



**ACCREDITED EXERCISE  
PHYSIOLOGIST RURAL GENERALIST  
PROFESSIONAL STANDARDS**

*Standards Council Approved: August 2023*

# Contents

<b>Accredited Exercise Physiologist Rural Generalist Professional Standards</b>	<b>1</b>
<b>Preface</b>	<b>3</b>
<b>Standards Structure</b>	<b>3</b>
<b>Educational Framework</b>	<b>4</b>
<b>Important Terminology and Concepts</b>	<b>6</b>
Accredited Exercise Physiologist Professional Standards for Accreditation	6
Approach to Care	6
Inclusive Practice	6
Professional Attributes	8
<b>Professional Focus Areas</b>	<b>9</b>
1. Prevention and Client Self-Management	9
2. Chronic Conditions	11
3. Mental Health	13
<b>Glossary</b>	<b>14</b>
<b>References</b>	<b>17</b>

## Preface

The Exercise & Sports Science Australia (ESSA) Accredited Exercise Physiologist (AEP) Rural Generalist Professional Standards describe the **minimum standards** for entry to, and ongoing professional practice as, an Accredited Exercise Physiologist Rural Generalist (AEP RG). This Professional Standards document is a new set of standards as of August 2023.

The AEP RG Professional Standards cover the **core elements** of effective and ethical clinical exercise physiology practice within a regional, rural, and remote context. The AEP RG Professional Standards recognise the complexities and unique tasks and environments AEPs may face in regional, rural, and remote settings and includes (but are not limited to) clinical and non-clinical settings such as policy, management, research, teaching, and education. The AEP RG Professional Standards are designed to be high-level concepts that focus on providing a strong base of transferable knowledge, skills, and reflective practice to support lifelong learning, and adaptability to different and evolving practice contexts as well as the base of evidence. Additionally, the AEP RG Professional Standards highlight the specific learning outcomes required for each professional focus area.

These AEP RG Professional Standards build upon the AEP Professional Standards for Accreditation **[2]** and highlight the specific competencies expected of AEP RGs to function within the full scope of an AEP. In contrast to metropolitan areas where referrals are easily accessible, rural settings may present greater challenges in terms of referring clients to other healthcare professionals. As a result, the AEP RG Professional Standards focus on the requirement for AEP RGs to operate at the outer limits of their practice, adeptly managing challenges and delivering comprehensive care within their capabilities. **The two sets of standards should be read together** when considering the full range of knowledge, skills, attitudes, values, and abilities of an AEP RG. These standards establish the level of safety that the public can rely on, ensuring secure practices, and are integral components of ESSA's self-regulatory structure, complemented by additional standards, policies, and guidelines that AEPs are obligated to follow.

## Standards Structure

The AEP RG Professional Standards document is structured into overarching Professional Attributes which describe the knowledge, skills, attitudes, values, and abilities expected of an AEP RG.

Subsequently, three standards collectively outline the essential practice requirements according to specific professional focus areas. The three standards provided by AEP RG experts are Prevention and Client Self-Management, Chronic Conditions, and Mental Health, and are of equal importance.

Each standard in this document commences with a guiding principle, which encapsulates the expected demonstration requirements for individuals. These principles are elaborated upon in the underlying elements, which provide detailed descriptions of expected professional behaviour through measurable statements. The focus of these professional standards lies in the practical application and transfer of knowledge and skills. Additionally, it is anticipated that the knowledge and skills articulated within each standard's elements will be integrated and applied across the scope of practice of an AEP RG. Furthermore, the standards inherently encompass vital aspects of AEP RG practice, such as effective communication, inclusivity, collaboration, and person-centred care.

Each standard encompasses development objectives and sample outputs, categorised as Levels 1 and 2. Level 1 pertains to the training stage or the fundamental aspects of AEP RG training, while Level 2 corresponds to the developmental stage which involves working autonomously towards full scope of practice.

These standards are preceded by an **Important Concepts** section describing further detail about AEP RG practice to support understanding of the elements and guiding principles in each standard. Key terms are defined in the **Glossary** at the end of the document.

