1st year placement
During this placement you will be spending the morning on the acute wards at Wodonga Hospital and the afternoon in the Community Rehabilitation Centre (also known as CRC) working with the grade 1 (junior) and grade 2 physiotherapists.

While on the acute ward, you will likely see patients that have been admitted to hospital with chronic lung and heart disease, functional decline, stroke and post-surgical patients. Physiotherapy on the acute ward involves assisting patients with airway clearance and building up their strength and endurance in order for them to return home.

CRC provides interdisciplinary rehabilitation to clients living at home in the Wodonga area. Our team includes physiotherapy, speech pathology, dietetics, social work, exercise physiology, nursing and an allied health assistant. CRC often sees patients that have been discharged from hospital who need ongoing therapy.

Please research the following to prepare for your placement

1. Research the common conditions we see on the acute wards – COPD, CCF, NSTEMI, CVA, pneumonia
2. Refresh your subjective assessment skills. What information is important to ask a patient you are assessing them for the first time?
3. Review gait and balance assessment
4. Consider what exercises might be appropriate for patients on the ward to prevent functional decline.

2nd and 3rd year placements
The second year physiotherapy placements can be in a number of areas including the ward, Rehabilitation, AGEM and CRC. Please confirm the area of your placement and read the explanations as per 4th year.

Notes are written in the SOAP format so please revise this format before you arrive.
4th year placements
Fourth year placements can be MS (see below), mixed, elective or capstone in a specified area. Please confirm the area of your placement with your university and supervisor.

4th year Community Rehabilitation (CRC) placements
You will be completing your placement in the Community Rehabilitation Team (also known as CRC – Community Rehabilitation Centre). CRC provides interdisciplinary rehabilitation to clients living at home in the Wodonga area. Our team includes Physiotherapy, Occupational Therapy, Speech Pathology, Dietetics, Social Work, Exercise Physiology, Nursing and an Allied Health Assistant.

Click here to see the CRC brochure

We see people of all ages at the centre or in their own home for assessment and goal based therapy. We assist with and run group programs such as Cardiac Rehabilitation, Pulmonary Rehabilitation, Falls and Balance Group, and Exercise Rehabilitation Group.

Clients attending the CRC program are generally complex in nature and require a multidisciplinary approach to care. There are several streams of care including General Rehabilitation, Neurological, Cardiac, Pulmonary, Lymphoedema, Upper Limb and Falls Prevention.

After a referral is received each client has a needs/goals based multidisciplinary assessment using the attached forms. Please look at them before you come.

Care Plan

Comprehensive Assessment

FROP com Assessment Form for Falls and Balance Clients

You are likely to be involved in the General Rehabilitation, Neurological, Pulmonary, Cardiac and Falls Prevention streams. This will include undertaking initial needs assessment, initial physiotherapy assessment/treatment and contributing to case reviews and goal setting for each client. Physiotherapy intervention can be either delivered in people’s homes or through the centre.
Within the **general and neurological streams** you will be responsible for providing individual based therapy programs. Consider the following to prepare for the placement.

- Familiarise yourself with common neurological conditions such as stroke, Parkinson’s Disease, brain injury, multiple sclerosis
- Consider what types of client you may see within the general rehabilitation stream
- What outcome measures would you use to assess the neurological client vs the general rehabilitation client?
- How would you structure a functional assessment of the neurological or general rehabilitation client?

Within the **cardiac rehabilitation stream** you will likely be involved with the cardiac rehabilitation group program

To prepare for this program please review the following:

- Clients who may be referred to a cardiac rehabilitation program
- Types of “heart events” STEMI, NSTEMI, coronary artery bypass surgery (CABG’S) valve replacements/repair
- A basic understanding of acute coronary syndrome
- Risk factors for cardiovascular disease
- Australian Cardiac Rehabilitation Association (ACRA) core components of cardiac rehabilitation
- BORG scale, 6 minute walk test
- The basics of adult learning principles
- The basics of motivational interviewing
- The principles of effective chronic disease management

[Click here to see the Brochure for Cardiac Rehabilitation](#)

Within the **falls prevention stream** you are likely to be involved in the Falls and Balance Group. Consider the following questions to prepare for the placement:

- Who would be the target audience for a falls prevention group?
- Are there any exclusions when considering clients for the program?
- What is the usual structure of falls prevention programs?
- What outcomes measures would be useful to assess clients?
- What general exercises could you include in a program?

[Click here to see the Falls Prevention service brochure](#)

Within the **pulmonary stream** you are likely to be involved in the Pulmonary Rehabilitation Group. Consider the following to prepare prior to your placement

- Familiarise yourself with COPD, Asthma and Bronchiectasis as these are the main conditions seen in the group
- What is the usual structure of a Pulmonary Rehabilitation Group?
- What outcome measures are useful in assessing these types of clients?
- Familiarise yourself with the BORG scale and Six Minute walk test
- Browse the [Lung Foundation Website](#) and review topics that are currently included in Pulmonary Rehabilitation Programs
- Research the basics of adult learning and consider how this may be used when running a group such as this.

