Australian Chiropractic College

SPINE AND PERIPHERAL JOINT HVLA

Policy and Procedure

DEFINITIONS

Terms in this document, for which definitions are not provided in the text or may not be self-evident or for which usage at ACC may differ to that in other higher education institutions are as follows:

Chiropractic Board of Australia (CBA): The statutory body responsible for regulating the chiropractic profession in Australia, including registration standards and public protection, and for appointing the CCEA as the accreditation authority for chiropractic education programs.

Chiropractic Centre: A Service Learning Environment provided by the College, either directly or through a relationship with a third-party authorised by the College, for the provision of chiropractic care by Student Interns under the supervision of Chiropractic Supervisors.

Chiropractic Supervisor: Chiropractors who are contracted or otherwise authorised to supervise and/or assess ACC students within the College's SLEs and WIL environments. In particular within the College's Chiropractic Centres.

Council of Chiropractic Education Australasia (CCEA): The independent accreditation authority appointed by the Chiropractic Board of Australia to accredit and monitor chiropractic education programs, ensuring they meet nationally defined standards for quality, safety, governance, curriculum, resourcing, and graduate competence.

Cultural Safety: Commonly understood as 'an environment that is spiritually, socially and emotionally safe, as well as physically safe for people; where there is no assault challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience of learning together' (Williams, R. 1999). Refer to the College's *Cultural Safety Policy and Cultural Safety Procedure.*

HVLA/HVLAT (High-velocity, low-amplitude Thrust): As defined by Section 123 of National Law, HVLA thrust technique is "any technique delivered by any health professional that involves a high velocity, low amplitude thrust beyond the physiological range of motion, impacting the spine, within the limits of anatomical integrity."

Informed consent: "A person's decision, given voluntarily, to agree to a healthcare treatment, procedure or other intervention that is made, following the provision of accurate and relevant information about the healthcare intervention and alternative options available, and with adequate knowledge and understanding of the benefits and material risks of the proposed intervention relevant to the person who would be having the treatment, procedure or other intervention." Australian Commission on Safety and Quality in Health Care (2022).

Person Responsible/Responsible Person: An individual who is authorised to make healthcare and health-privacy decisions on behalf of a client who lacks decision-making capacity. This includes, where applicable, a parent of a minor client, a legal guardian, or another individual with lawful authority or recognised standing to act on the client's behalf, derived from applicable legislation, court or tribunal appointment,

enduring power of attorney, or accepted clinical and ethical decision-making hierarchies. Such authority is exercised only where the client lacks decision-making capacity and no higher-order directive or instruction of which the College is aware applies.

Service-Learning Environments (SLE): An ACC Chiropractic Centre or other Chiropractic Practicum/WIL Environment where students, under the guidance of Chiropractic or other authorised health professional supervisors develop their knowledge and skills in Chiropractic practice.

WIL (Work Integrated Learning): "any arrangement where students undertake learning in a work context as part of their course requirements. WIL can be undertaken as part of coursework or research training." (Tertiary Education Quality and Standards Agency, 2022) WIL activities may include: professional workplace placements (also known as internships, clinical placements, fieldwork, practicums) whether local, interstate or international, online or virtual WIL (e.g. Telehealth) with real clients or industry input, industry-partnered projects in the classroom that involve industry, community or professional partners, a simulated work environment with industry input, consultation or assessment, or activities in other contexts involving industry or community partners.' May also be synonymous with 'Service Learning'.

PURPOSE

The purpose of this Policy is to establish the College's institutional requirements for the teaching, supervision, and use of spinal and peripheral joint HVLA techniques within College-approved clinical learning environments.

This Policy provides a framework to ensure that the use of HVLA techniques by staff and students:

- prioritises client safety and wellbeing;
- is undertaken only with appropriate informed consent;
- occurs within clearly defined supervision and scope-of-practice boundaries;
- aligns with regulatory, accreditation, and legislative obligations; and
- supports safe, ethical, and professionally appropriate clinical education.

This Policy does not prescribe clinical techniques, diagnostic testing, or treatment protocols. Detailed clinical guidance is addressed through approved clinical procedures, curriculum materials, and clinical education resources.