# Educational Framework

The standards incorporate Bloom's taxonomy as a framework to facilitate their implementation. Each of the standards are accompanied by essential learning outcomes that AEPs are expected to achieve when undertaking the necessary education to become an AEP RG. These learning outcomes are designed to assist in the development of education frameworks aimed at establishing a comprehensive training pathway for AEP RGs.

ESSA and the ESSA Standards Council would like to sincerely thank the members of the ESSA AEP RG Professional Standards Working Group, who have made a direct and valuable contribution to the development of the ESSA AEP RG Professional Standards.

**Members of the ESSA AEP RG Working Group:**

- » Mr Mark Liberatore (Chair)
- » Miss Sarah Ludowici (Deputy Chair)
- » Mr John Dennehy
- » Mr Luke Phelan
- » Ms Joyce Yii Li Tan
- » Dr Nicole Gordon
- » A/Prof Nicolas Hart (Standards Council representative)
- » Ms Rachel Tijani (Advisor, Standards - ESSA)
- » Ms Carly Ryan (Manager, Regulations - ESSA)



# Important Terminology and Concepts

## Accredited Exercise Physiologist Professional Standards for Accreditation

Accredited Exercise Physiologists (AEPs) are university-qualified exercise health professionals equipped with the knowledge, skills, and competencies to design, deliver and evaluate safe and effective exercise interventions for people with acute, sub-acute or chronic medical conditions, injuries, or disabilities. Pathology domains covered by the services of AEPs include cardiovascular, metabolic, neurological, musculoskeletal, cancers, kidney, respiratory and pulmonary, mental health, and any other conditions for which there is evidence that exercise can improve the client's clinical status.

AEP Rural Generalists (AEP RG) expand upon the existing abilities of AEPs by providing these services in regional, rural, and remote settings – noting the unique complexities experienced in these locations.

The context of AEP RG practice includes the direct provision of clinical services, however, is not limited to the clinical setting. It includes roles in management, administration, education, research, advisory, regulatory, or policy development; and any other roles impacting the safe, effective delivery of AEP RG services within regional, rural, and remote settings.

AEP RGs apply a person-centred approach to the treatment of individuals across the lifespan from children through to older adults, and people of diverse backgrounds and populations. AEP RGs deliver services in varying delivery modes, such as in-person or telepractice, individually and in group settings.

## Approach to Care

AEP RGs practice according to evidence-based models of care, which consider the whole person and factors that influence their health and well-being, and ability to function and participate at home, school, work, and in the community within regional, rural, and remote settings.

AEP RGs have a focus on interprofessional practice and working within multidisciplinary teams. AEP RGs understand their scope of practice, the roles of other professionals and their scopes of practice, and how all areas must intersect to provide successful whole-person care. AEP RGs demonstrate interprofessional practice and multidisciplinary care by:

- » Developing mutual understanding
- » Communicating effectively
- » Respecting other professionals' contributions and professional scope
- » Collaborating on care plans and programs
- » Evaluating outcomes.

## Inclusive Practice

- » AEP RGs recognise the diversity within rural and remote communities, including Aboriginal and Torres Strait Islander people.
- » AEP RGs develop and deliver safe and inclusive services that consider diversity, and the beliefs, values, and attitudes of their clients. AEP RG's also reflect on their own beliefs, values, and attitudes and how this influences their practice.
- » AEP RGs integrate Aboriginal and Torres Strait Islander people's history, health, well-being, and culture into services including exercise prescriptions and interventions.

## Areas of Rural and Remote Practice

### *Healthy Behaviours*

AEP RGs partner with their clients to support healthy behaviours including movement, physical activity, exercise, and nutrition. They use healthy behaviour and lifestyle change strategies and education to support motivation, adherence, and effective client self-management. AEP RGs work collaboratively with other relevant professionals to assist individuals in making healthy choices.

### *Mental Health*

Mental health is a rapidly growing area of clinical need, particularly within regional, rural, and remote contexts. Research has supported the use of exercise and physical activity as having a positive impact on mental health and people with mental disorders, supporting psychological and emotional well-being. AEP RGs have a unique opportunity to be leaders in this space within rural and remote locations. Factors affecting mental health such as alcohol and other drugs, social isolation, social disadvantage, and long-term physical health conditions are recognised within these standards [1].



