Concurrent 8C, Ballroom 3, October 7, 2018, 12:10 PM - 12:55 PM

Over the last 15 years, the physiotherapy workforce has doubled in size to 31,995 physiotherapists and growth of private practices to 6,600. With 21 physiotherapy schools and growing, there are now 8,800 students studying physiotherapy and the workforce projection will exceed 40,000 physiotherapists in less than 5 years.

Patient access to physiotherapy in rural and remote areas remains relatively unchanged as the workforce grows. Consumer competition in metropolitan areas is evident and 64% of the graduates commence practicing in private practice. In a world of growing globalisation, what impacts will globalisation have on the workforce size and nature?

University interest in physiotherapy courses remains very strong and ATAR’s remain in the high 90’s with high student interest. High profile, profitable courses such as physiotherapy are likely to produce higher numbers of graduates in the future and there is no capping on volume. Physiotherapists looking for work is almost unchanged in number since 2002 which suggests that workforce shortage still applies.

This session will explore issues, systems and processes of understanding the triggers for workforce shortages or oversupply. We will discuss workforce data collection and analysis and explore the challenges of open markets versus regulation to determine the size of the profession.

Enriching physiotherapy student education with interdisciplinary Aboriginal and Torres Strait Islander health curriculum
Alison Francis-Cracknell1
1Monash University, Frankston, Australia
Concurrent 4C, Ballroom 3, October 6, 2018, 1:05 PM - 1:50 PM

Project Description:
Australian and New Zealand Physiotherapy Practice Thresholds require clinicians to understand contributing factors regarding the health of Aboriginal and Torres Strait Islander peoples. The Australian Physiotherapy Association recently committed to their ‘Innovate’ Reconciliation Action Plan: to build capacity for a culturally capable Physiotherapy workforce. This project describes how these aspirations are being addressed in Physiotherapy student education.
Relevance to Conference Theme:
This presentation outlines how recent innovation in Physiotherapy curriculum is creating new ways of addressing these requirements.

Background:
In 2014 the Department of Health released a National Aboriginal and Torres Strait Islander Health Curriculum Framework enabling student education to be scaffolded through novice, intermediate and entry-to-practice level curriculum. Monash University has taken an interdisciplinary approach to implementing this curriculum in health disciplines, enabling collaborative capacity building, resource development and coordinated learning and teaching across disciplines. Physiotherapists do not need to be working in remote Australia for these skills and understandings to be required in practice.

Conclusion/Outcome:
University education is now emphasising inclusion of culturally capable practice when working with Aboriginal and Torres Strait Islander peoples.

Take Home messages:
• A culturally capable physiotherapy workforce is required
• Physiotherapists do not need to be working in remote Australia for these skills to be required in practice.
• Universities can now address this in their learning and teaching via the National Aboriginal and Torres Strait Islander Health Curriculum Framework
• Interdisciplinary learning creates shared resources and enhances capacity in patient centred care of Aboriginal and Torres Strait Islander peoples

An argument for competency-based training in pelvic floor physiotherapy practice
Helena Frawley1,2, Patricia Neumann3, Clare Delany4
1Monash University, Frankston, Australia, 2Cabrini Health, Malvern, Australia, 3University of South Australia, Adelaide, Australia, 4The University of Melbourne, Melbourne, Australia

Concurrent 7C, Ballroom 3, October 7, 2018, 11:20 AM - 12:05 PM

Concept description:
We propose the first competency-based framework for educators and clinicians in the field of pelvic floor physiotherapy practice.

Relevance to conference themes:
This framework is a model which we argue is required for safe, effective practice.

Background:
Pelvic floor physiotherapy provides conservative management of pelvic floor disorders such as incontinence, pelvic organ prolapse and pelvic pain. While many of the interventions provided are underpinned by a strong evidence base, a competency framework to guide and inform pelvic floor physiotherapy training and practice is lacking. The management of the pelvic floor complex is not addressed as a core component of entry-to-practice physiotherapy programs, despite being within the scope of physiotherapy practice. This results in a registration-competency gap in this area. We highlight specific aspects of knowledge, skills, clinical reasoning, mentoring and development of professional communication that physiotherapists require to manage pelvic floor disorders. Awareness and understanding of potential ethical and legal issues, infection control and sensitivity to the pelvic floor as an intimate body part are unique and critical requirements to this area of practice.
Conclusion:
The domains of knowledge, skills, clinical reasoning and communication skills and how they are assessed are essential to the achievement of competence in pelvic floor physiotherapy practice.

Take home messages:
We propose a framework for the future which defines these so that clinicians may achieve this standard of practice. We hope this framework will provide clarity to clinicians about their clinical, ethical and legal obligations to the public, our referrers and third-party payers.

How great patient experiences lead to healthier physiotherapy businesses
Daniel Gibbs¹,²
¹Clinic Mastery, Kent Town, Australia, ²Posture Podiatry, Kent Town, Australia
Concurrent 3D, Harbour View Room 1, October 5, 2018, 3:35 PM - 4:35 PM

Background:
Physiotherapists understand that helping people and also being successful in business is a challenging dynamic.

Relevance to conference themes:
Business insights - Successful physiotherapy businesses need good systems, a team working together for a common purpose, and clients raving about their outcomes.

Aims/objectives:
This presentation outlines the specific areas of business that benefit when attention is directed towards creating great patient experiences.

Take home messages:
• How great client experiences lead to better health outcomes
• The essential numbers to know and monitor in physiotherapy practices
• 5 systems to improve patient outcomes and automate business growth
• What other clinics are doing to transform their client experiences

Admin mastery: The value of a good reception and support team in a physiotherapy business
Daniel Gibbs¹
¹Clinic Mastery, Kent Town, Australia, ²Posture Podiatry, Kent Town, Australia
Support stream 2, Harbour View Room 1, October 6, 2018, 1:55 PM - 2:40 PM

A receptionist’s role in the success of the business is at least as important as the practitioner - if not, more! After all, it’s much easier to create better health outcomes when clients actually show up for their appointments and have a flawless welcoming experience. In this practical session we will discuss the key areas:

• Where a receptionist can make a big difference to the overall success of the business, and how to implement good systems that make life easier at the reception desk.
• The real value a receptionist can bring to the overall success of the practice.
• How the administration and support team can help to deliver quality health outcomes.
• How to increase productivity and efficiency with good systems that work.
• Understanding the valuable role the administration team have within the framework of patient care.
There’s an App for that - Apps and technology for physiotherapy businesses

Daniel Gibbs¹²
¹Clinic Mastery, Kent Town, Australia, ²Posture Podiatry, Kent Town, Australia

Concurrent 7A, Ballroom 1, October 7, 2018, 11:20 AM - 12:05 PM

Background:
Physiotherapy practices need to embrace technology to improve delivery of patient care and to achieve the best outcomes.

Relevance to conference themes:
Technology and the future of practice - Busy practitioners often don’t have time to consider all the options for technology available to them and implement new things with their team.

Aims/objectives:
This talk presents the most important apps to use right now, saving time and improving patient outcomes.

