

# **Standards for Occupational Health Physiotherapy Practice:**

## **Domains, Elements and Activities**

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(\*As awarded by the Australian College of Physiotherapists in 2008)

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## Comments

1. We have used the term Occupational Health (OH) Physiotherapist throughout this document. However, it has been suggested that this may need further discussion.
2. The Occupational Health (OH) Physiotherapy standards align with the eight Domains of the Physiotherapy Education Framework (World Physiotherapy, 2021) which describe the skills and knowledge required globally by all graduate physiotherapists.
3. In this document each Domain has Elements and these are divided into specific Activities describing what OH Physiotherapists should be able to demonstrate in their work
4. It is likely that we shall need to review the standards in about one to two years to determine how well they may have worked in various countries.

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# Standards for Occupational Health Physiotherapy Domains, Elements and Activities – Background

This document has been developed by Dr Rose Boucaut and Ms Barbara McPhee AM, Australian Occupational Health Physiotherapists in collaboration with a group of physiotherapists working in occupational health around the world. The aim is to provide a set of practical expectations for occupational health (OH) physiotherapy practitioners. It is hoped that they will prove useful for the International Federation of Physiotherapists working in Occupational Health and Ergonomics (IFPOHE). IFPOHE is a World Physiotherapy subgroup established in 2019, and currently has 24 Member Organisations.

The norms and nature of OH Physiotherapy practice vary across the world so the purpose of this document has been to formulate shared expectations related to OH Physiotherapy practice. We anticipate that no single country meets all the criteria listed. However, as the nature and practice of health care changes, we anticipate that each Domain will be further refined to reflect a benchmark that all OH Physiotherapists can aim to achieve.

Due to the difficulties of organising meetings in different time zones, two working parties were organised to provide input and feedback in the process of developing this final document. Due to their location these were labelled the Northern and Southern Hemisphere groups. Their input was essential to this work. The working parties met regularly over an 18-month period to discuss the global Domains and Activities project and provided useful feedback and comments for discussion for which we are most grateful. Our sincere thanks go to each of the Working Party members and cooperating organisations who voluntarily assisted us in this project. Our thanks to Ms Lucia Tsui, Occupational Health Physiotherapy Australia for proof reading and feedback, and to the OH Physiotherapy educators from the Finnish Institute of Occupational Health and Association of Occupational Health Physiotherapists, Finland for their valuable feedback.

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We are most grateful for additional support throughout this project from:

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# Standards of Occupational Health Physiotherapy Domains, Elements and Activities – Introduction

The United Nations 2030 Agenda for Sustainable Development, Goal 8, is to: ‘Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all’ (United Nations, 2015). Occupational health practitioners work towards ‘...the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations’ (World Health Organization (WHO), 2023). Thus, the overarching aim is to achieve decent work for all workers, whoever or wherever they may be whilst recognising that work is a social determinant of health (WHO, 2024). Models help structure thinking about complexity and are thus useful tools for occupational health practitioners; for example: the International Classification of Function (World Health Organisation, 2001); the Work Ability Model (Ilmarinen, 2005); and the Risk Management model (International Standards Organisation, 2018).

The Standards for Occupational Health Physiotherapy (OH Physiotherapy) are under the headings of Domains, Elements and Activities. They outline the *additional* skills and knowledge required by physiotherapy practitioners to enable them to work in the field of Occupational Health and Ergonomics. They align with the eight Domains of the Physiotherapy Education Framework (World Physiotherapy (WP), 2021) which describe the skills and knowledge required globally by all graduate physiotherapists.

Beyond the healthcare centre, OH Physiotherapy practitioners commonly work in organisational settings where they help employers and employees to foster wellbeing as well as enhance health and safety at the workplace. OH Physiotherapy practice involves reviewing workers, the work and the workplace environment, whilst considering the wider environmental context. They also assist with treatment and rehabilitation enabling functional, safe and durable return to work where work disability has occurred.

The OH Physiotherapy Domains, Elements and Activities are intended to provide guidance for recognition in the field of OH Physiotherapy practice, and form a basis for ongoing training and education which may be useful for those new to this speciality.

A larger, more comprehensive document is being compiled. It is intended that this will provide more detailed Performance Descriptors for activities across each of the eight Domains for educators and the development of training packages.

The Glossary defines terminology used in this document (commences Page 19)

A Reference/Further Reading list is provided (commences Page 25)

A Biography of contributors is included (commences Page 29)

## Note:

*Domain 1 – ‘Physiotherapy Assessment and Intervention’ from the Education Framework (World Physiotherapy, 2021) has been renamed ‘OH Physiotherapy Practice’, tailored for this speciality*

*Domain 3 – ‘Communication’ has been renamed ‘Communication and documentation’, as documentation is written communication*

*Domain 5 – ‘Interprofessional teamwork’ has been renamed ‘Collaboration with stakeholders’, to include non professional team members*

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## Occupational Health Physiotherapy

Occupational Health Physiotherapy (OH Physiotherapy) is the branch of physiotherapy that deals with promoting, protecting and managing the health of people at work. The practice of OH Physiotherapy aligns with promotion of 'decent work' (United Nations, Sustainable Development Goal Number 8, 2015).

### Extended knowledge and specialised skills

OH Physiotherapy practitioners aim to extend their knowledge and specialised skills beyond those of general physiotherapists. OH Physiotherapy practitioners use these to improve individual, organisational and community health, safety and wellbeing thereby supporting sustainable work across life's stages. Their work also includes managing disorders that may arise during normal life that may affect an individual's ability to work.

### OH Physiotherapy service delivery

OH Physiotherapy service delivery generally fits into three broad categories: promoting work ability and workplace wellbeing, preventing work disability and managing work disability.

### OH Physiotherapy clients

OH Physiotherapy clients include industry partners, employers and employees and other stakeholders. As a result, physiotherapy activities extend beyond the clinic and may focus on different industries, organisations and associated workforces in addition to the more traditional one-on-one client-therapist role.

