

Assessment Requirements for HLTMSG003 Perform remedial massage musculoskeletal assessments

Release: 1

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Modification History

Release	Comments
Release 1	This version was released in <i>HLT Health Training Package</i> release 2.0 and meets the requirements of the 2012 Standards for Training Packages.
	Merged HLTREM503C/HLTREM504C/HLTREM505C. Significant changes to the elements and performance criteria. New evidence requirements for assessment, including volume and frequency requirements. Significant change to knowledge evidence. Minimum clinic hours added. Additional assessor requirements.

Performance Evidence

The candidate must show evidence of the ability to complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the job role. There must be evidence that the candidate has:

- performed the activities outlined in the performance criteria of this unit during a period of at least 200 hours of massage client consultation work
- prepared for and managed at least 60 remedial massage musculoskeletal assessments clients must include males and females from different stages of life with varied presentations
- used remedial massage assessment techniques appropriately, including:
 - discussion
 - muscle strength and length tests
 - observation, including variations of posture
 - orthopaedic tests
 - palpation of prominent bones/structure and phasic and postural muscles
 - ROM tests
 - temperature
- interacted effectively with clients:
 - · clearly articulated information about services, treatment options and rationale
 - engaged clients in decision making

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Knowledge Evidence

The candidate must be able to demonstrate essential knowledge required to effectively complete tasks outlined in elements and performance criteria of this unit, manage tasks and manage contingencies in the context of the work role. This includes knowledge of:

- legal and ethical considerations (national and state/territory) for client assessment:
 - codes of conduct
 - duty of care
 - informed consent
 - mandatory reporting
 - practitioner/client boundaries
 - privacy, confidentiality and disclosure
 - records management
 - work role boundaries:
 - working within scope of practice
 - presenting symptoms that require referral to a medical practitioner
 - · work health and safety
- referral options for practitioners:
 - professional health services including complementary health modalities
 - community resources and support services
 - types and availability of further medical testing
- factors and barriers that may impact on assessment, including:
 - physical
 - psychological
 - cultural
- factors that affect individual health status, including:
 - age
 - gender
 - constitution
 - lifestyle
 - diet
 - personal and medical history
 - values and attitudes
 - balance of rest and activity
 - physical environment
 - social environment
- client information required for remedial massage assessment and the scope and depth of information needed around:
 - client expectations
 - · client history and its components
 - client current state of health

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- · signs and symptoms
 - onset
 - duration
 - location
 - quality and severity
 - non-verbal
- protocols for performing physical massage assessments:
 - environment
 - equipment
 - client privacy
 - client instructions
- remedial massage diagnostic techniques, how and when they are used:
 - discussion
 - muscle strength and length tests
 - observation, including variations of posture
 - orthopaedic tests
 - palpation of prominent bones/structure and phasic and postural muscles
 - ROM tests
 - temperature
- contraindications to treatment and possible indications for referral:
 - weak bone/joint instability
 - neurological dysfunction
 - vascular disorders
 - lack of working diagnosis
 - pain of excessive nature or abnormal responses to treatment
 - patient non-compliance
- anatomy:
 - body systems relevant to massage assessment
 - muscular physiology
 - nervous system, including myotomes, peripheral nerves, nerve impingements (both root and peripheral)
 - integumentary
 - skeletal
 - muscles major muscle actions including individual actions, planes and synergistic groups:
 - temporalis
 - masseter
 - frontalis
 - pterygoids
 - longus colli

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- digastric
- rectus capitis posterior
- · obliquus capitis superior
- obliquus capitis inferior
- splenius capitis
- splenius cervicis
- semi-spinalis capitis
- scalenes
- sternocleidomastoid
- trapezius
- levator scapulae
- latissimus dorsi
- supraspinatus
- infraspinatus
- teres major
- teres minor
- subscapularis
- rhomboids
- · pectoralis major
- pectoralis minor
- serratus anterior
- intercostals
- serratus posterior superior
- · rectus abdominis
- quadratus lumborum
- psoas
- transverse abdominis
- internal/external obliques
- erector spinae
- semispinalis
- multifidus
- rotatores
- gluteus maximus
- gluteus medius
- gluteus minimus
- piriformis
- gemellus superior/inferior
- obturator internus and externus
- quadratus femoris
- quadriceps

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- sartorius
- gracillis
- pectineus
- · tibialis anterior
- tibialis posterior
- peroneals
- flexor digitorum longus
- flexor hallucis longus
- hamstrings
- · adductor magnus
- adductor longus
- popliteus
- gastrocnemius
- soleus
- extensor digitorum longus
- extensor hallucis longus
- deltoid
- biceps brachii
- triceps brachii
- flexor carpi radialus
- flexor carpi ulnaris
- palmaris longus
- pronator teres
- brachioradialis
- brachialis
- extensor carpi radialis
- supinator
- anconeus
- coracobrachialis
- thenar muscle
- skeleton:
 - bones of the body
 - major bony landmarks
 - surface anatomy and palpable bony landmarks
 - bone growth and remodelling
 - bony landmarks pertaining to muscles
- joints:
 - joint classifications fibrous, cartilaginous, synovial (glide, plane, ball/socket, saddle, hinge, condyloid, pivot)
 - joint actions

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- detailed joint anatomy for each major joint (shoulder, hip, sacroiliac, knee, ankle/foot, wrist, elbow, acromioclavicular, sternoclavicular, costal, spine, atlanto-occipital, temporomandibular)
- accessory/secondary/coupled motions of joints
- capsular restrictions and patterns
- physiology:
 - soft tissue:
 - muscle contraction
 - muscle physiology (reflexes, chemistry, proprioceptors)
 - tendons and ligaments
 - fascia
 - hard tissue:
 - bone growth and development
 - · abnormal bone growth
- conditions commonly seen by massage therapists, including:
 - neck, back pain and headache
 - muscle, connective tissue and joint pain
 - arthritis
 - repetitive strain injuries and occupational overuse syndromes
 - postural problems
 - · sports and activity related conditions
 - stress, anxiety and other mood related problems
- treatment planning techniques and considerations

Assessment Conditions

Skills must have been demonstrated in the workplace or in a clinical environment that reflects workplace conditions. The following conditions must be met for this unit:

- use of suitable facilities, equipment and resources, including:
 - health assessment/client consultation forms
 - private consultation area
 - adjustable height massage table
 - towels/sheets for draping
 - oils/balms
 - hot/cold packs
 - bolsters
- modelling of industry operating conditions, including provision of services to the general public
- clinic supervision by a person who meets the assessor requirements outlined below for at least 150 of the 200 hours of client consultation work

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Assessors must satisfy the Standards for Registered Training Organisations (RTOs) 2015/AQTF mandatory competency requirements for assessors.

In addition, assessors must:

- have current clinical experience working as a massage therapist providing services to the general public
- hold practising membership of an Australian professional body that represents massage therapists
- fulfil the continuing professional development requirements of the professional body to which they belong

Links

Companion Volume implementation guides are found in VETNet https://vetnet.gov.au/Pages/TrainingDocs.aspx?q=ced1390f-48d9-4ab0-bd50-b015e5485705

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