Injury Management and Prevention Programme

October 2007
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Introduction

The Australian Ballet has formulated an Injury Management and Prevention Programme aimed at protecting the health of dancers, prolonging their careers and preventing injuries that may affect their quality of life after dance.

The Australian Ballet is committed to the health (physical and psychological) and safety of its most precious asset, the dancers. This commitment stems from the Board and extends to all levels of the company. The Australian Ballet has facilitated a change in behaviour over the years, which has directly influenced the culture from one that poses a high risk to health to one that embodies health and wellbeing. As a result, the company has experienced fewer injuries, dancers are recovering faster and morale has increased.

Ballet is a physically and emotionally demanding art form, classified as a high risk occupation. The dancers of The Australian Ballet also endure the pressure of a hectic national and international touring schedule.

The Australian Ballet has adopted a broad multidisciplinary medical approach by employing a Medical Team of dance medicine specialists providing their services to the dancers onsite. This approach has proven to be extremely beneficial in a wide range of applications, from resolving minor complaints to complete resolution of injuries.

The Medical Team’s in-house and external members have worked in consultation with each other to refine the principles and notions of dance medicine at The Australian Ballet. The concepts and practices of the Medical Team are now at a stage where dancers, and therefore the company, are realising the benefits of this extremely effective programme. The company has successfully managed to reverse high injury trends with a profound reduction in injuries to high-risk areas such as the ankle, back and hip.

The highly specialised Medical Team’s planning, training, research and development have evolved into a documented ‘Injury Management and Prevention Programme’, so that the benefits The Australian Ballet has experienced can now be shared with other ballet companies across the world.
The Multidisciplinary Approach

From its inception, The Australian Ballet had a degree of medical support through minimal part-time in-house specialists, who did not tour with the company. The dancers were referred to various physiotherapists and osteopaths in whatever city they were performing; thus treatment was mostly external, difficult to track, of varying quality and not at all centralised.

In 1984, a Sports Physician, who was keen to apply a multidisciplinary sports medicine approach to The Australian Ballet, commenced with the company. The multidisciplinary model, which in previous years had been applied predominantly to the sporting community, was also very appropriate to a ballet company made up of ‘artistic’ athletes. Hence there was a shift towards establishing full-time, centralised, multidisciplinary care, as well as increasing communication between Medical and Artistic Staff. There was an emphasis on both care and prevention in this model.

The most significant move towards implementing this centralised model was the appointment of a full-time in-house physiotherapist in 1997. This was then extended into a fully-fledged risk management programme following the appointment of the current Artistic Director in 2001 and a second full-time physiotherapist in 2002.

An example of the multidisciplinary approach is in the case of an injured dancer, where typically the steps to post-injury rehabilitation would be:

1. An accurate injury diagnosis is achieved through medical or physiotherapy consultation and appropriate investigations.

2. Resolution of the injury is achieved with appropriate treatment, whether surgical, medical or physical. This may also involve modified workload or cessation of training or performance, and include a cross-training regime organised by the Body Conditioning Specialist.

3. The Physiotherapist and Body Conditioning Specialist, working together in consultation with the dancer, design a ballet-specific exercise programme prior to re-commencement of dancing.

4. The Rehabilitation Facilitator works with the dancer in the studio in preparation for a return to class, rehearsal and performances.

5. The Psychologist may work with the dancer to deal with any issues related to returning to work and provide education about self-management techniques.

6. The dancer would have access to the advice and support of company doctors throughout the process.

All steps involve consultation amongst all parties with an aim to treating dancers to the point of complete recovery and equipping them with the knowledge to ensure future prevention.
Today, The Australian Ballet has a highly skilled in-house Medical Team specialising in dance medicine. The Physiotherapists and Myotherapist travel with the company throughout the year to ensure dancers are provided with consistent medical care that is easily accessible. In addition, certain members of the team are former ballet dancers and bring with them experience that is invaluable to this specialised team.