### The context of OH Physiotherapy Practice

The context in which OH Physiotherapy is practiced influences different approaches to the delivery of services. OH Physiotherapists work in a variety of ways depending on their country's or region's social, legal and cultural norms and requirements. As a result of these factors OH Physiotherapy roles and responsibilities will vary between countries and regions, and in response to the funding, delivery and focus of occupational health services. OH Physiotherapy practice is culturally responsive; is in accord with relevant legislative requirements; and promotes the health benefits of work (Black, 2008).

### The Physiotherapist Education Framework

The Physiotherapist Education Framework (World Physiotherapy, 2021) describes the skills and knowledge required by all physiotherapists. The OH Physiotherapy Professional Domains, Elements and Activities uses the eight domains from the Education Framework to provide structure and a base upon which to describe the *additional* skills and knowledge to which all OH Physiotherapy practitioners can aspire.

### OH Physiotherapy Professional Domains and Activities

This document aims to provide a detailed overview of the activities OH Physiotherapy practitioners may undertake and their required competencies. It is not exhaustive and intentionally leaves room for the future development of the field of OH Physiotherapy as work, as we currently know it, evolves.

It is hoped that this document may prove useful for educators, or those anticipating working in this field.

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# Domain 1 – OH Physiotherapy Practice

## General principles of occupational health

In 1950, a Joint Committee of the International Labour Organisation (ILO) and World Health Organisation (WHO) defined Occupational Health objectives as the:

- Promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations
- Prevention among workers of departures from health caused by their working conditions
- Protection of workers in their employment from risks resulting from factors adverse to health
- Placement and maintenance of workers in an occupational environment adapted to their physical and mental needs (ILO/WHO, 1950)

Like all branches of Occupational Health, promotion of work ability and the prevention of work disability is the primary focus of OH Physiotherapy practice. OH Physiotherapists consider the psychological, sociological and organisational aspects of work as well as the physical aspects in their prevention strategies. Optimal task design, balanced job content and control over workload, and support and training are important for workers' health, safety and performance. However, these rely on supportive social and managerial systems to be developed, implemented and maintained.

## Occupational health and safety (OHS)

In this document OHS refers to the preserving and promoting of health at work through both health and safety programs. Occupational Health professionals often work closely with Safety professionals to ensure that all aspects of work systems are considered in the development of prevention strategies and risk management.

The principles of OHS need to be integrated into the broader work systems and OHS professionals should promote and apply these. As such, OH Physiotherapists work in a broad social framework and, to be effective, they must contribute to fields that are beyond the traditional boundaries of physiotherapy practice. This requires additional knowledge and skills, some of which are common to all professionals working in Occupational Health.

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**DOMAIN 1 – Occupational Health Physiotherapy Practice***Element 1.1 General principles of occupational health and safety (OHS)**Activity*

1.1.1	Demonstrate sound knowledge of the general principles of OHS practice
1.1.2	Demonstrate sound knowledge of relevant local, national and international legislation and regulations relating to occupational health and safety where required
1.1.3	Collect, synthesise and use data to demonstrate current knowledge of the relationship between the health of workers, their work and work environment
1.1.4	Understand the human and cultural factors that influence all aspects of wellbeing at work, workplace health and safety, work disability prevention and injury/illness management
1.1.5	Recognise and acknowledge the perspective of key stakeholders with respect to workplace health and safety, work disability prevention and management and resources of an employee and their workplace
1.1.6	Understand who the client(s) is/are (i.e. employer, employee, other) and balance the different needs of various client groups and stakeholders

*Element 1.2 Promoting health and safety in the workplace**Activity*

1.2.1	Plan, consult and implement programs to support work ability
1.2.2	Demonstrate knowledge and use the principles and practice of promoting health at work including identifying barriers and strategies to overcome these
1.2.3	Collaborate with stakeholders to promote positive attitudes and healthy behaviours in the workplace
1.2.4	Promote and deliver education and workplace training to a range of stakeholders, to foster health and wellbeing of workers
1.2.5	Assist in designing workplaces and work systems to optimise worker health and performance
1.2.6	Identify and respond to emerging and changing circumstances and risks to health and safety in the workplace



**DOMAIN 1 – Occupational Health Physiotherapy Practice****Element 1.3 Prevention****Activity**

1.3.1	Assess work demands and work environment
1.3.2	Assess workers' capacity for different types and nature of work and in relation to the micro and macro working environments
1.3.3	Apply appropriate techniques and interventions to prevent work disability
1.3.4	Evaluate outcomes of interventions and programs that support and promote work ability

**DOMAIN 1 – Occupational Health Physiotherapy Practice****Element 1.4 Manage work disability****Activity**

1.4.1	Assess fitness-for-work, using appropriate information and tools, such as established work capability assessments, functional capability assessments, health examinations, health surveys
1.4.2	Design and implement timely injury/illness and work ability intervention plans that ensure early identification/reporting, assessment, treatment and successful return to work (RTW)
1.4.3	Identify and manage barriers to recovery and RTW in a timely fashion
1.4.4	Manage work related long-term disability
1.4.5	Evaluate outcomes of interventions to enhance work ability, and to manage work disability or injury/illness including RTW

## Domain 2 – Ethical and professional practice

All physiotherapists have legal and social obligations which include practice competence, commitment to ongoing professional development, promotion of the public good and adherence to ethical standards. The values expected of physiotherapists include transparency, honesty, solidarity, community, reciprocity, respect for culture and diversity, accountability, veracity (truthfulness) and confidentiality. Ethical practice involves interactions, multidisciplinary co-operation, consultation and participation.

In addition to the usual requirements to provide optimal client care, all physiotherapists must take responsibility for their own health and well-being and, support their colleagues to do likewise.

OH Physiotherapists have further responsibilities to a range of stakeholders including employers, worker representatives, commercial bodies such as insurance companies, the general public and specific responsibilities under work health and safety legislation. OH Physiotherapists may be confronted with conflicting obligations to different groups at various times. Problems are most likely to arise if potential conflicts of interest are not recognised, particularly if different groups are not aware of the OH Physiotherapist's wider responsibilities.