Take home messages:
- Systems to reduce reliance on the business owner or main practitioner
- Basic and advanced apps to improve patient care and quality of service
- 3 ways to improve culture, collaboration and communication between team members
- Why embracing technology is essential over the next 5 years.

Digital disruption - balancing increased patient access with regulating to manage risk

Kim Gibson¹, Janet Jenny Blake¹, Jill Humphreys¹
¹Physiotherapy Board Of Australia, , Australia

Concurrent 7A, Ballroom 1, October 7, 2018, 11:20 AM - 12:05 PM

Concept Description:
For physiotherapy, digital disruption means that services can be delivered online with no face to face contact between patient and practitioner. This paper explores how increased patient access might need to be balanced against possible increase in risk of harm through poor, unsafe practice and unprofessional behaviours, particularly when practice occurs across jurisdictional boundaries.

Relevance to Themes:
Business leaders and practitioners alike, consider new models of care and reflect on both national and international competition, opportunities, workforce impact and regulation.

Background:
The uptake of information from, and interaction with, the internet is now the norm such that we simply cannot ignore it or hope it will go away. As patients, particularly millennials, increasingly seek healthcare online from anywhere in the world the challenges of ensuring the Australian public is protected from the unscrupulous, the unqualified and the uncaring, portraying themselves as registered practitioners, becomes more challenging.

Conclusion:
Current and emerging technologies present wonderful opportunities to link isolated individuals and communities to healthcare, however as the market drives patient and practitioner behaviour change, we need
to be sure patients remain safe. Global initiatives such as the International Network of Physiotherapy Regulatory Authorities and the World Health Organisation Collaborative Centre for Health Professional Regulation in the Western Pacific offer collaborative mechanisms to benefit patients and mitigate risk.

Take home messages:
- Physiotherapy is increasingly delivered online.
- Patient-practitioner relationships may occur beyond jurisdictional borders.
- Regulation must support flexible workforce access and ensure public protection.
- Global partnerships can benefit patients and mitigate risk.

How to fix Workers Compensation; a cure for a broken system, a NSWPF initiative

Connor Gleadhill¹
¹Nsw Police, Warners Bay, Australia

Concurrent 2D, Harbour View Room 1, October 5, 2018, 2:15 PM - 3:00 PM

Background:
This ‘how to’ session is designed for practitioners who deal with patients under the Workers Compensation System. Assumed knowledge is that of SIRA regulation, not of any inner workings of NSW Police Force. Confidential or sensitive information belonging to NSW Police Force will not be discussed.

Relevance to conference themes:
This presentation will present very novel ideas and concepts and will lead clinicians and business owners into considering a different model of care, designed to confront current failings associated with managing patients in the Workers Compensation System. This presentation is best aligned with ‘practice’, as it deals with the application of concepts and a model to incorporate into practice to enable superior outcomes.

Aims/objectives:
The outcome of the presentation is to give insight to a model of care, which enables superior outcomes in complex patients under the Workers Compensation System. The attendee will be able to effectively apply simple concepts in a novel fashion to really change the way the ever day ‘Workers Comp’ patient is dealt with.

Take home messages:
- Planning makes perfection in the Workers Compensation world and when your patients know you are well prepared, the buy-in is greater.
- How to work synergistically with your Exercise Physiologist, and why Strength and Conditioning isn’t just for elite sports teams.
- Being truly patient-centred sometimes means being the bad guy; how to be the leader of the team.
- Workcover is a ‘Cash Cow’, but by doing simple things well, we can change a ‘rigged game’.

What is the future brand of physiotherapy?

Steve Gosbell¹
¹Australian Physiotherapy Association, Melbourne, Australia

Concurrent 8A, Ballroom 1, October 7, 2018, 12:10 PM - 12:55 PM

The origins of the APA can be traced back a hundred years. Over that time, physiotherapy has evolved enormously, as has what it represents to people. In this session we will seek to identify the attributes that make our brand and how they may be influenced by factors both within and outside of our direct control.
What value do we need to reflect to different cohorts? If we claim particular attributes, whether to consumers, politicians, health professionals, are they consistently affirmed by the reality of their contact with physiotherapy?

Playing ‘futurist’, what is on the horizon for physiotherapy; might the essence of the profession change and might we need to occupy a different place in peoples’ minds?

What should we prioritise in preparing for our brand of tomorrow?

**Delivering a successful private practice research program - evolving insights**

*Anthea Goslin¹, John Fitzgerald¹, Joanne Bullock-Saxton¹*

¹Active Rehabilitation Physiotherapy, Brisbane, Australia

Concurrent 4B, Ballroom 2, October 6, 2018, 1:05 PM - 1:50 PM

**Concept Description:**
Having established a unique and innovative research program within a private practice five years ago, Active have gained several key insights into how to realise benefits and avoid pitfalls when embarking on a new research program in the private setting.

**Relevant Theme:**
PRACTICE, BUSINESS and EDUCATION – Leveraging a research program to drive business outcomes, whilst providing research capacity building for your team.

**Background:**
Private physiotherapy practices have traditionally been reluctant to take on research activities due to a perceived lack of research capacity and fear of cost-blowouts. Two years since reporting on the inception of our program, we would like to share what we have identified as the key factors for ensuring success.

**Conclusion:**
Driving a successful research program requires a different skillset to the day-to-day management of a busy private practice. Careful strategic planning, thoughtful recruitment, targeted collaborations and the rigorous pursuit of external funding have all been drivers for success. Foundational business processes such as a high quality mentoring program and project management frameworks are also indispensable factors. Managing stakeholder expectations, avoiding over-reach in portfolio size and careful cost containment strategies are essential for managing risk.

**Take Home Messages:**
- Private physiotherapy businesses are ideally poised to bridge the research ‘translation gap’.
- With careful planning, a private practice research program can lead to positive outcomes for both the business and the physiotherapy profession as a whole.
- Several key pathways to our success have emerged and are worthy of consideration.
Social media for millennials: Current policy education in entry-to-practice physiotherapy programs

Alex Hansford-Smith1, Zoe Calulo Rivera1, Louisa Remedios1
1University Of Melbourne, Melbourne, Australia

Concurrent 6C, Ballroom 3, October 6, 2018, 2:45 PM - 3:30 PM

Project/concept description:
The healthcare industry is currently undergoing a shift towards the use of social media (SoMe) for patient care and education. Channels such as Facebook, Twitter, LinkedIn and Instagram are being used, with research reporting benefits that include facilitation of learning, research and professional networking. However use of SoMe for both professional and socialization purposes carries an associated risk of ethical violations. There is a clear need to educate students on appropriate SoMe policies prior to graduation.

Relevance to conference themes:
Social media policy and the methods by which they are taught in entry-to-practice programs are relevant to improving education, business and practice.

Background:
Social Media use is expanding in physiotherapy practice and carries a risk of unprofessional behaviour, putting both patients and physiotherapists at risk. This presentation will cover an initial scoping review of information on SoMe policy education gathered from 11 physiotherapy program providers. The findings clarify the current teaching of SoMe policy in entry-to-practice programs, provides examples of good practice, and identifies areas for further consideration.

