

Scope of Practice for Pilates teachers

Level two, three and four teachers registered with the APMA use the Pilates method to work with both healthy populations as well as clients with a broad range of pathological conditions. These Pilates based interventions are designed to improve strength, flexibility, body awareness, decrease falls risk and help correct movement and postural disfunctions. The following list covers the areas that the APMA see as being a reasonable part of professional practice for level 2, 3 and 4 Pilates teachers:

1.1: The provision of pre-exercise screening and assessment tools that determine whether a client is suitable to begin a Pilates based program, with appropriate referral to allied health professionals when required.

1.2: The assessment of movement measures such as strength, flexibility, static and dynamic postures in a range of populations. This includes the ability to identify abnormal or suboptimal movement patterns or posture.

1.3 The supervised provision of a personalised Pilates regime that takes into account any movement dysfunction or limited capacities identified in the screening and assessment of a client to provide a program that is both safe for a client and aims to improve assessed outcomes.

1.4 The provision of education to improve the client's understanding of movement and body awareness to promote wellbeing

1.5 The provision of safe and suitable Pilates programs for clients who have or are at risk of developing musculoskeletal, metabolic or neurological conditions

1.6 The reassessment of movement measures to determine a client's progression when appropriate

Examples of populations Pilates practitioners may work with

The following lists pathological conditions which may be suited to or benefit physically or psychologically from a regime delivered by Pilates instructors. This is under the provision that there is communication with other primary and secondary health providers where appropriate:

2.1 Musculoskeletal disorders: this may include (but is not limited to) sub- acute musculoskeletal injuries, non- specific musculoskeletal pain, non-specific mobility deficits, osteoarthritis, rheumatoid arthritis, osteoporosis

2.2 Neurological disorders: this may include (but is not limited to) multiple sclerosis, stroke, spinal cord injury, acquired brain injury, cerebral palsy

2.3 Fatigue, endocrinopathy and metabolic disorders: such as diabetes mellitus, obesity, chronic fatigue syndrome, fibromyalgia

2.4 Mental health disorders: this may include (but is not limited to) Anxiety, depression, trauma related disorders, psychotic disorders

2.5 Other disorders that impair health or mobility such as cancer, affects of ageing