OH Physiotherapy also includes: fostering the concept of Decent Work; promoting OH Physiotherapy; working within their scope of OHS practice; respecting diversity and privacy at the workplace; acting responsibly; and modelling compliance with OHS rules at the workplace.

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<b>DOMAIN 2 - Ethical and Professional Practice</b>	
<i>Element 2.1 Ethics</i>	
<i>Activity</i>	
2.1.1.	Practice in an ethical manner complying with all relevant occupational health and safety (OHS) laws codes and recommendations
2.1.2.	Recognise and manage personal, professional and organisational conflicts of interest
2.1.3.	Demonstrate a sound understanding of the requirements for confidentiality and privacy in the occupational health context
2.1.4.	Recognise the legal and ethical limitations of confidentiality
2.1.5.	Respect and maintain confidentiality of proprietary information (business information not for the general public), intellectual property (IP) and commercial agreements.
2.1.6.	Identify and observe protocols for mandatory reporting where it applies.
<b>DOMAIN 2 - Ethical and Professional Practice</b>	
<i>Element 2.2 Professional Practice</i>	
<i>Activity</i>	
2.2.1	Respect and promote inclusion, diversity, dignity, autonomy and human rights in the workplace
2.2.2	Demonstrate impartial representation/advocacy for all stakeholders
2.2.3	Promote autonomous OH Physiotherapy practice
2.2.4	Model appropriate OH Physiotherapy professional behaviour
2.2.5	Recognise professional limitations within the OH environment and refer clients to other OH professionals, and other health care professionals outside OH as appropriate
2.2.6	Demonstrate a commitment to personal health, self-care and well-being to foster healthy and safe professional practice
2.2.7	Understand the need for and manage security and confidentiality in maintaining digital records
2.2.8	Exhibit professional and ethical behaviour in the use of technology-enabled communication

## Domain 3 – Communication and documentation

### Communication

As in all physiotherapy practice, clear communication with stakeholders including clear documentation of OH Physiotherapy activities is essential. Active listening skills are important. They involve going beyond simply hearing the words that another person speaks to include also seeking to understand the meaning and intent behind them. They require being an active participant in the communication process and ensuring consultation with stakeholders is a normal part of practice, to ensure that interventions are sustainable and efficacious.

Stakeholders have a range of educational backgrounds, skills, levels of literacy, and numeracy, and may come from different language groups and cultures. OH Physiotherapy practitioners need to adapt their communication to reach all of these stakeholders.

OH Physiotherapists are frequently involved in giving presentations to a range of stakeholders and need to modify their language and material to suit the audience. OH Physiotherapists' abilities allow them to contribute to the application, dissemination, translation, and creation of knowledge and practices applicable across all industry sectors.

Advocacy is a communication skill that OH Physiotherapists are likely to use in their work so that the voices of those in their care are heard.

### Documentation

Documentation is an important part of OH Physiotherapy practice. It should be part of each aspect of program development, implementation and review. It helps to ensure that resources can be allocated and organisations are not in danger of repeating mistakes or 'reinventing the wheel' and that knowledge and experience are not lost.

The range of documentation in OH Physiotherapy practice may include reports, instructions to designers/engineers, inspections and audits, outcome measure tools in Return to Work (RTW). Acknowledgement of source material, legislation and guidelines is essential in documentation.

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<b>DOMAIN 3 – Communication and documentation</b>	
<i>Element 3.1 Communication</i>	
<i>Activity</i>	
3.1.1	Demonstrate effective workplace communication to promote workers’ health and safety, to enhance wellbeing at work and work ability and to reduce work-related disability
3.1.2	Provide accurate and appropriate information to stakeholders, adapted to the audience, while maintaining privacy and confidentiality
3.1.3	Provide contextually appropriate feedback to enhance individual/worker and organisational/workplace learning and performance
3.1.4	Understand the importance of communication, digital and e-health skills in OHS practice
3.1.5	Demonstrate appropriate negotiation skills with stakeholders from different roles and backgrounds and with varied responsibilities related to workplace and health care contexts
3.1.6	Recognise and overcome barriers to communication (language, literacy and numeracy) within workplaces, and with workers and other relevant stakeholders including adapting communication to the diverse cultural, linguistic needs of the stakeholders involved
3.1.7	Where appropriate, plan and deliver workplace communication including education that engages and informs participants
<i>Element 3.2 Documentation</i>	
<i>Activity</i>	
3.2.1	Demonstrate the principles of professional report writing in an OHS context i.e. clear, accurate, professional, as well as appropriately distributed and attributed
3.2.2	Use digital technology appropriately to enhance written communication

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## Domain 4 – Evidence based practice

Through their engagement in evidence-informed practice, critical reasoning and shared decision-making, OH Physiotherapists need to utilise the best available research evidence to arrive at decisions, while taking context and stakeholders' values and preferences into account.

Where no readily available scientific evidence exists OH Physiotherapists may need to rely on empirical or practical evidence. This is common practice while the research evidence is being gathered. OH Physiotherapists recognise uncertainty and complexity in practice and formulate questions to address knowledge gaps.

<b>DOMAIN 4 – Evidence based practice</b>	
<i>Element 4.1 Critical evaluation of evidence</i>	
<i>Activity</i>	
4.1.1	Understand the different approaches to workplace wellness, work disability prevention and management, its current relevant evidence and its limitations in OHS practice
4.1.2	Critically evaluate the integrity, reliability and applicability of OH Physiotherapy and human factors and ergonomics (HFE) related research and literature
4.1.3	Identify and select the most appropriate intervention from a variety of modes of OH Physiotherapy interventions
4.1.4	Identify limiting factors in current evaluation methodology relating to OHS data and information
<i>Element 4.2 Integration of evidence into practice</i>	
<i>Activity</i>	
4.2.1	Integrate best available evidence into OH Physiotherapy practice
4.2.2	Understand that scientific evidence may be lacking in OH Physiotherapy and determine when other evidence may be appropriate to guide actions

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## Domain 5 – Collaboration with stakeholders

OH Physiotherapists promote, through collaboration, stakeholder relationships based on trust, respect, and shared decision-making among a variety of individuals with complementary skills in multiple settings across the continuum of care.