## Professional Attributes

An Accredited Exercise Physiologist Rural Generalist can:

1. Adapt practice to address the unique challenges and limited resources often encountered in regional, rural, and remote settings.
2. Apply problem-solving skills to devise innovative solutions in the absence of readily available resources and specialised equipment.
3. Display a high level of self-motivation and initiative to work independently and take responsibility for managing caseloads and professional development in remote locations.
4. Practice person-centred, value-based health care, whilst collaborating with individuals and population groups across the entire health spectrum, to optimise health status, function, recovery, and independence through the prescription, delivery, adaptation, and evaluation of evidence-based movement.
5. Collaborate with and take a multidisciplinary approach, effectively working with other healthcare professionals, community organisations and support networks to enhance patient outcomes in regional, rural, and remote settings.
6. Manage risk effectively by assessing risk capacity, function and applying appropriate risk management strategies.
7. Utilise telehealth technologies, digital communication platforms and external monitoring equipment to facilitate remote consultations, remote monitoring, and ongoing support.
8. Display professional conduct that is consistent with the ESSA Code of Professional Conduct and Ethical Practice [2].
9. Practice in a safe and inclusive manner that is responsive to people of diverse backgrounds and populations, including Aboriginal and Torres Strait Islander Peoples, people with diverse genders, relationships, identities, and sexualities: cultural and linguistically diverse backgrounds; those with a disability; and other groups experiencing inequality.
10. Integrate preventive measures and empower individuals to self-manage their health whilst employing proactive strategies to prevent, treat and manage health conditions.
11. Recognise the significance of mental health in overall well-being and devise innovative approaches and creative techniques to support mental well-being.
12. Exhibit capabilities in managing chronic conditions, employing evidence-based approaches that address the challenges associated with long-term health issues, promoting self-care, and enhancing the quality of life.



# Professional Focus Areas

## 1. Prevention and Client Self-Management

### 1.1 Guiding Principle

An AEP RG empowers diverse clients and populations, including Aboriginal and Torres Strait Islander People, paediatric clients, women, and older adults to proactively manage their health. They facilitate client self-management and cultivate a collaborative partnership by equipping clients with the essential tools, resources, and knowledge to make well-informed decisions regarding their health and fitness in the distinctive context of regional, rural, and remote settings.

### 1.2 Elements of Prevention and Client Self-management

An AEP RG has demonstrated an ability to:

- 1.2.1 Assess their clients using varied and appropriate, evidence-based assessment tools.
- 1.2.2 Develop achievable goals in partnership with clients that are aligned with individual needs, abilities, and interests.
- 1.2.3 Create and apply inclusive, respectful, and effective communication strategies to educate clients on the benefits of physical activity, the risks associated with inactivity and the importance of a healthy lifestyle.
- 1.2.4 Design personalised exercise programs tailored to the client's health status and access to resources.
- 1.2.5 Evaluate the risk associated with medical emergencies and responses.
- 1.2.6 Formulate and apply creative strategies to monitor a client's health status using appropriate data, including the outcomes of physical assessments, functional movement screenings, client-reported data and data gathered from other health professionals.
- 1.2.7 Formulate strategies that consider biopsychosocial factors and rural and remote factors to educate and empower clients to self-manage healthy behaviours.
- 1.2.8 Engage in collaborative partnerships with relevant others including other professionals and the community to gain a comprehensive understanding of prevalent health conditions within the specific setting.
- 1.2.9 Apply technological expertise and leverage tools and digital solutions to elevate practice, maximising client outcomes in rural and remote settings through the integration of resources and innovative approaches.