Conclusion/Outcome:
Currently, presentation of SoMe policies to students across 11 physiotherapy programs is inconsistent in both content and delivery. Further research into best practice in SoMe education is required.

Take home messages:
1. Ethical use of social media is critical to practice and to adherence to the AHPRA professional code of conduct
2. Students are not consistently exposed to policy on professional use of social media.
3. Effective and engaging education on professional use of social media is key.

Leading physios to lead

Siona Hardy1, John Fitzgerald1
1Active Rehabilitation Physiotherapy, South Brisbane, Australia

Concurrent 3A, Ballroom 1, October 5, 2018, 3:35 PM - 4:35 PM

Concept Description:
Rising pressure to achieve better health outcomes, with increasingly limited resources, has created an acute need for more healthcare leaders. Studies have shown that healthcare professionals want to be led by other healthcare professionals. Physiotherapists are well placed to be successful healthcare leaders, yet most aren’t taught leadership skills at university and receive little on-the-job training to develop these skills. How do we address this leadership deficit?

Relevant Theme:
BUSINESS and EDUCATION – cultivating, developing and teaching leadership
Background:
The model of elevating senior clinicians to management roles is fraught with problems. Creating a well-designed leadership pipeline that supports physiotherapists to emerge as effective leaders is essential. Active have established a pipeline, which moves physios through five levels of leadership, allowing them to take on extra responsibility and gain the skills necessary for succeeding at each level. The mix of strategic, business, stakeholder and clinical skills required to lead at each level is different.

Conclusion:
The leadership pipeline model consists of talent identification and strategic development at key stages throughout their leadership career. In addition to improved clinical efficiency and effectiveness, other key benefits are improved organisational morale, increased team engagement, lower turnover and a greater ability to attract new business.

Take Home Messages:
• Early talent identification, coupled with strategic coaching via a structured leadership pipeline, can reap enormous benefits for the organisation and the individual.
• The pipeline leadership process can be an incubator for the development of industry leaders.

Micro-ambition to combat SMAT goals
Siona Hardy1, John Fitzgerald1
1Active Rehabilitation Physiotherapy, South Brisbane, Australia

Concept Description:
Never has the physiotherapy profession been faced with such a simultaneously spectacular, yet challenging circumstance - the inundation of highly intelligent, extremely dedicated and outstandingly talented graduates into the profession. How can we engage them all in positive and fulfilling working environments? How can we as a professional body support and foster our up-and-coming colleagues?

Relevant Theme: BUSINESS: leadership within a physiotherapy business

Background:
Having recruited a number of young physiotherapists over the past decade, we have noted the rise of career SMAT goals (Smart, Measurable, Achievable and Timely but not Realistic). We believe this is evidence of the exceptional cohort of physiotherapists who dream big and graduate with concrete long-term goals, such as working as a graduate with professional sports teams, becoming a senior physiotherapist within 3 years and opening their own practice by age 22. Goals are essential, but are such lofty aspirations helping to aspire or disappoint?

Conclusion:
In an effort to concurrently motivate, polish and prepare, we suggest focusing on micro-ambitions, advocating for the passionate pursuit of peripheral short-term goals. Not only does this provide opportunity for challenge and fulfilment, but along the way physiotherapists gather adjunct skills, making their long-term goals more realistic and achievable.

Take Home Messages:
• The outstanding quality of our physiotherapy graduates is both a blessing and a challenge for the profession.
• SMAT goals are a common phenomenon in Australian physiotherapists.
Encouraging a culture of micro-ambition is a way of simultaneously challenging and up-skilling your team.

Preventing harm before it happens - using data to inform risk-based regulation of physiotherapists

Cherie Hearn¹, Charles Flynn¹, Jill Humphreys²
¹Physiotherapy Board Of Australia, Melbourne, Australia, ²Australian Health Practitioner Regulation Agency, Melbourne, Australia

Concurrent 1B, Ballroom 2, October 5, 2018, 1:25 PM - 2:10 PM

Concept Description:
This presentation describes the Board’s recent work to analyse physiotherapy-specific complaints data to detect hotspots of risk. It will also highlight the opportunities to regulate physiotherapists more constructively and helpfully to better recognise and prevent harm before it happens.

Themes:
Practice and Business

Background:
The National Regulation and Accreditation Scheme (NRAS) has as its highest priority, the protection of the public from harm. The Physiotherapy Board of Australia (PhysioBA) is one of 15 health professions regulated in Australia. The PhysioBA is a risk based regulator and has an opportunity under the national law to collect comprehensive national complaints data about physiotherapists.

Conclusion:
The data collected so far indicates that physiotherapy makes up 1% of the total complaints received, significantly fewer complaints per registrant than other professions in the scheme.

Whilst the deep dive into physiotherapy complaints data showed an absence of hot spots of risk to date, it showed similar trends in risk profiling as other professions. Cross professional data analysis can be beneficially applied to the physiotherapy profession for prevention of public harm and to identify practitioners who are at higher risk of being the subject of a complaint.

Take home messages:
- Physiotherapy has a low incidence of complaints.
- Regulatory data collected by the NRAS can be used to improve the regulation of Australian physiotherapists.
- This data can be used to inform physiotherapists and influence practice to minimise harm to the public.

Leading the future workforce

Avril Henry

Keynote 5, Grand Ballroom, October 7, 2018, 2:00 PM - 3:00 PM

In the year 2050... rapidly ageing populations and workforces in educated societies over the next three decades, global skills shortages and population growth confined to the 50 poorest countries in the world will create new and complex problems in society and business. Will you be prepared?
Technology, science, medicine, agriculture, mining, and the way we live and work will have changed radically and nothing will be as it was. Business models, strategic workforce planning and leadership styles will need to adapt now to ensure sustainable, corporate socially responsible and profitable businesses in the future.

'Bounce Back' clinic: A primary care multidisciplinary one stop clinic for frailty.

Amanda Hensman-crook
Primary Care, Kendal, United Kingdom

Concurrent 2D, Harbour View Room 1, October 5, 2018, 2:15 PM - 3:00 PM

Project/concept description:
'Bounce Back' is a rotational one stop clinic lasting an hour in primary care, and reviewed at 12 weeks. It is physiotherapy led and has a nurse, pharmacist and Age UK. It is the first MDT primary care frailty service in the UK.

Relevance to conference themes:
‘Practice’: Addressing frailty is embedded in our core capabilities as is case management. Combining our knowledge with the MDT enhances care.
‘Business’: Leadership and management skills are required to coordinate and monitor a reproducible service.
‘Education’: for the patient, an MDT approach to preventative care, to the wider health system, shows how integrated care works to solve problems.

Background:
With an increasing aging population, more pressure is being put on healthcare services, particularly acute and social care with a rising number of unplanned admissions to hospital. To help upstream to reduce these numbers, a multidisciplinary team was set up in primary care to capture mild and moderately frail patients to provide a holistic approach to preventative care and case management.