Effective collaboration involves sharing knowledge, perspectives and responsibilities, and a willingness to learn from each other. It requires understanding the roles and views of others, pursuing common stakeholder-centred goals and outcomes, and managing differences, including resolution of conflict.

Collaborative practice is essential for safe, high-quality, stakeholder-centred outcomes.

<b>DOMAIN 5 – Collaboration with stakeholders</b>	
<i>Element 5.1 Collaborative practice</i>	
<i>Activity</i>	
5.1.1	Work collaboratively with stakeholders to prioritise and optimise outcomes of health, safety and wellbeing at work taking into account the organisational context
5.1.2	Engage in collaborative learning to continuously improve professional practice and contribute to collective improvements in OH Physiotherapy practice and in OHS generally
5.1.3	Provide guidance and education and mentor colleagues and stakeholders about OH Physiotherapy practice to enhance the effectiveness; promote ownership of interventions; and encourage lasting and ongoing improvements
<i>Element 5.2 Participative practice</i>	
<i>Activity</i>	
5.2.1	Understand and maintain a stakeholder focus to promote optimal health, OHS and rehabilitation outcomes
5.2.2	Use the participative approach to problem solving including consultation with relevant key stakeholders

## Domain 6 - Reflective practice and lifelong learning

### Reflective practice

Reflective practice is a way to use learning to achieve change and is the capacity to reflect 'on action' and 'in action' to promote continuous learning. Reflection is helpful for all physiotherapists and in particular OH Physiotherapists as they try to understand the context of the setting in which they work.

### Life-long learning

Reflective practice is also a useful means to help direct lifelong learning which is a form of self-initiated education focused on personal professional development and is the capacity to reflect on actions to promote continuous learning. Continuing professional development is part of good professional physiotherapy practice and is a requirement for registration in many countries.

OH Physiotherapists need to demonstrate their commitment to maintaining and enhancing their professional competence. This is achieved by engaging in critical reflection, identifying strengths and gaps and acting to address the latter.

Teaching others and contributing to scholarship is also part of lifelong learning. OH Physiotherapists strive to master their domains of expertise and to share their knowledge by implementing a planned approach to lifelong learning. They recognise the need to continually learn and to model the practice of lifelong learning for others.

<b>DOMAIN 6 - Reflective practice and lifelong learning</b>	
<i>Element 6.1 Reflective practice</i>	
Activity	
6.1.1	Develop, implement, monitor and revise professional growth and development to enhance own OH Physiotherapy practice.
6.1.2	Identify opportunities for learning and improvement by regular critical reflection on and assessment of own OH Physiotherapy performance using various internal and external sources of information.
6.1.3	Reflect on and evaluate the process and outcomes of OHS interventions
<i>Element 6.2 Lifelong learning</i>	
Activity	
6.2.1	Identify and plan future professional development
6.2.2	Act to consolidate learning and grow OH Physiotherapy knowledge and skills.
6.2.3	Where the opportunity arises, contribute to the work of research programs about OHS and environmental factors affecting workers' health.



## Domain 7 - Quality improvement

Quality improvement entails working towards enhanced performance in a continuous manner. It involves the review of past work, processes and outcomes to enhance work in the future.

OH Physiotherapists improve the results of their work by continually evaluating the processes adopted; sharing and comparing their work with that of others; and actively seeking feedback including peer review. They endeavour to meet the needs of stakeholders by ongoing professional development, consultation and collaboration and seeking out the most appropriate information.

<b>DOMAIN 7 - Quality improvement</b>	
<i>Element 7.1 Continuous quality improvement</i>	
<i>Activity</i>	
7.1.1	Contribute to enhancing healthy, safe and efficient work practices and systems of work through the application of continuous quality improvement processes
7.1.2	Contribute to the improvement of work processes, product and client satisfaction as the OHS and health care models in your country require
<i>Element 7.2 Utilisation of resources</i>	
<i>Activity</i>	
7.2.1	Advocate for organisational or system-level change to achieve sustained beneficial OHS outcomes and improved work processes, product and client satisfaction
7.2.2	Engage in the responsible utilisation and management of available resources at the workplace and in relation to employees' health, safety and wellbeing
<i>Element 7.3 Evaluation of outcomes</i>	
<i>Activity</i>	
7.3.1	Design, plan, conduct and manage the evaluation of OH Physiotherapy interventions
7.3.2	Record and communicate the evaluation of outcomes of OHS interventions and use these to promote continuous improvement

## Domain 8 – Leadership and management

OH physiotherapists demonstrate collaborative leadership and management and contribute to the development and delivery of continuously improving health care outcomes. They do this by engaging in shared decision-making for the operation and ongoing evolution of systems in occupational health care in the workplace.

They plan and administer services in complex and challenging environments to improve well-being, and reduce risks to health and safety of all stakeholders. They manage change in the workplace and engage in the responsible use and management of resources.

<b>DOMAIN 8 – Leadership and management</b>	
<i>Element 8.1 Leadership</i>	
<i>Activity</i>	
8.1.1	Demonstrate leadership in professional OH Physiotherapy practice
8.1.2	Recognise and respond appropriately to complexity, uncertainty, and ambiguity in managing people, within different work health and safety cultures, and in the identification and management of risks to health and safety at work
8.1.3	Facilitate necessary and appropriate change in service delivery and practice models to improve OH
<i>Element 8.2 Management</i>	
<i>Activity</i>	
8.2.1	Contribute to the development of a healthy and safe work environment
8.2.2	Understand the reasons for change in the workplace and manage it appropriately
8.2.3	Engage in the responsible utilisation and management of available or anticipated human, social and economic resources
8.2.4	Contribute to applications for increased resources where these may improve health and safety outcomes.
8.2.5	Understand and promote the use of business cases to promote health and safety in the workplace
<i>Element 8.3 Protecting health of colleagues and others</i>	
<i>Activity</i>	
8.3.1	Support the physical, mental and emotional health and personal self-care of colleagues and others.
<i>Element 8.4 Promoting OH Physiotherapy</i>	
<i>Activity</i>	
8.4.1	Promote OH Physiotherapy both within and beyond the physiotherapy profession
8.4.2	Share information about OH Physiotherapy with colleagues within the physiotherapy profession and with stakeholders more broadly