SCOPE

This Policy applies to all staff, contractors, and enrolled students, and covers all learning and teaching activities and settings, whether on- or off-campus. This includes scheduled classes, 'Outreach' Chiropractic Centres, and approved extra-curricular activities.

The Policy applies to all relevant learning and teaching activities conducted:

- within the College's Chiropractic Centres; and
- within external SLEs or WIL environments approved by the College.

This Policy must be read in conjunction with, and does not replace, the College's:

- Informed Consent Policy and Procedure;
- HVLA for Babies and Children under 12 Policy;
- Cultural Safety Policy and Procedure; and
- other relevant academic, governance, and professional practice policies.

Where there is any inconsistency between this Policy and supporting procedures or educational materials, this Policy prevails.

POLICY

The *Spine and Peripheral Joint HVLA Policy* is aligned with the requirements inherent in HESF (2021), specifically:

3. Teaching (3.1 Course Design: 3.1.3)
5. Institutional Quality Assurance (5.4 Delivery with Other parties: 5.4.1, 5.4.2)
6. Governance and Accountability (6.2 Corporate Monitoring and Accountability: 6.2.1 (a); 6.3 Academic Governance: 6.3.1 (a),(c),(d)
7. Representation, Information and Information Management (7.2 Information or Current and Prospective Students:7.2.2 (c),(d)

Furthermore, it aligns with the CCEA's *Accreditation Standards for Chiropractic Programs and Competency Standards for Chiropractors* (2025), specifically:

- Standard 1Public Safety (1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7)
- Standard 2 Governance and quality improvement (Criteria 2.4, 2.6)
- Standard 3 Program of Study (3.2, 3.5, 3.6, 3.7, 3.8, 3.10)
- Standard 6 Cultural safety (6.1, 6.8, 6.10)
- Universal Competency 1 Practising Professionally (1.1, 1.2, 1.3, 1.4, 1.5)
- Universal Competancy 2 Practising in a culturally safe way (2.1, 2.2, 2.3)
- Universal Competency 3 Communication, Collaboration and Leadership (3.1, 3.2, 3.3, 3.5)
- Practice Competency 4 Clinical assessment (4.1, 4.2, 4.3, 4.5)
- Practice Competancy 5 Planning Care (5.1, 5.2, 5.3)
- Practice Competency 6 Implementing, Monitoring and Evaluating Care (6.1, 6.2, 6.3, 6.4).

1. Authorisation to Use HVLA Techniques

Spinal and peripheral joint HVLA techniques may only be taught or utilised within College-approved SLEs.

1.1 Permitted users

HVLA techniques may only be undertaken by:

- enrolled students undertaking approved learning and teaching activities; and
- Chiropractic Supervisors authorised by the College.

1.2 Supervision requirements

Students must not perform HVLA techniques except under the direct supervision of an authorised Chiropractic Supervisor.

Students must not independently determine the appropriateness, timing, or application of HVLA techniques and must comply with supervisory direction at all times.

2. Safety and Risk Management

The use of HVLA techniques must prioritise client safety and minimise foreseeable risk.

2.1 Preconditions for use

HVLA techniques must not be undertaken unless:

- a working basis for care has been established;

- informed consent has been obtained; and
- no known contraindications are present.

2.2 Regulatory and professional constraints

HVLA techniques must not be used where their application is restricted or prohibited by:

- the Chiropractic Board of Australia;
- relevant professional standards or guidelines; or
- accreditation or legislative requirements.

This includes, but is not limited to, restrictions on the use of HVLA techniques in specific populations, such as infants and young children.

2.3 Risk identification and management

Risks associated with the use of HVLA techniques must be identified, managed, and escalated in accordance with approved College procedures and professional practice requirements.

3. Informed Consent

Informed consent is mandatory prior to the use of spinal and peripheral joint HVLA techniques.

3.1 Consent requirements

Consent must be obtained and documented in accordance with the College's Informed Consent Policy and Procedure.

3.2 Additional consent considerations

Additional consent requirements apply where specified in other College policies, including where the client is a child or requires a Responsible Person.