Conclusion/Outcome: Early data shows:
- Patient satisfaction scores 98% excellent & 2% very good
- Confbual scores show improvement in 100% of reviewed cases
- Edmonton scale shows improvement in 90% of reviewed cases with average 1 point increase and 40% moving into a higher category
- 52 medicines reduced or stopped and 27 of these potentially linked to falls

Take home messages:
- MDT care works
- Physiotherapy provides upstream solutions
- Patients like wrap around care close to home

First contact physiotherapist in primary care; the art of possible

Amanda Hensman-crook
Primary Care, Windermere and Ambleside, United Kingdom

Concurrent 6B, Ballroom 2, October 6, 2018, 2:45 PM - 3:30 PM

Background:
Advanced First contact physiotherapy in primary care (FCPP) is a new role in the UK that has been mandated by NHS England for a national role out. This session explores the art of possible. How to change an idea into established innovation.
Relevance to conference themes: It shows how to develop, encourage, lead and break new ground in physiotherapy through the Business theme, but has relevance to all three:

- **Practice:** from an idea to streamline MSK physiotherapy to address a GP shortage, secondary care capacity, unnecessary investigations, management of LTCs/ frailty, prescribing costs and an inefficient care pathway.
- **Business:** Developing management, leadership and mentorship skills and developing governance, education, sustainability and data capture to support a safe reproducible service.
- **Education:** creating FCPP pilots, auditing and researching outcome data to support development of the role. Creating student capacity for future sustainability and developing post graduate modules to enable upskilling into the posts. Educating patients and the multi-disciplinary team of a new way of working.

**Aims/Objectives:**
- To demonstrate the art of possible; how anyone with an idea can lead change
- The importance of communication and networking
- How to embrace data and use it to achieve an objective
- How to create a robust background to support governance, reproducibility and sustainability of an idea.

**Take home messages:**
- Believe in the art of possible
- Anybody can be a leader
- Communication communication communication
- Data matters
- Empower others to embrace and lead change

**The role of clinical placements in Indigenous health**

**Nami Hirano**

1Institute for Urban Indigenous Health, Windsor, Australia

Concurrent 4C, Ballroom 3, October 6, 2018, 1:05 PM - 1:50 PM

**Aims/objectives:**
This presentation will describe the clinical placements offered to physiotherapy students by the Institute for Urban Indigenous Health and describe students’ experiences regarding the strengths and challenges of these clinical placements.

**Relevance to conference themes:**
The presentation relates to the theme of education, demonstrating the benefit of clinical placements specific to the area of Indigenous health on culturally competent care.

**Background:**
Student placement experiences are an important opportunity for physiotherapists to learn the clinical skills they need in a context where their cultural awareness and knowledge can also be developed. Placements specific to Indigenous health have the potential to provide an invaluable learning experience for students due to the nature of the professional and clinical skills they can learn in this environment and the knowledge and awareness they can gain. However, there are several important considerations and limitations for these placements. Students need to be well prepared and supported both clinically and professionally, with a well-designed placement and explicit expectations. Additionally, the health services need to be consulted regarding models of clinical placements which are appropriate and do not overload staff.
Take home messages:

• Clinical placements offered specifically for Indigenous health have the potential to improve culturally sensitive practice through experience gained prior to graduation
• Considerations need to be made regarding level of support, design and expectations
• Health services need to be considered when organising clinical placements

My Life: a digital platform and wearable technology to deliver a heart disease rehabilitation program.

Louis Island

1My Life Health Services, Melbourne, Australia

Concurrent 5A, Ballroom 1, October 6, 2018, 1:55 PM - 2:40 PM

Everyday 150 Australians are admitted to hospital after a heart attack. Following this event, an individual should complete a cardiac rehabilitation program to reduce their risk of a secondary event. However, only 30% of eligible patients complete the program due to poor access, variable content and a lack of referrals.

'My Life' is an accessible and engaging digital behaviour change program developed to improve the health outcomes of people living with heart disease. Our objective is to increase the number of patients completing cardiac rehabilitation by removing the barriers of a centre based program. 'My Life' achieves this by digitization of the rehabilitation experience. We use game design and social networks to create a supportive environment for sustainable behaviour change. In fact by using a social platform, mobile health and wearable technology, 'My Life' is developing a model of care that promotes continuous service improvement and captures population health data to predict patient behaviour and outcomes.

A growing body of international research has demonstrated the effectiveness of digital health programs in this patient population with similar or improved outcomes to the traditional face to face approach. In partnership with La Trobe University and University of Otago, 'My Life' is completing concurrent feasibility studies in Adelaide and Canterbury in 2018. Our platform will collect standardised outcome measures, daily health and activity behaviours, and consumer engagement metrics to provide future evaluation. This research forms a new model of care compared to the traditional face-to-face outpatient rehabilitation service in Australia.

The ‘Spinal Log’: Providing enhanced feedback on spinal passive accessory assessment and mobilisation.

David Kelly, Antony Chacon, Thuong Hoang, Eduardo Velloso, Frank Vetere, Louisa Remedios

1Melbourne School of Health Sciences, The University of Melbourne, Carlton, Australia, 2Microsoft SocialNUI, The University of Melbourne, Carlton, Australia, 3School of Information Technology, Deakin University, Burwood, Australia

Concurrent 7C, Ballroom 3, October 7, 2018, 11:20 AM - 12:05 PM

Project/concept description:
The ‘Spinal Log’ is a tangible spinal mobilisation simulator that draws on foam-based force sensing technology to provide immediate haptic and visual feedback on force exerted, displacement, orientation and rhythm when practicing spinal mobilisation. The ‘Spinal Log’ produces authentic compliance sensations for students, improving on currently available force sensor feedback models.

Relevance to conference themes:
The ‘Spinal Log’ is designed to improve psychomotor skills in spinal joint mobilising, an essential skill in physiotherapy education. This model can also be used for skills training in professional development.
Background:
The ‘Spinal Log’ was developed in a collaboration between engineers from the SocialNUI research centre and physiotherapists, using engineering design to meet physiotherapy teaching needs. Students can use the system to determine their tactile experience of resistance in conjunction with the degree of mobility of the simulation spine via provision of objective and passive haptic feedback.

Conclusion/outcome:
Students and graduates can benefit from feedback available from 'Spinal Log' which enables variable compliance to closely mimic a real patient situation. Students viewed the ‘Spinal Log’ favourably as a tool to assist learning spinal mobilisation. Further research using different practitioners with larger student numbers is recommended.

Take home messages:
- Students need authentic sensory simulation models of the spine to practice joint assessment and mobilising techniques
- Haptic models can provide students with immediate objective feedback to build their psychomotor skills
- Physiotherapy collaborations with engineers can lead to technological innovations that can accelerate student learning

Student fitness to practise self-declaration - an innovative approach
Kristin Lo1, Heather Curtis2, Margaret Bearman3, Alison Francis-Cracknell1, Wendy Nickson1, Stephen Maloney1, Jenny Keating1

1Monash University, Frankston, Australia, 2Caulfield Hospital, Caulfield, Australia, 3Deakin University, ,

Concurrent 6C, Ballroom 3, October 6, 2018, 2:45 PM - 3:30 PM

Project/concept description:
Educators need to teach students how to support their own fitness to practise (FTP). We showcase an innovative approach to supporting student FTP – a FTP self-declaration. This is the first paper to report a comprehensive approach to supporting a range of FTP issues through student self-declaration.