[Click here to see the Pulmonary Rehabilitation brochure](#)
4th year Musculoskeletal (MS) placements

The MS placement is based in our community health outpatient facility. Your supervisor will be Narelle Trotter who is the grade 2 physiotherapist in charge of the service. There is also a grade 2 physiotherapist who sees paediatric clients on Wednesdays and a rotating grade 1 physiotherapist who works half time in outpatients.

The outpatients service is a really popular service with a long waiting list so it will be great to have you here to help us see extra clients. The service also includes a weekly hydrotherapy session and Fit for Birth class. Fit for Birth runs from 5.30 – 6.30 on Tuesday nights, therefore you will be required to finish work at 7pm on Tuesday nights. Please discuss with your supervisor if you would like to start late on Tuesday or finish at 3pm on another day.

Prior to commencing your placement, it is very important that you review all of your musculoskeletal lecture notes and practice all practical assessments. If you are unfamiliar with common presentations of MS conditions, you will have difficulty generating diagnostic hypotheses based on the information you obtain from your patients during the subjective assessment. It will also make it challenging to know which objective assessments are required to help you prove and disprove your hypothesis to come to a diagnosis.

Please ensure that you are competent with all basic physical assessments.

Inaccurate physical assessments will make it very difficult to accurately diagnose patients. Please note this will be checked by Narelle on your first day of placement to assist in enhancing your learning in the workplace.

This is a very busy workplace and we see a large variety of conditions therefore it is essential that you are well prepared before commencing this placement.
Please see below a list of common presentations that we see in our community health department. This is not an exhaustive list therefore please do not limit your study to these conditions.

- All joint assessments
- Post surgery – rotator cuff repairs, ACL, TKR, THR
- Post fracture
- Arthritis
- Shoulder pain
- Back pain
- Paediatric assessment particularly of development
- Review the hydrotherapy information from university
- Learn and be able to apply the physiological effects of immersion
- Be prepared to apply clinical reasoning skills to all clients including in the aquatic setting

In community health we do not see clients with hand injuries as our community rehabilitation team runs a hand/upper limb clinic. We do still see clients with elbow and shoulder issues.

Please review and be familiar with the below forms and brochures prior to placement

Aquatic Physiotherapy Assessment Form

Physiotherapy General Assessment Form

Physiotherapy Spinal Assessment Form

Fit for Birth brochure
**Rehabilitation placement**

Your placement will occur on the 21 bed mixed inpatient rehabilitation ward.

Case load includes stroke, SCI, MS, other neurological conditions, orthopaedics, amputees and deconditioning.

On a neurological core competency placement we will endeavor to give you predominately a neurological case load.

Senior physiotherapy staff are trained in the Bobath concept so a good introductory text to review would be "Steps to Follow" by Patricia Davies and chapter 14 "Out of Line" is a great resource on Pusher syndrome. Also be familiar with outcome measures in the "Manual of Clinical Outcome Measurement in Adult Neurological Physiotherapy" by Keith Hill.

During your placement you may be involved in hydrotherapy (bring your bathers), group programs, interdisciplinary treatment sessions, team meetings, family meeting and goal setting.
Acute Geriatric Evaluation Management (AGEM) placement

AGEM may be included in a third or fourth year placement.

There are 10 AGEM beds at Wodonga Hospital and is considered slow-stream rehabilitation for clients >65 years old who need further multidisciplinary therapy prior to discharge to the appropriate destination.

Typical patient populations for AGEM include those with deconditioning post acute or long hospital stay, chronic/multiple health conditions (such as COPD, CCF), cognitive impairment, post orthopaedic surgery and falls.

You will see a range of clients however there is a strong emphasis on geriatric management and assessment. It is suggested you revise the following before you come:

- Neurological conditions – e.g. stroke, Parkinsons, MS
- Geriatric management
- Falls and balance assessment and treatment
- Standardized outcome measurements (e.g.: TUG, 10MWT, Step Test, CTSIB, FRT)

Pain Management Program placement

Fourth year electives are occasionally offered by the physiotherapist in the pain management team. This would involve working with the pain management team to assess clients with chronic pain and assist with the residential cognitive behavioral modification and physical reactivation program. The program includes daily exercise, exercise groups and hydrotherapy.
Rural Allied Health Team (RAHT) placement

**RAHT:** Chris Oberson (Mon/Tues) and Jana Porch (Wed-Fri)

As a third or fourth year student you may spend time with the physiotherapist in the RAHT service. We are part of HACC services along with local councils that have Planned Activity Groups (PAG), Assessment teams, home care, personal care, shopping and mowing assistance.

The service is for Victorian older people who are frail and younger people who have a disability. Their carers are also eligible to receive the service.