4. Supervision and Professional Responsibility

Chiropractic Supervisors retain responsibility for the oversight of HVLA use within SLEs.

4.1 Supervisor responsibilities

Chiropractic Supervisors are responsible for:

- determining whether HVLA techniques are appropriate within the learning context;
- ensuring students practise within their level of training and competence; and
- intervening where safety, professional standards, or policy requirements may be compromised.

4.2 Student responsibilities

Students must:

- comply with supervisory direction; and
- cease or refrain from HVLA techniques where directed by a Chiropractic Supervisor.

5. Cultural Safety and Professional Conduct

All staff and students must conduct Chiropractic practice in a manner that promotes Cultural Safety.

5.1 Respectful practice

HVLA techniques must be applied in a manner that respects client dignity, autonomy, and wellbeing.

5.2 Professional boundaries

HVLA techniques must not be used in a manner that is coercive, inappropriate, or inconsistent with professional, ethical, or institutional standards.

6. Compliance and Breaches

Compliance with this Policy is mandatory.

6.1 Breach management

Any breach of this Policy may result in action in accordance with the College's:

- Code of Conduct;
- Staff Performance and Disciplinary Policy and Procedures;
- Student Grievance and Appeals Policy and Procedures; and
- other relevant governance instruments.

PROCEDURE

1. Preconditions for Chiropractic Practice Using HVLA Techniques

Prior to the use of spinal and peripheral joint HVLA techniques within an SLE, the following requirements must be met.

1.1 Authorisation and supervision

HVLA techniques may only be undertaken:

- within a College-approved SLE; and
- under the direct supervision of an authorised Chiropractic Supervisor.

Students must not independently determine whether HVLA techniques are appropriate and must act only in accordance with supervisory direction.

1.2 Informed consent

Informed consent must be obtained prior to the use of HVLA techniques and documented in accordance with the College's Informed Consent Policy and Procedure.

Where additional consent requirements apply under other College policies, including but not limited to children and adults who require a Responsible Person, those requirements must be met prior to proceeding.

2. Assessment and Risk Considerations

2.1 Identification of contraindications and restrictions

Chiropractic Supervisors must ensure that:

- relevant contraindications and regulatory restrictions have been considered; and
- HVLA techniques are not undertaken where their use is restricted or prohibited.

The identification and management of contraindications must occur in accordance with approved College procedures and professional practice requirements.

2.2 Ongoing review

Relevant information must be reviewed at each interaction to identify any change that may affect the appropriateness of HVLA techniques.

Where new information gives rise to safety concerns or regulatory restrictions, HVLA techniques must not be undertaken.

3. Documentation

3.1 Record keeping

The use or non-use of HVLA techniques, including consent and supervisory oversight, must be documented in accordance with College record-keeping requirements.

3.2 Accuracy and completeness

Documentation must be accurate, timely, and sufficient to support learning, supervision, quality assurance, and risk management processes.

4. Adverse Events and Incident Management

4.1 Immediate response

Any adverse event or unexpected outcome associated with the use of HVLA techniques must be managed promptly and appropriately under the direction of the supervising Chiropractic Supervisor.

4.2 Reporting and escalation

All incidents must be reported and escalated in accordance with the College's:

- Work Health and Safety Policy and Procedures; and
- Critical Incident Policy and Procedures.

5. Reference to Supporting Documents

Detailed guidance relating to:

- risks and side-effects,
- assessment processes,
- contraindications,
- supervision expectations, and
- Chiropractic practice techniques

is contained in approved procedures, clinical education manuals, and curriculum materials and does not form part of this Procedure.

IMPLEMENTATION and MONITORING

1. Implementation

This Policy and associated Procedure will be implemented through:

- staff induction and ongoing professional development processes;
- student orientation and learning and teaching activities relevant to Chiropractic practice within SLEs; and
- briefing and induction processes for Chiropractic Supervisors engaged by the College.

Staff and students will be advised of their obligations under this Policy and Procedure and of the requirement to comply with related College policies and procedures.