The Medical Team’s goal is to be the leading medical team specialising in dance medicine and dance injury rehabilitation worldwide.

The Medical Team comprises:

**In-house**

**Medical Director**

The Medical Director is a Sports Physician with a long involvement and thorough understanding of dance medicine. The present Medical Director was the instigator of the multidisciplinary approach at The Australian Ballet and, over the many years of monitoring and review, has assisted in building the Medical Team’s care to the standard of excellence at which it currently operates. Based in Sydney, the Medical Director also examines, treats, reviews and provides advice to injured dancers when the company is in Sydney, and is available to offer advice when the company is touring elsewhere. Further, the Medical Director chairs the bi-annual medical meetings and maintains frequent communication and involvement with the Medical Team and Artistic Staff.

**Sports Physician**

A part-time Sports Physician works on-site in Melbourne to provide injured dancers with the required centralised medical assessment, review and/or advice to aid recovery. The primary role of the Sports Physician is to monitor the health and progress of injured dancers, liaise with the Medical Team about any medical issues, potential surgery, treatment regimes, rehabilitation and return-to-work planning. The Sports Physician has an innate knowledge and understanding of dance medicine, including the constant physical and psychological demands placed on dancers. Liaising with all members of the Medical Team facilitates a forum for open communication and informed decision making.

Photograph: Susan Mayes

**General Practitioner**

The General Practitioner works in-house on a part-time basis. The primary role is to enhance the general health and wellbeing of the dancers, including their nutritional and psychological health.
Physiotherapists

This important medical group is headed by the Principal Physiotherapist, who is responsible for the day-to-day operational management of the Medical Team. The current Principal Physiotherapist’s vision for the team is “to enthuse, encourage, empower, achieve”.

The Physiotherapists’ wide-ranging duties include:

- Assessing and treating all injuries sustained by the dancers
- Utilising skills such as joint mobilisation, manipulation, various soft-tissue massage techniques, neuromeningeal mobilisation etc.
- Managing and reviewing the screening process for all dancers
- Establishing rehabilitation programmes that are designed to include dance-specific exercises
- Applying knowledge of dance technique to rehabilitation programmes to ensure prevention of on-going physical dysfunction
- Liaising with and referring to appropriate external health professionals as necessary
- Communicating regularly with the Medical Team and Artistic Staff regarding prevention and ongoing management of dancers’ injuries
- Maintaining clinical notes and preparing reports: weekly status; bi-annual; medical reports for Board meetings
- Managing resources to ensure supplies and equipment are up-to-date
- Co-ordinating research projects related to dance injuries
- Keeping abreast of current trends in preventative dance medical science
- Presenting at conferences as representatives of The Australian Ballet

In addition, the Principal Physiotherapist arranges the provision of ongoing training of the Medical Team.

Photograph: Jeff Busby
Myotherapist

The Myotherapist provides in-house remedial massage and myotherapy for the treatment and management of dancers’ injuries, working alongside the Physiotherapists and Body Conditioning Specialist. The Myotherapist’s duties include:

- Assessing the injured dancer’s condition
- Treating and preventing injuries through the provision of various soft tissue techniques, including remedial, performance enhancing, rehabilitation and relaxation massage
- Utilising other specialised skills such as taping and needling
- Providing rehabilitation advice to prevent ongoing physical dysfunction
- Advising and supervising the dancers’ gym programmes in consultation with the other therapists within the Medical Team
- Communicating regularly with the Medical Team and Artistic Staff about prevention and ongoing management of dancers’ injuries

Body Conditioning Specialist

The Body Conditioning Specialist develops, teaches, assists, and monitors conditioning programmes, including providing instruction in correct use of equipment, specific to the needs of individual dancers. This is achieved by:

- Deconstructing dancer movements to develop movement patterns that prevent or overcome injury
- Designing and implementing preventative programmes
- Collaborating with the Medical Team and Artistic Staff to develop or modify exercises to suit individual dancers’ physical needs or company repertoire
- Educating users of appropriate conditioning material
- Observing, monitoring and documenting progress
- Providing an open and safe environment for dancers to work in

EHS/WorkCover Co-ordinator

An experienced and qualified Environment, Health and Safety (EHS)/WorkCover Co-ordinator is responsible for running the company's health and safety management system and managing WorkCover claims. The duties of this role include:

- Auditing EHS processes to ensure compliance with regulations and policy
- Facilitating reporting and investigation processes to trace causal factors and develop prevention strategies
- Implementing systems and processes to eliminate hazards or reduce risks
- Liaising with members of the Medical Team to ascertain progress of injured workers
- Fulfilling the duties of a Return-to-Work Co-ordinator
External

Most commonly these include General Practitioners, Surgeons, Rheumatologists, Podiatrists and Dieticians, although all areas of medical expertise may be required depending on the medical condition involved.

Psychologists

There are two Psychologists, male and female, available to the dancers. It is considered important that dancers have options when considering psychological treatment, as they are more likely to utilise this service if they feel comfortable with the particular Psychologist. The psychological aspects of being a dancer can often be overlooked. Dancers who perform at an elite level are exposed to the high expectation of performing perfectly in front of hundreds of people. Performance anxiety is not uncommon for dancers in addition to the fitness and production demands that are constant throughout the life of a dancer.

The Artistic Team

An integral part of the multidisciplinary approach, the Artistic Team acts as a "branch" of the Medical Team within the Injury Management and Prevention Programme. Without the support and involvement of the Artistic Team that has evolved over the years, the programme cannot work. Being former dancers themselves, they understand the particular needs, difficulties and rewards of a dance career. The Artistic Team comprises:

Artistic Director

The Artistic Director is closely involved with the programme and actively supports it. This support is essential for the success of the programme. Regular communication with the Medical Team informs the Artistic Director's decision-making about a wide variety of issues, from repertoire and scheduling to weekly management of dancers' workloads. The Artistic Director upholds the notion of workload modification as a means of preventing serious or prolonged injury to the dancer and allowing effective rehabilitation when an injury occurs.

Artistic Staff

The Artistic Staff teach company class and repertoire, and coach individual dancers as required. Being responsible for planning and teaching class each week and warm-up barre during the performance season, they have an active and essential role in implementing the prevention programmes devised by the Medical Team. Their daily contact with dancers also places them in an ideal position to monitor the progress of each dancer and report back to the Medical Team.
Rehabilitation Facilitator

The Rehabilitation Facilitator works one-on-one with dancers who are experiencing discomfort, have sustained an injury or require specific coaching for their technique. The Rehabilitation Facilitator acts as the interface between the Artistic and Medical teams, and the main functions of this role are:

- Screening all new dancers joining the company
- Deconstructing a dancer’s movements to identify the cause of injury and/or to prevent injury
- Setting short- and long-term goals for individual dancers, in consultation with them and the Medical Team, and developing an appropriate programme to meet those goals
- Undertaking individual coaching
- Maintaining records of each dancer’s programme and progress
- Identifying and making contact with alternative rehabilitation methods and providers, e.g. Pilates, Alexander Technique, Feldenkrais Method
- Providing pastoral care to dancers

Dancers

The success of The Australian Ballet’s Injury Management and Prevention Programme relies on the commitment and involvement of the dancers. Though The Australian Ballet has demonstrated full support to the dancers in maximising their wellbeing, it is expected that the dancers also take responsibility for ensuring they are physically fit to perform optimally.
A Culture For Success

A Reporting Culture

The Australian Ballet has successfully facilitated a shift in culture to early reporting of all complaints. A key to injury prevention is early attention to minor musculoskeletal dysfunction such as cramp, fatigue, stiffness or low grade discomfort. Early intervention into these minor complaints or symptoms has proven to reduce incident frequency rates.