Clients who are not eligible for this service include those requiring direct treatment for an acute illness, patients 4 weeks post discharge from hospital, residents of aged care facilities or clients covered by TAC (transport accident) insurance.

Click here to see the RAHT brochure

Our Priority is greatest need and/or greatest capacity to benefit, vulnerability of individual to deterioration, effect of delivery on carer, capacity to attain goals and decrease risk of admission.

Area covered are the City of Wodonga, Towong Shire (as far as Corryong and Dartmouth) Indigo Shire (Chiltern, Beechworth, Rutherglen), and the Kiewa valley in the Alpine Shire. This means clients have longer intervals between home visits.

The types of clients seen by the RAHT team are very broad and conditions can be similar to those seen in Inpatient Rehabilitation: e.g. MND (Motor Neuron Disease), Muscular dystrophy, Quadriplegic, incomplete paraplegics, adult Cerebral Palsy, Parkinson’s disease, Multiple Sclerosis and Stroke.

RAHT clients may also require treatment for other conditions or areas such as post fracture, joint replacements, neck or back pain, falls prevention and gait aid trial and prescription.
Women’s Health placement

This elective placement will include time with the three distinct services offering support to women who are going through particular types of conditions. Students will have regular time in each of these areas to provide a very comprehensive learning experience in these unique physiotherapy areas. There is potential capacity to bias towards one area if the student desires (but this must be discussed well in advance to the commencement of placement). Please note that this placement does involve Tuesday evening work also.

For all contact regarding this multi-area placement please call (02) 6058 7400 and speak with Kate or Elise.

Continence Clinic: Anne Patterson (Wed/Thurs)

Patients are referred from many areas (inpatient/post-op, LMO, urologists, gynaecologists) that require specialist assessment of their continence and pelvic floor. This includes a comprehensive subjective assessment and history taking, possibly bladder and bowel diaries, toileting assessments, real-time ultrasound, and digital palpation (internal assessment). Anne will encourage the student to participate in the subjective components of these assessments, and some areas of the objective assessment. Note: students will not be taught nor undertake digital palpation of the pelvic floor on this placement.

Typical conditions seen on placement:
- Bladder incontinence: SUI, Urge, Overflow
- Bowel/faecal incontinence: including urgency
- Vaginal prolapse
- Following 3rd and 4th degree perineal tears (following childbirth)
- Post radical prostatectomy

Useful resources:
- National Continence Helpline 1800 330 066 - 8am-8pm 7 days a week
- www.continence.gov.au
- www.pelvicfloorfirst.org.au
- www.bladderbowel.gov.au

Lymphoedema Service: Kate Dahl (Tues/Thurs)

Lymphoedema therapy involves the management and prevention of lymphoedema in a wide range of conditions. Frequently wound assessment and close liaison with district nursing is involved for these patients. Students will be involved in all areas of this therapy including subjective assessment, objective assessment including limb measuring and bioimpedance testing, garment prescription and fitting, lymphatic drainage and massage.
Typical conditions seen on a lymphoedema placement:

Whilst many conditions are seen in this service, during the fourth year student placement the student will primarily see post-breast surgery patients.

- Axillary dissection and clearance (removal of lymph nodes)
- Mastectomy
- Some lower limb conditions may also be seen

Click here to read the Lymphoedema Service brochure

Maternity Services: Elise Newton (Mon-Fri)

This involves both inpatient and outpatient physiotherapy for women during the childbearing year (ante- and post-natally). Students will undertake at least one morning each week with a Grade 1 physiotherapist to service the maternity ward including post-operative gynaecology patients. The rest of their time will be in outpatients in a musculoskeletal-based setting which integrates many areas including continence, lymphoedema, wound management and lifestyle advice/modification. The primary musculoskeletal bias is on lumbo-pelvic assessment and treatment. Please note that outpatients will be at both Albury and Wodonga Hospitals.

Education is a significant component to this service both as an inpatient and outpatient service, and the student will also undertake various staff and patient education sessions throughout their placement.

All notes are to be completed in the SOAP format.

Typical conditions seen on placement:

- DRAM; diastasis rectus abdominis muscle
- Hysterectomy: TAH, Vag Hysterectomy
- Vaginal repair: AP, urethral slings
- 3rd/4th degree perineal tears: IP education only
- PRPGP: pregnancy related pelvic girdle pain
- Continence
- Pelvic floor and core/TA Ax/Rx
- Thoracic/costovertebral pain/dysfunction

Fit For Birth: Narelle Trotter (Tues evening)

This is an ante-natal exercise and education class for women birthing at Wodonga Hospital. Students will be expected to run this class during their placement including setting up an appropriate exercise circuit, monitoring and modifying for each individual during the session, and providing the education component also. Students are able to negotiate time in lieu for this longer day, and this will be done well in advance of commencement of their placement.

Click here to see the Fit for Birth brochure