EXAMPLE	LEVEL 1	LEVEL 2
	Expectations during foundation training	Expectations during developmental stage
<b>Development Objectives</b>	<ul style="list-style-type: none"> <li>» Apply exercise physiology principles to promote health and well-being in diverse populations, including women and paediatric clients.</li> <li>» Develop a foundational understanding of the unique physiological changes and considerations in women's health, including pregnancy, menopause, pelvic floor dysfunction, and chronic conditions in a regional, rural, and remote context.</li> <li>» Conduct comprehensive assessments of the client's baseline health and fitness utilising evidence-based tools.</li> <li>» Develop appropriate individualised care interventions.</li> <li>» Demonstrate application of professional and communication skills to facilitate client self-management.</li> </ul>	<ul style="list-style-type: none"> <li>» Analyse and interpret comprehensive assessments of clients' baseline health and fitness, employing evidence-based tools to identify strengths and areas for improvement.</li> <li>» Demonstrate advanced professional and communication skills to effectively guide and empower clients in self-management, promoting autonomy and facilitating their active participation in decision-making processes.</li> <li>» Develop innovative exercise programs and strategies tailored to women's health needs, considering regional, rural, and remote contexts.</li> </ul>
<b>Sample Activities/Outputs</b>	<ul style="list-style-type: none"> <li>» Monitor and evaluate comprehensive assessments and care programs. Report on changes including progress, regression and/or other information relevant to the management of the client's condition.</li> <li>» Participate in meetings and/or maintain communication with all professionals involved in the client's care.</li> <li>» Identify gaps in knowledge and provide education to the client and their families on specific interventions that support prevention and client self-management.</li> <li>» Create innovative exercise programs tailored to the specific needs and developmental stages of paediatric clients in regional, rural, and remote settings.</li> </ul>	<ul style="list-style-type: none"> <li>» Conduct meetings and ongoing communication with all professionals involved in clients' care, ensuring seamless coordination and integration of services.</li> <li>» Take on leadership roles in developing and implementing health promotion initiatives that empower diverse populations to proactively manage their health in regional, rural, and remote areas.</li> <li>» Critically evaluate research studies and guidelines related to women's health and paediatric care in the context of regional, rural, and remote settings, integrating evidence-based practices into exercise programming</li> <li>» Develop and implement innovative tools and resources, such as mobile applications or online platforms, that support clients in self-managing their health and making well-informed decisions.</li> </ul>

## 2. Chronic Conditions

### 2.1 Guiding Principle

An AEP RG can identify, prevent, treat, and manage non-communicable chronic conditions by designing and delivering health and clinical exercise interventions in regional, rural, and remote settings. An AEP RG evaluates and adapts these interventions considering interactions between desired outcomes, their treatments, and the effects of exercise interventions in managing chronic and complex clinical presentations.

### 2.2 Elements of Chronic Conditions

An AEP RG demonstrates an ability to:

- 2.2.1 Analyse the extent of exercise physiology practice in rehabilitation and return to optimised function environments, while evaluating the application and limitations of common diagnostic tests to inform exercise prescription.
- 2.2.2 Design and deliver safe and effective culturally safe assessments to collect relevant data on their client's health status, injury, and abilities and report on adverse signs and symptoms that may arise during and following exercise.
- 2.2.3 Practise collaboratively and effectively with other health professionals, families, and wider communities to ensure whole-person care is provided to clients with chronic conditions.
- 2.2.5 Formulate strategies to address barriers to exercise compliance through understanding and mitigating factors including psychosocial, cultural, physical, environmental, and financial barriers specific to rural and remote settings.
- 2.2.6 Develop personalised self-management plans for individuals with chronic conditions, incorporating strategies to promote healthy lifestyle choices.
- 2.2.7 Identify and respond to changes in clinical status, co-morbidities, exercise, and functional capacity, between and during exercise sessions and know when to refer to relevant others.
- 2.2.8 Employ behavioural change strategies and revise communication to facilitate mitigation of cognitive, behavioural, and other influencing factors on treatment adherence for clients with chronic conditions.
- 2.2.9 Assess the associated clinical and safety risks and their implications when designing and delivering evidence-based exercise interventions for complex and chronic conditions.