## Glossary

Term	Definition (as used in this document)
<b>Consultation</b>	Consultation is a two-way process between individuals or groups and other stakeholders where they talk to each other; listen to concerns; seek and share views and information; and consider all points of view before decisions are made. (Safe Work Australia 2018)
<b>Context</b>	The circumstances that form the setting for an event, statement, or idea, and in terms of which it can be fully understood (adapted from Oxford Dictionary). In OHS this may relate to a range of settings such as the workplace, legislation and the wider society.
<b>Decent work</b>	The United Nations Sustainable Development Goal 8 is to, 'Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all' (United Nations 2015).
<b>Evaluation</b>	A structured, objective appraisal, review or assessment of actions or interventions in order to determine the impact of these and improve outcomes.
<b>Functional Capacity Evaluation or Assessment FCE/FCA</b>	The following assessments are conducted with a similar approach but may have different names including Functional Capacity Assessment, Pre-employment Assessment and Pre employment Screening. The pre-employment (sometimes referred to as Pre-placement) tests are conducted prior to commencing employment as the names suggest.
<b>Pre-employment assessment or screening (PEA/PES)</b>	'A Functional Capacity Evaluation is an assessment containing a series of tests to determine a worker's physical ability to meet the functional demands associated with their pre-injury role, thus, assisting them with their recovery and or return to work. These evaluations match the worker's physical abilities to the critical demands of the job requirements that are needed to be met' (Kinnect 2023)
<b>Health</b>	Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (WHO 2006).
<b>Health intervention</b>	A combination of activities or strategies designed to assess, improve, maintain, promote or modify health among individuals, groups or populations. Interventions can include educational or care programs, policies, environmental improvements or health promotion campaigns.

## Glossary

Term	Definition (as used in this document)
<b>Human Factors and ergonomics (HFE)</b>	<p>The scientific discipline concerned with the understanding of interactions among humans and other elements of a system, and the profession that applies theory, principles, data and methods to design in order to optimise human well-being and overall system performance (IEA 2020).</p> <p>For a workplace, HFE is about design of work, the work environment and the organization of work to improve the health and safety, performance and productivity of the workplace.</p>
<b>International Classification of Function (2001)</b>	<p>‘The International Classification of Functioning, Disability and Health, known more commonly as ICF, is a classification of health and health-related domains.</p> <p>As the functioning and disability of an individual occurs in a context, ICF also includes a list of environmental factors.</p> <p>ICF is the WHO framework for measuring health and disability at both individual and population levels’ (WHO 2023).</p>
<b>ILO</b>	<p>The International Labour Organization (ILO) is a <a href="#">United Nations</a> agency whose mandate is to advance social and economic justice by setting <a href="#">international labour standards</a>. Founded in October 1919 under the <a href="#">League of Nations</a>, it is one of the first and oldest <a href="#">specialised agencies of the UN</a>.</p> <p>It ‘...is devoted to promoting social justice and internationally recognized human and labour rights, pursuing its founding mission that social justice is essential to universal and lasting peace.</p> <p>The only tripartite U.N. agency, the ILO brings together governments, employers and workers representatives of <a href="#">187 Member States</a>, to set labour standards, develop policies and devise programmes promoting decent work for all women and men’ (ILO 2023).</p>
<b>Mandatory reporting</b>	<p>Mandatory reporting is when the law requires a person to report known or suspected abuse, disease or some other form of threat to individuals or groups. A mandated reporter/notifier legally must make the report/notification as soon as is reasonably practicable after forming the suspicion.</p>

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Term	Definition
<b>Occupational health</b>	<p>Occupational health is an area of work in public health to promote and maintain the highest degree of physical, mental and social well-being of workers in all occupations.</p> <p>Its objectives are:</p> <ol style="list-style-type: none"> <li>1. the maintenance and promotion of workers' health and working capacity;</li> <li>2. the improvement of working conditions and the working environment to become conducive to safety and health;</li> <li>3. the development of work organisation and working cultures that should reflect essential value systems adopted by the undertaking concerned, and include effective managerial systems, personnel policy, principles for participation, and voluntary quality-related management practices to improve occupational safety and health.</li> </ol> <p>The science and practice of occupational health involves several disciplines, such as occupational medicine, nursing, ergonomics, psychology, hygiene, safety and other (WHO 2023).</p>
<b>OHS/OSH</b>	Occupational Health and Safety (OHS), also known as Occupational Safety and Health (OSH), refers to the generic practice of addressing and reducing potential health and safety risks to employees.
<b>Occupational Health and Safety (OHS)</b>	OHS is... 'the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations; the prevention among workers of departures from health caused by their working conditions; the protection of workers in their employment from risks resulting from factors adverse to health'... and safety; the placing of and the maintenance of workers in an occupational environment adapted to their physical and mental capabilities (ILO 2023 ).
<b>Occupational Health Physiotherapy</b>	'Occupational Health Physiotherapy aims to protect, restore and enhance the health and wellbeing of workers, the productivity of work and performance of the workplace' (Harvey et al 2023).
<b>OHS professionals</b>	May include: Occupational Physicians, Occupational Health Nurses, Occupational Hygienists; Occupational Health Physiotherapists, Occupational Therapists, Occupational Psychologists.
<b>Optimum/Optimal</b>	Best or most favourable balance between the needs of people and real- life limitations such as availability of solutions, their feasibility and costs.