Relevance to conference themes: This research breaks new ground in physiotherapy education.

Background:
This presents the findings of two recently published articles (Lo et al. 2017 a, b). Between November 2012 and January 2013 an online survey was emailed to physiotherapy clinical educators from 34 sites across eight health services in Australia.

Conclusion/outcome:
61% of the 79 respondents reported supervising ≥ 1 students with FTP issues. Observed FTP concerns were clinical competence (76%), mental health (51%), professional behaviour (47%) and physical health (36%). Clinicians considered 52% of these issues avoidable through early disclosure. Clinicians were confident and comfortable supporting all FTP issues except mental health issues. Students with FTP issues affect work satisfaction as reported by 83% of clinicians and may affect service delivery. The benefits of a student-centred FTP approach included clarity and consistency in supporting FTP. The policy and program of education and support may be generalisable to all physiotherapy programs.

Take home messages:
- A FTP self-declaration is a valuable support for student FTP and facilitates student awareness through active engagement in maintaining their FTP.
- Strategies to support student FTP can positively impact on students, clinicians and clients.
- Universities are strategically placed to implement student and educator support.
Student fitness to practise – strategies from the coalface

Kristin Lo1, Alison Francis-Cracknell1, Ruben Hopmans1, Stephen Maloney1

1Monash University, Sandhurst, Australia

Project/concept description:
Fitness to practise (FTP) is topical in health education. This presentation describes innovative views on FTP from student, educator and academics’ perspectives.

Relevance to conference themes:
This research breaks new ground in physiotherapy education.

Background:
This presentation summarises current works in this field, focused on two recently published articles (Lo et al. 2017 & 2018). The first summarises quantitative and qualitative data on the benefits of a new online FTP module from the perspective of 68 physiotherapy students. The second is the responses generated from a PeArL session from a previous APA conference about FTP. It also includes Australian and New Zealand academics’ views on FTP policies. We wish to disseminate the findings of this research to all physiotherapy educators.

Conclusion/outcome:
Curricula containing FTP can increase student ability to identify support systems and increases their likelihood to seek help for FTP issues. Clinical educators have a preference for feed-forward mechanisms to support student learning. Educators value faculty staff as important supports particularly when supervising students with mental health concerns. The importance of teamwork and regular breaks from clinical education were discussed. Clinical education managers discussed the inherent requirements of physiotherapy courses including strategies to flag and support students with FTP issues. Strategies to support clinical educators when supervising students with FTP issues were described.

Take home messages:
- Students benefit from online education about fitness to practise
- Clinical educators benefit from feed forward mechanisms to support student FTP issues
- Academics are well placed to support physiotherapy educators.

Innovating upstream - engaging older adults in the development of exercise tools for PREhabilitation

Meg Lowry1

1Next Step Physio, Greater Brisbane, Australia

Project description:
Community fall prevention initiatives are reactive in nature, focussing downstream on people who’ve already fallen and often fractured. This project attempted a truly proactive approach by engaging older adults in the development of enjoyable exercise tools that address fall risk factors (reaction time, balance & lower limb strength).

Relevance to conference themes:
This presentation offers insights transferrable to others contemplating innovation projects.
Background:
Adults aged 45-93 attending exercise classes for healthy ageing were introduced to various evidence-based exercise ideas. The most enjoyable exercises were translated into scaleable exercise tools for independent practise. Focus groups were recruited from within the classes to further refine the tools.

Outcome:
There was common enthusiasm for exercises involving ‘brain games’. The focus groups requested a low-tech and no-tech option for every exercise tool.

Three novel exercise tools were developed;
• An exergame app involving multi-directional stepping and dual tasking with adjustable speed. (Clock Yourself)
• A printed guidebook with a sequence of balance exercises for self-progression at the kitchen sink. (Balance Yourself)
• An app that embeds brain games into sit-to-stand exercises. (Sit-Stand-Think)

Proof of concept has been established with 3000 downloads of Clock Yourself in 12 months, and it has been unexpectedly embraced as a reaction time tool by sports physios.

Take home messages:
• Exercise for brain health is a powerful motivator for older adults.
• Prepare for your creations to be repurposed by others and just roll with it.
• Build it well and the research interest will follow.

Does culture really matter?
Cris Massis

Support stream 1, Harbour View Room 1, October 6, 2018, 1:05 PM - 1:50 PM

The term ‘culture’ is often used alongside high performing organisations.

In today’s workplaces, does culture really matter?

Cris will share his observations on ‘culture’ in physiotherapy and highlight how organisations continuously refine and develop their ‘culture’ to align with the current environment.

The global physio practice has arrived
Melissa McConaghy

Concurrent 5B, Ballroom 2, October 6, 2018, 1:55 PM - 2:40 PM

Project/concept description:
Digital technology enables the physiotherapy practice of today to become the global physiotherapy practice of the future - inspiring leadership, influence and significant change to the delivery of clinical services.
Relevance to conference themes:
NEXT is about progress and breaking new ground, and it is digital technology that will provide the platform to leverage clinical service and define the global physiotherapy practices of the future.

Background:
The delivery of physiotherapy services hasn’t changed much in 50 years. It remains localised, restricted by the traditional work week and limited in influence. Digital technology such as apps, software, internet and e-commerce are the single biggest opportunity available for physiotherapy practices today that want to scale up. PD Warrior will be presented as a case study demonstrating how this technology has allowed the practice to build a global brand by; creating an engaged community of patients, peers and potential hires with real-time feedback, facilitating online learning and course development that generates passive income streams and enabling a thriving business to operate remotely, through virtual locations and 24:7.

Conclusion:
Digital technology will continue to shape the physiotherapy profession profoundly in the coming years. Progressive practices will adopt new ways of engaging, educating and expanding their scope of delivery to become the global physio practices of the future.

Take home messages:
- Technology offers the capacity to grow your practice on a global scale.
- Technology provides opportunities to educate on a global scale
- Technology enables global influence, branding and scale.

Vexing or vexatious – when complaints are vexing and not vexatious

Catherine Miedecke¹
²AHPRA, Hobart, Australia

Concurrent 1B, Ballroom 2, October 5, 2018, 1:25 PM - 2:10 PM

The presentation will explore the meaning of the term vexatious as it relates to complaints about registered health practitioners in Australia, possible ways you may identify and manage the vexatious and the vexing, and what the Australian Health Practitioner Regulation Agency (AHPRA), as a regulator, can do about it.

To support its commitment to the Senate Affairs Committee Inquiry into the medical complaints process in Australia, AHPRA commissioned independent research from the School of Population and Global Health at the University of Melbourne. The research attempted to investigate the size of the problem of vexatious complaints and consider how they can be better prevented, identified and managed. The review found that the number of vexatious complaints dealt with in Australia, and internationally, is actually very small, making up less than one per cent of all complaints.

There is a difference between complaints which are vexing, and those which are genuinely vexatious. The review found that, in general, the term ‘vexatious’ is inappropriately applied to complaints based on the unpleasant experience of the person who is subjected to the event (an ‘experiential’ definition), even when there may still be a genuine risk to the public. A truly vexatious complaint is groundless, and based on the motivation of the complainant to cause harm or distress to the subject of the complaint (a ‘motivational definition’).

