



Myotherapy Framework & Physical Assessment RPL/RCC Information Sheet

Related Units of Competency

- VU21875 Work within a myotherapy framework
- VU21876 Perform myotherapy clinical assessment

Please Note; *Gaining RPL for Myotherapy Framework & Physical Assessment only covers the requirements specifically related to this cluster.*

*To gain RPL for the FULL units of competency listed above, you will **also** need to satisfy the requirements for Supervised and Non-Supervised Client Consultations requirements.*

Cluster Description:

This cluster describes the skills and knowledge required to work effectively within a myotherapy framework and skills and knowledge required to assess a client's condition in order to provide myotherapy treatment. It focuses on being able to effectively gather and interpret information during an examination and to make an accurate appraisal for myotherapy treatment.

Instructions

Please read the following requirements and tick the applicable box. If you wish to apply for RPL/RCC for this cluster, you **MUST** complete and provide:

- this document
- the relevant evidence you have stated which **MUST** be included with your RPL application
- the specific units of competency RPL applications

Please note: *An RPL/RCC application will not be reviewed without these completed documents. No exceptions.*

1. Gaining RPL (Tick boxes relevant to your application)

In order to gain RPL for this cluster you **MUST** provide the following evidence:

- Relevant transcript & certificate, or
- Resume of applicant outlining previous and/or current work within a Myotherapy practice, and,
- Letter from employer stating the applicant's current job role within the Myotherapy practice

And,

- Submission of thirty (30) client documents including medical history form and client cards (different people presenting with different conditions) with client identifiers blanked out, demonstrating your ability to work at a Myotherapy level with clients with a variety of presenting conditions that include:
 - Working through the Myotherapy framework including gaining relevant information related to the client complaint, differentials, physical assessment, clinical impression, Myotherapy treatment planning, Myotherapy treatment, evaluation, suggestions/recommendations, documentation.
 - Each client must have client identifiers blanked out
 - Corrective exercise program and modified corrective exercise program in the light of observed adaptation responses.
 - At least one (1) client within the above 30 is required to have been treated after referral from another G.P or health professional (referral report to be attached to client forms)
 - At least one (1) client within the above 30 is required to have been referred to a G.P or health professional upon your advice (your referral report to be attached)



- Evidence of continuing professional development and networking activities
- Copy of membership to an Australian professional body that represents massage therapists

2. Practical Evidence Required *(Tick boxes relevant to your application)*

To gain recognition for practical components of this cluster after enrolment you acknowledge that you will be required to demonstrate that you can:

- A practical demonstration of your ability to competently complete a variety of physical assessments at a Myotherapy level that includes a satisfactory level of orthopaedic testing;
 - Postural assessment & Active, Passive, Resisted ROM testing
 - Safety testing including neural testing
 - Flexibility testing
 - Pain provocation testing
 - Testing for specific conditions
 - Advanced clinical reasoning skills
- A practical demonstration to demonstrate your current ability to implement a Myotherapy assessment relevant to the presenting condition, along with working through the full myotherapy framework. This demonstration will assess knowledge of applying clinical reasoning skills by way of a structured approach to determine a differential list followed by a clinical impression relevant to the presenting condition.

3. Acknowledgement

Name: _____

Email Address: _____

- I understand that I **MUST** provide relevant and verifiable evidence to support my claim for RPL/RCC and my application will not be reviewed/approved without this requirement
- I understand I may be required to provide additional information to support my claim for RPL/RCC
- I understand that I may be required to demonstrate my knowledge and skills related to this cluster through the example RPL assessment outlined in this document