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Term	Definition
<b>Participative approach</b>	<p>The participative approach allows the identification of issues to be addressed by key stakeholders. Participative activities can include design reviews, risk assessments, focus groups and quality circles.</p> <p>Participative processes are an excellent way of involving workers and other stakeholders and training them in the practical aspects of workplace problem solving.</p>
<b>Prevention or preventive health care</b>	<p>‘Any action taken to keep people healthy and well, and prevent or avoid risk of poor health, illness, injury and early death. Prevention aims to increase the likelihood that people will stay healthy and well for as long as possible’ (Australian Prevention Partnership Centre 2022).</p> <p><i>Primary prevention</i>— addressing risk factors for illness/ injury before these occur  <i>Secondary prevention</i>— early detection and diagnosis of injury /illness and rapid intervention  <i>Tertiary prevention</i> - limiting the consequences of illness/injury and rehabilitation (Institute for Work and Health, 2015)</p>
<b>Psychophysical factors</b>	<p>These are concerned with the relationship between physical stimuli from the ‘outside world’ and the sensations these produce in the body’s ‘inside’ world. They are measured for various reasons at work in such areas as perceived exertion, the development of effort scales, acceptable weights to be lifted, and the design of chairs and workstations.</p>
<b>Psychosocial factors</b>	<p>Subjective aspects of work organisation and how workers and managers perceive them e.g. career considerations, clarity of the work role, work schedules, workload and work pace, and the social and technical work environment.</p>
<b>Return to Work (RTW)</b>	<p>‘The aim ... is to minimise the impact of work-related injury and illness to help injured workers have a timely, safe and durable return to work.’ (Safe Work Australia 2019)</p>
<b>Risk</b>	<p>The likelihood and consequence of exposure to a potential harm (hazard) contributing to the occurrence of injury or loss.</p>

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<b>Risk Assessment</b>	Process used to determine the likelihood of people being exposed to hazards and the severity of the consequences from that exposure
<b>RTW hierarchy</b>	<p>In some countries there is a preferred process for returning an injured/ill worker to work. The hierarchy below is from Australia (WorkSafe Victoria 2022):</p> <ul style="list-style-type: none"><li>○ same employer, same job</li><li>○ same employer, similar job</li><li>○ same employer, different job</li><li>○ different employer, same job</li><li>○ different employer, similar job</li><li>○ different employer, different job</li></ul>
<b>Safety Management System</b>	‘A safety management system is an organised approach to managing safety, including the necessary organisational structures, accountabilities, policies and procedures’ (Air Safety Support International n.d.).
<b>Stakeholder</b>	<p>A stakeholder is a person, a group or an organisation that has either an interest in, concern for, and/or involvement with the work of an occupational health physiotherapist and the outcomes of this work. The stakeholder may be directly or indirectly affected by this interest, concern or involvement, which may be seen as a gain or a loss. There can be variety of stakeholders and these can differ between countries. They may be clients (individuals to whom the service is directed), customers (those who pay for the service), fellow workers, employers, worker representatives, health and other professionals, insurance and pension companies.</p> <p>The wider community would also be said to be a stakeholder in the sense that it benefits from good occupational health and safety practice and it may also pay for such services through insurance premiums, taxes and other imposts (Adapted from Occupational Health Physiotherapy Australia 2005).</p>
<b>Standard</b>	<p>Something used as a measure, norm, or model in comparative evaluations. (adapted from Oxford Dictionaries)</p> <p>A level of quality or attainment (adapted from Collins Dictionary).</p>
<b>Standards</b>	Documents that set out specifications, procedures and guidelines that aim to ensure products, services, and systems are safe, consistent, and reliable.

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<b>Systems</b>	Systems are the structures that underlie complex situations. A system is a set of interrelated and interdependent parts arranged so that it appears to be and acts like a unified whole (brought together as one).
<b>WHO</b>	The World Health Organization (WHO) is a specialised agency of the United Nations responsible for international public health. It is dedicated to the well-being of all people and guided by science, the World Health Organization leads and champions global efforts to give everyone, everywhere an equal chance to live a healthy life.
<b>Work ability</b>	‘A comprehensive and contemporary (up-to-date) approach to understanding and managing wellbeing in the workplace. Work Ability goes beyond traditional workplace interventions by assisting individuals to manage their own wellbeing, now and in the future, to make sure workers are able to work at their best and retire healthy’ (Australian Government, Comcare 2013).
<b>Work disability</b>	Work disability (WD) is the (partial) inability to engage in gainful employment due to physical or mental illness, resulting in early retirement and/or uptake of disability insurance benefits (Loisel and Anema 2013).
<b>Work</b>	‘Work is any activity performed by persons of any sex and age to produce goods or to provide services for use by others or for own use’ (ILOSTAT, 2019).
<b>Workplace</b>	‘Any place where work is carried out for a business or undertaking and includes any place where a worker goes, or is likely to be, while at work. This may include offices, factories, shops, construction sites, vehicles, ships, aircraft or other mobile structures on land or water (Safe Work Australia n.d.).

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## Biography – Primary Contributor and IFPOHE Executive Committee

### Dr Rose Boucaut

Ed D, MPH, Grad Dip  
Advanced Manipulative  
Therapy, Dip Tech  
Physiotherapy, FACP\*

*\*As awarded by the Australian  
College of Physiotherapists in  
2008*

### Australia



Rose is a Fellow of the Australian College of Physiotherapists and a Specialist Occupational Health Physiotherapist\*. At the University of South Australia, she coordinates the final year Bachelor of Physiotherapy course, 'Work Health and Safety Practice' within Allied Health and Human Performance which gives students an introduction to Occupational Health Physiotherapy practice. During this course physiotherapy students are placed with industry partners in South Australian workplaces to conduct small work health and safety projects.

In 2018 Rose was awarded an Australian Endeavour Executive Fellowship which enabled her to travel to Scandinavia and Thailand to work with colleagues. Part of this travel involved work towards establishing an official subgroup of World Physiotherapy (WP, formerly WCPT) in the field of work health and safety. In 2019 the WP ratified the formation of the International Federation of Physiotherapists working in Occupational Health and Ergonomics (IFPOHE, formerly IFPTOHE) as an official WP subgroup. Rose was elected the inaugural President of the IFPOHE Executive Committee.