2. Monitoring and Quality Assurance

Compliance with this Policy and Procedure will be monitored through:

- supervision and oversight within SLEs;
- routine quality assurance and review activities;
- incident reporting and review processes; and
- relevant academic governance and risk management committees.

Any identified risks, breaches, or systemic issues will be managed in accordance with the College's quality assurance, academic governance, and risk management frameworks.

DELEGATED AUTHORITY

1. Responsibility for Implementation

The implementation of this Policy and associated Procedure is delegated to the Program Coordinator – Chiropractic Practice, under the authority of the College's senior executive governance arrangements.

The Program Coordinator – Chiropractic Practice is responsible for:

- ensuring this Policy and Procedure are implemented within College-approved Service Learning Environments;
- ensuring staff, students, and Chiropractic Supervisors are informed of their obligations under this Policy and Procedure; and
- overseeing compliance within learning and teaching activities involving Chiropractic practice.

2. Reporting and Escalation

The Program Coordinator – Chiropractic Practice will:

- monitor compliance, quality, and risk issues arising in relation to this Policy and Procedure; and
- report relevant matters through established quality assurance and academic governance processes.

Any significant risks, breaches, or incidents will be escalated in accordance with the College's risk management, academic governance, and reporting frameworks, including reporting to the appropriate committees and senior officers where required.

3. Limitations of Delegated Authority

Delegated authority under this section does not extend to:

- altering regulatory requirements;
- overriding College policies or procedures; or
- permitting practices that are inconsistent with accreditation, legislative, or professional standards.

POLICY REVIEW

The ACC's *Spine and Peripheral Joint HVLA Policy and Procedure* is normally reviewed every three years.

It is a policy of the ACC that any Policy or Procedure may be reviewed earlier as indicated by internal or external factors (including but not limited to such factors as changes in the guidelines of regulatory authorities, accreditation/registration requirements of the profession, or relevant legislation at state or federal level) as determined the Board of Directors and/or Academic Board.

RELATED LEGISLATION, REGULATORY REQUIREMENTS and REFERENCES

- *Accreditation Standards for Chiropractic Programs and Competency Standards for Chiropractors.* (2025). Council on Chiropractic Education Australasia. https://www.ccea.com.au/standards
- *Informed consent.* (n.d.). Australian Commission on Safety and Quality in Health Care. https://www.safetyandquality.gov.au/our-work/partnering-consumers/informed-consent

RELATED POLICY DOCUMENTS

- Staff Induction and Professional Development
- Marketing, Advertising and Communication Policy and Procedures
- Code of Conduct Policy
- Staff Performance and Disciplinary Policy and Procedures
- Student Grievance and Appeals Policy and Procedures
- Staff Grievance and Appeals Policy and Procedures
- Critical Incident Policy and Procedures
- Work Health and Safety Policy and Procedures
- Clinical Policies and Procedures including: Caring for Children, Informed Consent, Cultural Safety Policy and Procedure.

VERSION CONTROL

Document: A031 Spinal and Peripheral Joint HVLA Policy and Procedure		
Responsible Officers: Program Coordinator – Chiropractic Practice		
Initially Endorsed by: Academic Board		**Date:** 25 July 2023
Reviewed and Approved by: Academic Board		**Date:** 6 May 2026
HESF	3.1 Course Design 5.4 Delivery with Other Parties 6.2 Corporate Monitoring and Accountability 6.3 Academic Governance 7.2 Information for Prospective and Current Students	3.1.3 5.4.1 5.4.2 6.2.1a 6.3.1a 6.3.1c 6.3.1d 7.2.2c 7.2.2d
Version: V2	**Replaces Version(s)**: V1	**Next Review:** March 2029
Nature of change	**May 2026:** Comprehensive review and restructure of the Policy and Procedure to align with updated CCEA Accreditation Standards and Competency Standards (2025), contemporary governance and quality assurance requirements, and current ACC policy frameworks. Revisions include clarification of scope, supervision and informed consent requirements, strengthened cultural safety and risk management provisions, updated terminology and governance structures, removal of detailed clinical technique and testing instructions from the core policy, and improved alignment with related College policies and procedures.	