The early reporting practice is taught to dancers at The Australian Ballet School (8 to 17 years), the importance of which is further reinforced at The Australian Ballet during the annual Induction process, which is compulsory for all dancers, new and existing. Early reporting is encouraged and supported by the Artistic and Medical teams. Early intervention is the primary means to preventing injury and/or minimising time off work, both aspects being extremely appealing to ambitious and highly-driven ballet dancers.

A Consultative Culture

Consultation between members of the Medical Team, Artistic Team and dancers is frequent and open, and it takes various forms:

- Often a dancer receives treatment from multiple practitioners, in which case all practitioners liaise with each other about the future treatment and progress of the dancer. The dancer is consulted at each stage throughout the preventative and treatment regimes. While the dancers’ contracts allow for discussion between various members of staff, high standards of confidentiality are maintained.

- All participants in the injury prevention programme, including the dancers, are consulted on policy matters that relate directly to their health, safety and wellbeing.

- The dancers have a forum for consultation about general health and safety matters, other than those specifically related to dance, via their EHS Representatives, who have an active role within the EHS Committee.

A Just Culture

The Australian Ballet fosters a culture that is supportive of the dancers’ physical and mental needs. Support of injured dancers by the Artistic and Medical teams stems from their understanding of a dancer's concerns and needs and therefore, injured dancers are nurtured until they are completely rehabilitated.

In the past dancers were reluctant to report injuries so as not to jeopardise performance opportunities. The Australian Ballet has demonstrated to the dancers that reporting injuries does not disadvantage them in any way; on the contrary, everything is done to ensure that dancers are not restricted from their pre-injury status.
Body Image

Ballet dancers are elite athletes often compared to professional football players and Olympic gymnasts, who are required to perform at an optimum level. To accomplish this they must have exceptional fitness, strong and healthy bodies, a balanced diet and good nutrition.

The Australian Ballet has formulated a ‘Body Image and Fitness Support Policy’. The purpose of the policy is to provide a formal and transparent mechanism to deal with dancers who may have eating disorders. The policy was formulated in consultation with a Psychologist, the Medical and Artistic teams and dancer representatives.

The policy stipulates that any concern a dancer has is initially reported to a member of the Artistic Staff, which effectively initiates the support process. A confidential meeting is arranged with the Artistic Director, an Artistic Staff member and the dancer to discuss the concerns and offer support to the affected dancer.

Following this meeting the dancer will be referred to the company’s General Practitioner for assessment and to formulate a plan for a positive outcome in consultation with the dancer. This doctor may refer the dancer to a nutritionist, psychologist and/or rehabilitation coach to provide additional professional assistance. The doctor will continue to monitor the dancer until she/he has completely rehabilitated and achieved the goals outlined during the initial consultation.

Remi Wörtmeyer and Gina Brescianini in Petal Miller Ashmole’s La Favorita
Photograph: Justin Smith
Injury Prevention Programme

Dancers are exposed to multiple risks in every production. There are approximately nine productions and 160-180 performances per year. The company tours for about five months of the year, both nationally and overseas. Few other dance companies tour for as long as The Australian Ballet, nor are they required to travel as far. The company employs 70 dancers who range in age from 19 to 42 years.

Dancers experience an ever-changing workload as each production presents new roles and physical demands. Additional risks are posed by the differing workplaces and performance conditions present at each venue.

To meet these challenges and prevent the risk of injury, The Australian Ballet has developed a comprehensive injury prevention programme. Its key elements are: screening; risk analysis; prevention programmes; communication and on-site facilities.

Screening

All new dancers undergo various forms of screening:

- medical by the Sports Physician and General Practitioner
- musculoskeletal by one of the Physiotherapists
- technique by the Rehabilitation Facilitator

The purpose of screening is to provide the company with necessary medical information about dancers' potential physical weaknesses. This information then becomes the basis for developing individual treatment, exercise and education programmes aimed at strengthening weak areas and improving dancers' potential to cope with the workload.