On study leave in 2023 Rose visited Kenya and Colombia to help foster cross county comparisons for global standards in Occupational Health Physiotherapy practice that might be used by the profession. She had previously worked on developing Professional Practice standards for Occupational Health Physiotherapy Australia (2003), which were used for practitioner assessment and were integrated into the Australian Physiotherapy Association's Physiotherapy Competence Framework (2023).

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## Biography – Primary Contributor

### Ms Barbara McPhee

AM, MPH (Syd); Dip Phty (Syd); FHFESA; FACP\*; FIEA; CPE

*\* As awarded as awarded by the Australian College of Physiotherapists in 2008*

### Australia



Barbara is a Fellow of the Australian College of Physiotherapists, Specialist Occupational Health Physiotherapist and Certified Professional Ergonomist with nearly 50 years' experience in work health and safety. Over the last 33 years she has worked primarily in mining. She has written books on the prevention of work-related musculoskeletal disorders, whole-body vibration and practical ergonomics as well as numerous papers. She has made numerous presentations at conferences in Australia and overseas.

She currently works as a consultant in Human Factors and Ergonomics and health and safety risk management.

In 2003 helped develop Professional Practice Standards for physiotherapists working in Occupational Health in Australia. These have now been integrated into the Australian Physiotherapy Association's Physiotherapy Competence Framework (2023).

Barbara is a Past President, Fellow and Professional Member of the Human Factors and Ergonomics Society of Australia; a past Board Member of the International Commission on Occupational Health; a Fellow of the International Ergonomics Association; an Esteemed Member of the Australian Physiotherapy Association; and a Fellow of the Australian College of Physiotherapists.

She was appointed as a Member of the Order of Australia (AM) in January 2014 for significant service to physiotherapy as a practitioner in occupational health, and as an author.

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### Ms Tracey Atkinson

BSc Hons, MCSP, HCPC, Ad Cert  
OH, Registered member  
ACPOHE

#### United Kingdom



Tracey is an experienced Occupational Health physiotherapist of 27 years, with a post graduate qualification in Occupational Health Physiotherapy and Ergonomics and has worked in a variety of business sectors.

Her current role is National Occupational Health Physiotherapy Clinical & Governance lead for a large Occupational Health Provider. This involves supporting delivery of services to clients within the public and private sectors, ensuring relevant compliance, education and development of clinicians, supporting on Governance issues and relevant Quality improvement accreditations such as SEQOHS (Safe, Effective, Quality in Occupational Health Services) through the Faculty of Occupational Medicine.

She is also a guest lecturer at several Universities, delivering Occupational Health training to undergraduate physiotherapists and FCP's (First Contact Practitioners) at Masters level.

Tracey has been an executive committee member of ACPOHE (Association of Chartered Physiotherapists in Occupational Health and Ergonomics) in the UK for 8 years as membership secretary. She joined the Executive Committee of IFPOHE in 2023.

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### Professor Vasiliki Sakellari

Physiotherapist, MSc in Ergonomics, PhD in Human Balance

#### Greece



Vasiliki is a Professor at the Department of Physiotherapy of the University of West Attica (UniWA), Athens, Greece and Director of the Postgraduate Program, 'New Methods of Physiotherapy', UniWA.

She is a physiotherapist, holds a master's degree in Ergonomics (University College London) and a doctorate from University of London, Institute of Neurology.

Vasiliki is an Executive Committee Member of IFPOHE (International Federation of Physiotherapy in Occupational Health and Ergonomics), ENPHE UniWA Representative and a member of the Panhellenic Physiotherapist's Association.

She has served as the Director of the School of Health and Welfare Professions of the TEI of Lamia and is Institutional Coordinator of the SOCRATES - Erasmus Program.

She is a full member of the General Assembly ELIDEK and is currently Director of the Center for Technological Research of Central Greece.

Vasiliki has participated in a number of programs including the European Supported Programs: Human Capital and Mobility funded by the Medical Research Council (M.R.C.), London; the FP7 European Program; coordinating the ESPA funded research project McHeELP (Motor control Home ergonomics Elderlies' Prevention of falls); and COST Action CA21122, promoting Geriatric Medicine in countries where it is still emerging.

Her main interests are in Human Factors and Ergonomics and consulting in physiotherapy; Physiotherapy in Geriatrics; and clinical education in Neurological Physiotherapy.

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**Dr Yvonne (de Leeuw) van Zaanen**

Physiotherapist in Occupational Health and Ergonomics (Rbf registered); Msc in Evidence Based Practice; PhD candidate (Return to work after Total Knee Arthroplasty)

**The Netherlands**



Yvonne has been a physiotherapist since 1993 and specialized in Occupational Health and Ergonomics in 1998. She has a Master's degree in Evidence Based Practice (Clinical Epidemiology, 2015) and in 2019, Yvonne received the Dutch Applied Ergonomics Award for her project helping home care workers prevent musculoskeletal disorders.

Yvonne has been president of the Dutch NVBF, (2015) and Vice-President of the International Federation of Physiotherapists working in Occupational Health & Ergonomics (IFPOHE) since it was established in 2019 in Geneva.

She represented IFPOHE in the Lighten the Load campaign 2020-2022 of the European Agency for Safety and Health at Work (EU-OSHA). She delivered a statement at the summit in Bilbao, Spain, shedding light on how physiotherapists in OH&E can support workers with chronic musculoskeletal disorders.

Currently a PhD candidate at Amsterdam UMC, University of Amsterdam, Department of Public and Occupational Health, Yvonne's research explores the return to work and work ability in patients after total knee arthroplasty.

She has been involved in many multidisciplinary working groups of scientific projects and guideline developments because of her overarching goal of integrating work and work-participation in prevention and care for workers facing physically limiting illnesses.

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# Biography – Working Party Member

## Ms Amanda Karolina Alves da Silva

Interdisciplinary Bachelor's Degree in Health - Federal University of Bahia, Brazil

Currently Physiotherapy Student intern (due to graduate 2024)

### Brazil



Amanda is a physiotherapy student at the Federal University of Bahia (Brazil) with a keen interest in Occupational Health Physiotherapy.