There is also a difference between vexatious complaints and other types of sub-optimal complaints. This can mean that a complaint does not result in substantive regulatory action. This lack of regulatory action does not mean that the complaint should be categorised as vexatious. There are a number of categories of sub-optimal complaints and they may fit into several categories or none at all. Some examples can include:
• sub-threshold, which are truthful and made in good faith, but do not meet the threshold for regulatory action,
• misdirected, which are not lodged with the most appropriate entity, and
• misconceived, where the complainant misunderstands what is an acceptable standard of performance or conduct.

The review highlighted nine key principles that organisations should implement to prevent and manage vexatious complaints.
1. Define the problem.
2. Quantify the problem.
3. Establish and enact overarching principles.
4. Establish and enforce minimum standards of complaint acceptance, and criteria for complaint rejection.
5. Carefully target interventions for different types of sub-optimal complaints.
6. Manage expectations.
7. Ensure staff have appropriate skills.
8. Empower staff with appropriate flexibility, autonomy and decision making powers.
9. Train staff in vexatious complaint identification and management.

There is a disconnection between the volume and fervour of anecdotal claims about the extent of vexatious complaints in the Australian health sector, and what the available evidence is showing.

AHPRA and the National Boards intend to use the research findings to help improve their processes and protect the public.

Catherine is looking forward to presenting at the 2018 NEXT APA Conference in October and believes that attendees will gain a greater understanding of the classification of complaints, and further insight about opportunities that are available to both AHPRA and the profession to manage these complaints better.

Enhancing health professional workforce capacity within the National Disability Insurance Scheme: A pilot study

Prue Morgan¹, Alison Francis-Cracknell¹, Kirsty Pope², Libby Callaway²
¹Physiotherapy, Monash University, Frankston, Australia, ²Occupational Therapy, Monash University, Frankston, Australia

Concurrent 1D, Harbour View Room 1, October 5, 2018, 1:25 PM - 2:10 PM

Background:
National Disability Insurance Scheme (NDIS) reform changes the focus of rationed, block-funded support, to an individualised model empowering people with disability to choose and direct supports received. An NDIS-enabled allied health workforce shortage has been identified. Universities must produce NDIS-ready graduate health professionals to work effectively with NDIS participants.

Project details:
A suite of work-integrated learning resources and greenfield occupational therapy and physiotherapy clinical training options were developed. Training was delivered in collaboration with NDIS participants and disability service providers within Specialist Disability Accommodation. Outcomes were evaluated with respect to student, NDIS participant, and NDIS provider experiences. Reshaping traditional models of clinical placement and supervision were required to enable more flexible, efficient and person-driven capacity building models.

Outcomes:
Future therapists need NDIS training to enable development of participation-focused, person-centred care, and build NDIS workforce. Online education resources, and long-arm supervision in greenfield training sites can facilitate quality NDIS placement experiences for trainee therapists. This pilot has established partnerships with
non-government organisations delivering NDIS-funded supports, housing providers, and NDIS participants. It has defined the scope of clinical training within this sector, and associated human resource, administrative and operational procedures. The methodology has wider application to mentoring of graduate health professionals within the NDIS.

Take home messages:
- Student physiotherapists need training within the disability sector to address NDIS workforce shortage
- Flexible clinical placement models are required to engage the community disability sector
- Online support and long-arm supervision methodology may facilitate mentoring of emerging and recent graduates

Evidence in your inbox: Free delivery of up-to-date, practice-relevant research direct to physiotherapists

Anne Moseley¹, Steven Kamper¹
¹School Of Public Health, University Of Sydney, Missenden Road, Australia

Concurrent 4B, Ballroom 2, October 6, 2018, 1:05 PM - 1:50 PM

Project/concept description:
High-quality clinical research drives innovation in physiotherapy. For nearly 20 years the Physiotherapy Evidence Database (PEDro; www.pedro.org.au), has gathered, indexed and rated the quality of trials, reviews and guidelines evaluating physiotherapy. Today there are over 40,000 articles in PEDro, which makes finding research specific to one’s practice a challenge. Evidence in your inbox is a new service designed to meet this challenge.

Relevance to conference themes:
Evidence in your inbox is relevant to practice and education. The initiative uses contemporary information delivery technology to overcome a key barrier (time) to physiotherapists incorporating the latest research into their practice.

Background:
The 9,000 subscribers to Evidence in your inbox choose one or more of 15 areas of practice and receive a monthly email with links to newly indexed articles in that area. Number of articles per month ranges from 2 for ‘whiplash’ to 53 for ‘musculoskeletal’. Engagement rates for all areas exceed the industry average for number of opens (up to 35% for ‘cerebral palsy’), and click-throughs (up to 9% for ‘musculoskeletal’). Qualitative feedback indicates that clinicians and educators highly value the service, using the feeds for journal clubs, to inform practice, and to prepare lectures.

Conclusion/Outcome:
Evidence in your inbox is an innovative new service that helps busy clinicians and educators connect with up-to-date research.

Take home messages:
- Evidence in your inbox delivers a tailored feed of the latest research directly to physiotherapists.
- Feeds are available for 15 areas of practice.
- Access the latest research drives innovation in practice.
Perceptions about the implementation of physiotherapist prescribing in Australia: A national survey

Tim Noblet¹²³, John Marriott¹, Taryn Jones², Catherine Dean², Alison Rushton¹
¹The University Of Birmingham, Edgbaston, Birmingham , United Kingdom, ²Macquarie University, Sydney, Australia, ³St George’s University Hospitals NHS Foundation Trust, London, United Kingdom

Concurrent 6B, Ballroom 2, October 6, 2018, 2:45 PM - 3:30 PM

Description:
In July 2015, the APA submitted a proposal for the endorsement of physiotherapists for autonomous prescribing to the Physiotherapy Board of Australia. Reform focused upon meeting the healthcare needs of the modern Australian population. The aim of this project was to explore perceptions across the profession, identifying benefits/risks and anticipated practice/educational requirements.

Relevance:
The introduction of physiotherapist prescribing (PP) is set to enhance practice for the NEXT generation.

Background:
A cross-sectional online survey (March/April 2017) explored the views/perceptions of practising and student physiotherapists regarding PP. Quantitative data were analysed descriptively (absolute risk reductions, 95% Confidence Intervals) to determine the likelihood that health sector/ location were associated with findings. Thematic analysis enabled synthesis of qualitative data.

1409 participants completed the survey. 80% supported PP; 71% wished to train as prescribers. Clinical governance, risk-management, regulation and development of an educational framework were identified as pre-implementation priorities. PP was predicted to improve efficiency and access to medicines. Participants working in the private-sector were significantly more likely to train as prescribers than those in the public-sector or educational/research institutions. City dwellers were significantly more likely to train than physiotherapists in remote regions.

Conclusion:
Introduction of PP is perceived as beneficial for the Australian population, health services and profession. Decision-makers should consider these findings in conjunction with cost-benefit and risk analysis when planning for introduction of PP.