EXAMPLE	LEVEL 1	LEVEL 2
	Expectations during foundation training	Expectations during developmental stage
<b>Development Objectives</b>	<ul style="list-style-type: none"> <li>» Apply foundational knowledge and skills to understand the underlying mechanisms of various chronic conditions prevalent within a specific community.</li> <li>» Utilise assessment techniques, including detailed medical history taking, functional movement screenings, gait analysis, and balance and coordination assessments.</li> <li>» Demonstrate awareness of the importance of engaging with the client's overall healthcare plan, including considerations for diet, medications, and smoking cessation.</li> <li>» Develop an understanding of the scope of exercise physiology practice in rehabilitation and return to optimised function environments.</li> </ul>	<ul style="list-style-type: none"> <li>» Demonstrate leadership by autonomously applying advanced knowledge and skill competencies related to the underlying mechanisms of various chronic conditions, particularly those prevalent within the community.</li> <li>» Assess and address potential risks associated with exercise interventions for clients with chronic conditions.</li> <li>» Demonstrate leadership by mentoring and guiding colleagues in the implementation of comprehensive assessment protocols.</li> <li>» Demonstrate an in-depth understanding of the scope of exercise physiology practice in rehabilitation and return to optimised function environments, including advanced considerations and emerging trends within the community.</li> <li>» Provide education and guidance in reducing risk factors for the rising risk of developing chronic disease and chronic injury such as smoking cessation and hypertension within the specific community.</li> </ul>
<b>Sample Activities/Outputs</b>	<ul style="list-style-type: none"> <li>» Prepare a written summary outlining the key mechanisms and factors contributing to prevalent chronic conditions within the community.</li> <li>» Demonstrate proficiency in conducting a functional movement screening by performing it on a simulated client and submitting a reflective report.</li> <li>» Provide education and guidance on exercises and activities, as well as provide information on safe progressions of exercise and activities, pain management and reducing injury risk.</li> </ul>	<ul style="list-style-type: none"> <li>» Present a portfolio of client case studies highlighting the application of behavioural change strategies and revised communication methods, along with measurable outcomes and client feedback.</li> <li>» Lead a research project investigating the effectiveness and potential risks of exercise interventions for a specific chronic condition prevalent in the community. Present findings to colleagues, highlighting the implications for practice and proposing recommendations for risk mitigation strategies.</li> <li>» Conduct training sessions for colleagues, sharing expertise in conducting assessments accurately and interpreting the results in the context of individual risk profiles.</li> <li>» Engage in a discussion with peers and experts to showcase expertise in the field.</li> </ul>

### 3. Mental Health

#### 3.1 Guiding Principle

An AEP RG has the capacity to identify and screen for mental health conditions. Drawing from their understanding of mental health conditions, co-morbidities, environmental factors, communication, and individual capacity, they are skilled in designing and implementing evidence-based, safe, ethical, and practical exercise interventions for clients who have existing mental health conditions or are at-risk. AEP RGs can monitor factors in a multidisciplinary mental health care team, within the context of a regional, rural, and remote setting.

#### 3.2 Elements of Mental Health

An AEP RG demonstrates an ability to:

- 3.2.1 Create and apply inclusive, respectful, and effective communication strategies to educate clients on the benefits of exercise in reducing symptoms of anxiety and depression, increasing self-esteem, improving cognitive health effects, and impacts of alcohol and drugs.
- 3.2.2 Design and deliver innovative exercise interventions tailored to support the management of mental health conditions on an individual level.
- 3.2.3 Formulate and apply strategies to encourage healthy lifestyle choices such as eating a healthy diet and the importance of staying active.
- 3.2.4 Monitor and provide feedback on progress using a modified communication style to suit the client's needs/clinical status.
- 3.2.5 Practise collaboratively and effectively with other professionals to support a value-based approach to care, including seeking feedback and input to inform decision-making, delegating tasks, and referring to other professionals.
- 3.2.6 Examine barriers and implications for exercise participation and/or progression in individuals living with or at risk of mental health conditions such as sociocultural, and economic factors and formulate mitigation strategies.