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## Biography – Working Party Member

### Ms Sanna Garam

MSc, PT, OMT, OHPT

Finland



Sanna is a Senior Lecturer at Metropolia University of Applied Sciences. She is a physiotherapist, specialized in Orthopaedic Manual Therapy and Occupational Health Physiotherapy. She holds a Master’s Degree in Health Sciences, University of Jyväskylä, Finland. She is a doctoral student at University of Jyväskylä, Faculty of Sport and Health Sciences.

She has an extensive clinical experience in the field of musculoskeletal physiotherapy including work at Finnish Association of Orthopaedic Manual Therapy, and also as a Senior Lecturer at Universities of Applied Sciences. Currently, her work as a Senior Lecturer at Metropolia University of Applied Sciences includes thesis guidance, project work, guidance of Finnish and international students and post - graduate education in Occupational Health Physiotherapy in collaboration with Universities of Applied Sciences in Finland.

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## Biography – Working Party Member

**Ms Pia-Maria  
Haapala**

MNSc, PT, OHPT

**Finland**



Senior Lecturer, Seinäjoki University of Applied Sciences, School of Health Care and Social Work, Seinäjoki, Finland.

Pia-Maria is a Senior Lecturer at the Seinäjoki University of Applied Sciences since 1999. She is a physiotherapist and specialized in Occupational Health Physiotherapist. Her specific expertise relates to supporting the ability and functioning of working age people but she also likes to work with elderly people. She specializes in musculoskeletal physiotherapy and physiotherapy for pain patients. At the Seinäjoki University of Applied Sciences, she coordinates and teaches Musculoskeletal Physiotherapy, Occupational Health Physiotherapy and Physiotherapy for the elderly including balance and muscle strength training courses at the bachelor level. At the post graduate level, she teaches in Occupational Health Physiotherapy courses. She also works on technology and robotics projects, measuring physical workload in the workplace using methods such as motion capture and EMG, and supervises theses.

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## Biography – Working Party Member

### Ms Marika Heiskanen

MSc, PT, OHPT, Dip.MDT

Finland



Marika works as a Senior Lecturer at the Oulu University of Applied Sciences Finland. She is a Specialist Occupational Health Physiotherapist. Her specific expertise relates to supporting the ability of functioning of working age people. She is specialized in physiotherapy for musculoskeletal function and mental health. She holds a Master’s Degree in Health Sciences, University of Oulu, Finland. She is a doctoral student at University of Jyväskylä, Faculty of Sport and Health Sciences.

At the Oulu University of Applied Sciences, she works in education of the Musculoskeletal physiotherapy and Occupational Health Physiotherapy at bachelor level. At the post graduate level, she works in education of Work ability coordinators, Well- being at work, Physiotherapy in Mental Health courses and Occupational Health Physiotherapy in collaboration with Universities of Applied Sciences in Finland. Marika is also instructor of MDT McKenzie method. Marika is board member of the Association of Occupational Physiotherapists in Finland. She is currently also working part-time in a physiotherapy clinic.

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## Biography – Working Party Member

### Mr Shane Meys

BPhy, PGD (Sport and Exercise), MHPrac (Due to complete 2024)

#### New Zealand



Shane is based in Tauranga, New Zealand and is the proud business owner of Work-Life Physiotherapy, engaging with workplaces to optimise injury prevention and management services. He has completed a Post Graduate Diploma in Sport and Exercise and is due to complete his Masters of Health Practice in 2024. His thesis examines medical certification processes and how Occupational Health Physiotherapy can add value to this process.

Shane is enthusiastic about his work in Occupational Health Physiotherapy. He is dedicated to working towards greater awareness of the field and its positive impact at workplaces and for key stakeholders within New Zealand and around the globe. This has motivated him to serve on the Physiotherapy New Zealand Occupational Health Group Committee as well as involvement in National and International working groups.

Shane is also a proud husband and father of two which he regards as his greatest achievement.

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## Biography – Working Party Member

**Ms Claudia Patricia  
Rojas Silva**

BPhy, MOEH

**Colombia**



Claudia is a Physiotherapist with a Master in Occupational and Environmental Health.

She is a health and work practice instructor in the Physiotherapy program at the Universidad del Rosario, Bogotá, Colombia, performing this role in manufacturing and education companies.

Her teaching experience includes subjects such as biomechanical principles and Health and Work.

She is a founding member of the interest group on Physiotherapy in Health and Work in the Colombian Association of Physiotherapy (ASCOFI).

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## Biography – Working Party Member

### **Ms María Trillos Chacón**

Fis., Esp., MOHE  
**Colombia**



Maria is a physiotherapist, specialising in Manual Therapy, and holds a degree of Master of Occupational Health and Environmental Health. She is a Professor in the physiotherapy program at the Universidad del Rosario, Bogotá.

She is a researcher in Health, Cognition and Work and Rehabilitation Sciences in the areas of ergonomics and rehabilitation. She has research and consulting experience in the prevention of musculoskeletal disorders in the working population.

Maria is involved in the academic and educational management in the areas of biomechanics, Manual Therapy and neuro-musculoskeletal physiotherapeutic evaluation and intervention.

Maria is Functional leader of the laboratories of the physiotherapy program and Chair of the interest group of Physiotherapy in health and work of the Colombian Association of Physiotherapy (ASCOFI). Her areas of interest are in prevention of musculoskeletal disorders, education, manual therapy, low back pain and carpal tunnel syndrome.

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## Biography – Final Proof Reader

### **Ms Lucia Tsui**

Master of Business  
(Personal Injury), MACP,  
APAM, APA Occupational  
Health Physiotherapist

### **Australia**



Lucia Tsui is an Australian Physiotherapy Association member, and an Occupational Health Physiotherapist. She is the deputy Chair of Occupational Health Physiotherapy Australia, a national interest group.

Lucia works in the private sector and is passionate about supporting and collaborating with businesses and stakeholders to drive positive change in occupational health, workers compensation and injury and illness management.

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