Messages:
- Physiotherapists support PP.
- Stakeholders should not only focus on immediate benefits but should be visionary, future-proofing the profession.
- Development of an education framework is anticipated.
Using technology to grow and market your clinic in 2018 (not 1998!)

Jack O’Brien
Clinic Mastery, Raymond Terrace, Australia

Background:
Physiotherapy practices need to embrace technology to reach more people with the message of our profession, and create a cost-effective influx of new patients to grow their clinic.

Relevance to conference themes:
Marketing and the future of practice - Busy practitioners often don’t have time to consider all the options for marketing available to them and implement new things with their team. The progressive clinics of the future will embrace digital and technology to reach, educate and market to more appropriate people.

Aims/objectives:
This talk presents the most important digital marketing tools to use right now, saving time and improving clinic and patient outcomes, including marketing ROI, cost-effective client acquisition, and better 'quality' of clients.

Take home messages: Participants will learn:
- Marketing systems to reduce reliance on the business owner or main practitioner
- How to create marketing that attracts ideal clients, without being pushy.
- Basic and advanced platforms to improve patient attraction and conversion tracking.
- 3 strategies to implement immediately, that will attract and convert ideal patients.
- The philosophy of marketing that is ethical, cost-effective and positions clinics (and our profession) as the leading go-to providers of primary musculoskeletal health care.

Growing a values-led team that drives clinic growth

Jack O’Brien
Clinic Mastery, Newcastle, Australia

Background:
Physiotherapy practices need to embrace values-based teams to improve delivery of patient care and to achieve the best clinic outcomes.

Relevance to conference themes:
The future of practice - busy clinic owners often don’t have time to consider all the options for team growth and values available to them and implement new things with their team. Successful clinics of the future will have teams that are recruited and led according to strong values and culture, will have low staff turnover, and will deliver amazing experiences - not just for patients, but for their teams.

Aims/objectives:
This talk presents a novel approach to team-based values development, recruiting for values and running a team with flexible working conditions and minimum 'rules'.

Take home messages: Participants will learn:
- Systems to develop team-based values and culture.
- Approach to hiring based on values.
- Leading a team not based on rules and expectations, but values, and how to minimise team churn.
- Why a values-driven team will mean greater client impact and team satisfaction.

Embedding student research in clinical practice: Strategies to maximise mutual success

Verity Pacey¹, Marita Dale¹, Katharine Scrivener¹
¹Macquarie University, North Ryde, Australia

Concurrent 5C, Ballroom 3, October 6, 2018, 1:55 PM - 2:40 PM

Background:
Clinicians who undertake clinical research have improved job satisfaction. However, clinical physiotherapists report that a lack of time is the main barrier to participation in research (Skinner et al 2015). Immersing student research placements within real-world clinical settings provides a novel solution to build students’ professional and research skills, while linking clinicians and academics to complete clinically relevant research. The Macquarie University Doctor of Physiotherapy Program requires all third year students to undertake a 12 month research project, with many projects placed within hospital, community and private practice settings.

Relevance to conference themes:
Integration of student research in clinical setting assists clinicians to engage, lead and achieve research aims, while fostering both the professional and research skills of the NEXT generation of physiotherapists.

Aims/objectives:
This session aims to provide both physiotherapy educators and clinicians interested in research with an understanding of key strategies to maximise the success of student-driven research in clinical settings.

Upon completion of this session, participants will –
- Describe the benefits and challenges of students participating in clinical research
- Set realistic expectations for students, clinicians and educators when students participate in clinical based research
- Describe the preparatory steps, processes and supervisory strategies that maximise success

Take home messages:
- Student participation in clinical research can be mutually beneficial to students, clinicians and educators.
- Early preparation and clear communication helps to achieve success.
- Supervision of clinical research students must be tailored to support the development of both research and professional skills.
Supporting future Indigenous health researchers using a PhD familiarisation program

Warwick Padgham

Melbourne Poche Centre For Indigenous Health, University of Melbourne, Australia

Concurrent 3C, Ballroom 3, October 5, 2018, 3:35 PM - 4:35 PM

Project/concept description:
The Indigenous PhD Familiarisation Program at the University of Melbourne supports enrolment of Indigenous students in research higher degrees and forms part of the University’s creation of academic pathways for Indigenous PhD candidates.

Relevance to conference themes:
The Program provides a unique perspective to research training for prospective Indigenous research students across health sciences, including physiotherapy. Currently, many opportunities exist for Indigenous health practitioners and students to contribute to the discourse of Indigenous health through research and academic roles. However, many academic leadership roles are left unfilled or are occupied by non-Indigenous researchers.

Background:
The three-day Program provides participants with opportunities which open the ‘abstract door’ to university, explain research higher degrees, and provide workshops which promote individual research ideas in a culturally supportive environment. Participants hear from current students and established researchers about their journeys, opportunities and challenges of being an Indigenous researcher. Additionally, participants engage with specialists in their field of interest for deeper discussion on research ideas.

Conclusion/Outcome:
Central to the Program’s success is the linkages participants have with the breadth of Indigenous academic leadership at the University. Participants gain an understanding of what a PhD might mean for them, allowing them to answer questions about their own PhD journey.

Take home messages:
- The Program allows prospective students to understand the PhD journey in a culturally supported and collaborative way.
- Indigenous research students are more likely to succeed within a cohort
- The Program has contributed to growing the Indigenous PhD cohort

Fully online higher degrees: the NEXT step towards competency milestones in the physiotherapy career pathway?

Louisa Remedios, Sonya Moore, Jennifer McGinley

The University Of Melbourne, Parkville, Australia

Concurrent 5C, Ballroom 3, October 6, 2018, 1:55 PM - 2:40 PM

Project/concept description: The APA is currently reviewing its career pathway, seeking a relevant, quality assured and transparent framework to demonstrate achievement of high-level competency standards. Some universities have introduced fully online, higher degree programs aiming to meet these needs sustainably and flexibly.
Relevance to conference themes:
This presentation provides information on fully online post-qualification academic offerings which have been mapped to APA endorsed competency standards and to relevant international standards. Importantly, the profession needs an informed understanding and opportunity to interrogate these programs as they relate to career pathways.

Background:
The design and development of fully online interprofessional higher degrees in Sports Medicine, Sports Rehabilitation and Rehabilitation Science at a single university will be outlined. These include single subjects, specialist certificates, graduate certificates, graduate diplomas and Masters, each with learning outcomes that have been mapped to the seven roles and key competencies currently outlined in the APA’s Physiotherapy Career Pathway (v6). Plans for future development will also be discussed.

Conclusion/Outcome:
Fully online post-qualifications can align with roles and documented competency standards, consistent with the profession’s goal for transparent and quality assured career pathways.