EXAMPLE	LEVEL 1	LEVEL 2
	Expectations during foundation training	Expectations during developmental stage
<b>Development Objectives</b>	<ul style="list-style-type: none"> <li>» Examine the core principles of mental health legislation, standard diagnostic criteria major classifications of mental health, pathological and pathophysiological bases for mental health, cardiovascular and metabolic co-morbidity presentations, diagnostic, screening, and outcome tools, and standard treatments and therapies.</li> <li>» Identify and respond to changes in clinical status inter and intra session including behaviours non-conducive to exercise participation and/or progression, emergency response triggers including actual or perceived risk of harm to self, medication and/or substance misuse, co-morbidities and exercise and functional capacity changes.</li> <li>» Explain the different roles of health professionals in delivering multi-disciplinary care to clients with mental health conditions.</li> </ul>	<ul style="list-style-type: none"> <li>» Demonstrate leadership by mentoring and guiding other professionals in implementing effective communication strategies.</li> <li>» Demonstrate leadership by coordinating and overseeing interdisciplinary teams to deliver integrated care.</li> <li>» Demonstrate leadership by advocating for policy changes and implementing innovative approaches to address barriers and promote equitable access to exercise.</li> </ul>
<b>Sample Activities/Outputs</b>	<ul style="list-style-type: none"> <li>» Develop and deliver personalised educational sessions to clients, providing them with information on how exercise can positively impact their mental health. Use visual aids and practical examples to facilitate understanding and engagement.</li> <li>» Collaborate with mental health professionals such as, but not limited to, psychologists and/or psychiatrists, to develop integrated care plans.</li> <li>» Develop customised exercise programs with clients with mental health conditions, focusing on exercises that are suitable for their abilities and preferences. Provide detailed instructions and recommendations for exercise frequency, duration, and intensity.</li> </ul>	<ul style="list-style-type: none"> <li>» Lead a training workshop for other professionals in the field, sharing advanced communication techniques and their application in promoting exercise for mental health. Provide practical examples and case studies to guide participants in incorporating leadership skills into their client interactions.</li> <li>» Conduct comprehensive assessments and interviews with clients to identify the specific challenges they face in engaging in exercise. Based on the findings, create personalised action plans that include practical strategies and resources to overcome barriers related to sociocultural and economic factors.</li> <li>» Take a leadership role in a multidisciplinary team, collaborating with mental health professionals, nutritionists, and physical therapists to design and implement individualised exercise programs for clients with complex mental health needs. Facilitate regular team meetings to ensure effective communication, coordinated care, and optimal client outcomes.</li> </ul>

# Glossary

<b>Biopsychosocial</b>	Practice is informed by biological, psychological, and social factors and their complex interactions in understanding health, illness, and healthcare delivery.
<b>Chronic conditions</b>	Health conditions that are persistent and long lasting. They include the commonly reported cardiovascular diseases, cancers, chronic respiratory conditions, chronic musculoskeletal conditions, metabolic diseases, and mental health conditions; some infectious diseases; congenital disorders and other conditions; and disorders or disability stemming from injury [4].
<b>Client</b>	A person, group, or organisation that uses the services of an AEP RG.
<b>Disability</b>	Umbrella term describing health-related functioning impairments, activity limitations, and participation restrictions.
<b>Diversity and diverse backgrounds</b>	Differences among groups of people and individuals can encompass ethnicity, race, gender, socioeconomic status, culture, exceptionalities, language, religion, sexuality, and geographical area.
<b>Equipment</b>	Tools used to deliver services including those used in assessments, exercise equipment, and technology such as software for telepractice, exercise programming, and record keeping.
<b>Evidence-based</b>	Applying the best available research outcomes (evidence) when making decisions about practice. AEP professionals who perform evidence-based practice use research evidence, professional expertise, and client preferences to provide best-practice, person-centred care.
<b>Exercise</b>	A specific type of physical activity that is repetitive and planned to improve or maintain physical activity. Exercise includes various exercise modalities such as endurance, anaerobic, flexibility, resistance, balance, and agility exercises, which can be performed over a range of intensities, frequencies, and durations within a variety of environments.
<b>Full health spectrum</b>	State of health from healthy through to those at risk of developing a health condition, and people with health conditions, a disability, and age-related illnesses and conditions, including chronic, complex conditions.
<b>Health conditions</b>	Diseases, disorders, traumas, and injuries.
<b>Health status</b>	Current state of a person's health at a point in time. Individual One person or a small group of people undertaking an activity as a collective.
<b>Interprofessional practice</b>	Health workers from different professional backgrounds working together with patients, families, carers, communities, and each other to deliver health care.
<b>Interventions</b>	A combination of elements and strategies designed to improve health status and produce behaviour change. AEP interventions may include clinical treatment, exercise prescription, education, advice, and support to achieve a particular outcome.