Take home messages:
• Formal post-qualification education is essential to achieving higher-level competencies for career development
• Universities offer robust, transparent, quality assured academic programs to achieve competency standards
• Online programs offer significant flexibility and opportunity to apply knowledge to practice for working physiotherapists
• Such programs need to be scrutinised and evaluated in professional forums to ensure they align with NEXT steps in career pathways

No more studying but plenty of learning: Overcoming the barriers to success in private practice
Sam Rice¹
¹Corio Bay Sports Medicine Centre, Geelong, Australia

Concurrent 3D, Harbour View Room 1, October 5, 2018, 3:35 PM - 4:35 PM

Project/concept description:
The average career span of physiotherapists is short and is an issue yet to be resolved in our profession. Career pathway progression has gained recent attention, however it is only the most passionate that advance to higher roles and specialties. In contrast, we may be failing to successfully transition therapists into their new careers in private practice.

Relevance to conference themes:
This presentation provides innovation within the theme of practice. It is based upon shared experiences and a personal anecdote as a new graduate in 2017. It will intrigue and provoke thought in new graduates, senior mentors, and business owners who benefit financially from productive graduates.

Background:
Private practice therapists require clinical skills in an overwhelming number of categories. In addition, non-clinical skills include developing relationships, marketing a service and teaching and listening. In amongst so much learning and working, work-life balance can also become a challenge. This presentation is based on the
lessons learned on a path to consistent patient flow, strong clinical results and an unwavering passion for serving the community.

Conclusion/outcome:
While clinical skills are necessary to achieving a successful clinical outcome, it is the non-clinical skills which have the greatest impact on whether patients return for follow-up visits. Fortunately, those who return are more adherent to exercises, gain more treatment and thus achieve better results.

Take home messages:
- Non-clinical skills set the foundation for success.
- Clinical skills can be learned according to needs and interests.
- Job satisfaction can never be achieved without work/life balance.

Building research capacity in allied health practice
Susan Slade¹, Kathleen Philip², Meg Morris¹,³
¹La Trobe University, Bundoora, Australia, ²Department of Health and Human Services, Melbourne, Australia, ³Healthscope, Melbourne, Australia

Concurrent 4B, Ballroom 2, October 6, 2018, 1:05 PM - 1:50 PM

Project/concept description:
Allied health clinicians provide care across a range of disciplines. Their effective participation in evidence-based practice requires research literacy and implementation of research into practice. Frameworks designed to create and embed research into routine allied health practice were evaluated.

Relevance to conference themes:
The key factors of policy and regulation, management and leadership, and individual research literacy are relevant to all conference themes.

Background:
The rapid review included full-text English-language, peer-reviewed publications or Government reports. Eight electronic databases and four government websites were searched. Two independent researchers conducted all review stages and used content and thematic analysis to interpret the results. Sixteen frameworks papers were included. Content analysis identified 44 system and regulatory items, 125 healthcare organisational items and 76 individual attribute items. Thematic analysis identified the four major themes: policy and regulation, leadership and management, organisational factors and clinician attributes.

Conclusion:
Theoretical frameworks were identified that informed methods by which to embed a culture of research into allied healthcare services. Research-led and evidence-informed allied health practice enables optimum workforce capability and high quality care.

Take home messages:
(1) Sustainable change requires allied health research policies, regulation, governance and organizational structures that support evidence-based practice.
(2) Research-literate managers who are advocates of evidence-informed practice facilitate successful implementation.
(3) Organisational factors that are key to building a research culture include dedicated research positions, skills training, infrastructure provision and university partnerships
(4) “Research ready” allied health graduates and clinicians are essential for evidence appraisal and translation of research findings into practice.
Transformational leadership – putting theory into practice

Kellie Stockton 1
1Children's Health Queensland, Brisbane, Australia

Concurrent 3A, Ballroom 1, October 5, 2018, 3:35 PM - 4:35 PM

Project Description and relevance to conference themes:
Successful leadership framework implemented in large metropolitan hospital.

Background:
In 2014 two paediatric hospitals were merged to form Lady Cilento Children’s Hospital. Quite quickly it became apparent that many teams were struggling with the merge which had a negative effect on workplace culture. In 2016 the Queensland Government “Work For Queensland Survey” identified a significant decrease in engagement in the Physiotherapy team since the opening of the hospital.

Survey results were presented to the department and volunteers formed the working group to develop an action plan with clearly defined deliverables and KPIs. The action plan included development of a leadership group (SIGNAL), supporting staff to attend Crucial Conversations and Coaching Training and incorporation of CHQ values into all aspects of day to day practice.

Outcome:
Twelve months following, engagement has significantly improved. An increase in 33% for “People are treated fairly and consistently in my workplace”. An improvement of 30% in “Management is willing to act on suggestions to improve how things are done”. Importantly a reduction of 23% of people who had reported that work had a negative effect on their health.

The team were put to the test recently with a major change with implementation of a fully integrated electronic medical record. A highly engaged team with a common sense of purpose embraced this change.

Take home messages:
• Develop a common vision to implement change
• Staff engagement is key to success
• Invest in staff development and identify strengths

Welcome to the era of cognitive healthcare. Empowering heroes, transforming health. Big data & AI.

Terry Sweeney 2
2IBM Watson Health

Concurrent 4A, Ballroom 1, October 6, 2018, 1:05 PM - 1:50 PM

Terry will discuss how technology can empower leaders, advocates and influencers in health to achieve remarkable outcomes, accelerate discovery, make essential connections and gain confidence on their path to solving the world’s biggest health challenges. This will be achieved by arming health heroes with the cognitive technology and expertise they need to power thriving organisations, support vibrant communities and solve health challenges for people everywhere.

Physio’s should consider what insights could be unlocked from their big data to support decision making, generate treatment options and techniques, benchmarking performance and estimating treatment costs and time frames. These are only a few areas that could make a real difference in advancing towards a big-picture vision, or delivering meaningful experiences to a single individual.
Can we sell our beige Torana (or will our advocacy fail)?
Ian Watts
1Australian Physiotherapy Association, Melbourne, Australia

Concurrent 8B, Ballroom 2, October 7, 2018, 12:10 PM - 12:55 PM

Our members suggest that our advocacy be bolder. It’s been suggested that our advocacy is a bit like a Torana – serviceable, affordable, but beige. We’ll use the session to explore what it would take to make our advocacy bolder. We’ll propose a series of threats to our profession and opportunities for it, however the focus will be on what it would take to grasp the opportunities and ward off the threats – the capability of our profession to deliver the value it espouses. This session will use notions such as ‘rebel talent’ and ‘urban tribes’ to investigate whether we want, and can maintain advocacy that supplants the beige Torana.

Australian health system and funding reform. What do we know that works?
Michael Wright
1Centre for Health Economics Research and Evaluation, Sydney, Australia

Keynote 2, Grand Ballroom, October 5, 2018, 11:20 AM - 12:20 PM

Since the introduction of Medicare, multiple attempts have been made to shift the Australian health system away from its traditional fee for service structure and focus on impatient health service. Reforming the the Australian health system to better meet the future needs of the population has been identified as a priority for health professional organisation and successive Australian governments.

This presentation will discuss different models of care which might provide improvement in the system, and also discuss potential funding mechanisms.

Using a series of case studies, this presentation outlines the complex interaction between the health system context and funding models, and provides insights into why some health reforms are successful while others have failed. In order to achieve successful health care reform both the health system context and financial incentives need to be fully considered.