<b>Mental Illness</b>	A mental illness is a health problem that affects people's thoughts, mood, behaviour, or the way they perceive the world around them. A mental illness causes distress and may affect the person's ability to function at work, in relationships or everyday tasks. Mental illnesses can range from mild disorders lasting only a few weeks to severe illnesses that can be life-long and cause serious disability [5].
<b>Mental Health</b>	The absence of mental illness. A state of psychological well-being.
<b>Paediatric</b>	Relates to a branch of healthcare that deals with children ages 0 - 18.
<b>Person-centred</b>	The approach to communication and interaction with a client, and the planning, delivery, and evaluation of services that is grounded in mutually beneficial partnerships with clients and relevant others involved in the client's health and well-being.
<b>Practice</b>	The individual uses their knowledge and skills as a practitioner in their profession.
<b>Prevention</b>	Approaches and activities aimed at reducing the likelihood that a disease or disorder will affect an individual, interrupting or slowing the progress of the disorder or reducing disability [6].
<b>Regional, Rural And Remote</b>	Encompasses all areas outside Australia's Major cities. Using the Australian Standard Geographical Classification System, these areas are classified as Inner regional, Outer regional, Remote or Very remote [7]. The Modified Monash Model (MMM) can also be used to define whether a location is a city, rural, remote, or very remote. The model measures remoteness and population size on a scale of Modified Monash (MM) category MM 1 to MM 7. MM 1 is a major city and MM 7 is very remote [8].
<b>Rehabilitation</b>	Set of interventions designed to optimize functioning and reduce disability in individuals with health conditions in interaction with their environment [9].
<b>Social and cultural determinants of health</b>	People involved in a client's health and well-being, including but not limited to medical, health and exercise professionals; carers; support workers; and families.
<b>Risk management</b>	Risk management and risk assessment concepts - considerations of the risk of a client's capabilities; environmental considerations including slips, trips and falls, policies and procedures, and infection control/good hygiene.
<b>Standard</b>	The sub-discipline area consists of a guiding principle and elements of professional practice.
<b>Telepractice</b>	Delivery of technology-based exercise and sports science services supporting wellness, prevention, health management, and performance improvement. Settings include health, sport, and education. Telepractice involves the transmission of information using telecommunication technologies including but not restricted to video, telephone, and internet. Telepractice includes telehealth services [10].
<b>Value-based care</b>	The health outcomes that matter to patients relative to the resources or costs required [11].



# References

1. [Consensus Statement on the role of AEPs within the treatment of mental health disorders: A guide for mental health professionals 2015](#)
2. [AEP Professional Standards for Accreditation](#)
3. [ESSA Code of Professional Conduct and Ethical Practice](#)
4. [Australian Institute of Health and Wellbeing: Exploring the Definition of chronic conditions for collective monitoring in Australia 2021 Report](#)
5. [Health Direct](#)
6. [Australian Prevention Partnership Centre](#)
7. [Australian Institute of Health and Welfare – Rural and Remote Australians](#)
8. [Modified Monash Model](#)
9. [World Health Organisation](#)
10. [ESSA Telepractice Standards](#)
11. [Australian Centre for Value-Based Health Care](#)

---

*Disclaimer: This scope is not a description of the level of education, experience, skill, or competency required to carry out practice activities. ESSA has chosen to use a broad, principle-based approach to define the scope of practice of an Accredited Exercise Physiologist Rural Generalist. By adopting this approach, ESSA aims to harness individual competencies, embrace innovative practice, and remain sensitive to changes within the industry environment. The information provided in this document is not intended to be professional advice and is no substitute for professional or medical advice relevant to the user's circumstances and purposes. Individuals must ensure they have the appropriate competencies for all activities undertaken. ESSA does not endorse, warrant, or make any representations in relation to, and does not accept any liability in relation to, the goods and services of those third parties who utilise this document.*