This information is maintained on the dancers' files and taken into consideration as they take on different roles. Additional periodic screening, particularly of technique, may also occur during the course of a dancer's career with the company.

Photograph: Justin Smith
Risk Analysis

The many risk factors associated with performing ballet at an elite level are continually analysed with a view to developing appropriate preventative strategies. This includes analysis of the choreographic and technical elements of a production as well as the schedule and repertoire allocated for the year ahead. There is also retrospective analysis through injury data collection.

Choreographic Risk Assessment

Analysis of choreographic elements, schedule and repertoire is undertaken by the Physiotherapists, Artistic Staff, Rehabilitation Facilitator, and Body Conditioning Specialist and is used to develop injury prevention strategies. Such strategies include:

- Appropriate training on correct technique and exercise regimes
- Adequate treatment – pilates and physiotherapy
- Encouragement of early reporting of any complaints.
- Adequate rehearsal time allocated to ensure familiarisation with safe work practices
- Monitoring and evaluation – Artistic Staff, therapists and the Rehabilitation Facilitator are constantly screening dancers during rehearsals and performance for any signs of injury as well as the effectiveness of preventative strategies

Technical Risk Assessment

This is managed by the EHS Coordinator and commences at the design concept stage for new productions. Risk assessment at this stage is reinforced by a Design Policy, the purpose of which is to eliminate or minimise risks as early as possible in the design process.

Further risk assessment is conducted following design presentation and during construction and rehearsal phases to ascertain any additional hazards and develop strategies for control. The assessment is reviewed, and modified as necessary, once performances have commenced and prior to the production transferring to a new venue.

Data Collection

Injury data collection informs the prevention programme and guides the company’s quest for continual improvement. Whenever a dancer presents with a condition, whether a minor complaint or more serious injury, it is recorded by the Physiotherapists. This data is collated every six months for presentation at the bi-annual medical meeting. It provides a useful picture of both injury trends and areas for future attention and, as the system has been in place for a number of years, it is also a resource for comparison with earlier repertoire and seasons.
Prevention Programmes

Following on from risk analysis is the development of prevention programmes designed to address specific issues. This can range from site-specific (e.g. calf endurance programme) to group-specific (e.g. young male partnering skills and strengthening) to repertoire-specific.

An example of a repertoire-specific program is the *La Bayadere, Act 2 “Shades”* back program, which was designed to tackle the repetitive arabesque requirements of the opening scene. An education session took place to prepare dancers physically and mentally for the repertoire. The session not only outlined the potential risks associated with this choreography, but also provided prevention strategies by way of pre-rehearsal, post-rehearsal, pre-performance and post-performance exercise programs.

The success of this program was verified by the fact that there were no lost-time back injuries during this production. An added bonus was the increased confidence and empowerment of the dancers, who experienced the tangible benefits of this type of intervention.

Injury prevention exercise programmes are devised by the Medical Team and are instructed by the Body Conditioning Specialist in a session with the dancers at the beginning of the rehearsal period.

Other prevention programmes include the annual graduated return-to-work programme as well as post-performance, in-flight and post-flight recovery strategies.
Graduated Return-to-Work Programme

The graduated return-to-work programme has been in effect for fourteen years. The programme was initially devised by the Medical Team to address the high incidence of stress fractures that had their origin at the beginning of each year due to the sudden onset of workload following the annual holiday break.

Before going on annual leave, the dancers are instructed in a home exercise programme that has been developed for them by the therapists of the Medical Team. The aim is to ensure that general fitness and body conditioning is maintained during the holidays as a measure to prevent injuries during return to work.

In the three days prior to the company's first day back at work, optional conditioning classes are offered to all dancers. The first two weeks of the return-to-work period are then structured carefully to minimise the likelihood of injury.

During the first three days of Week One:
- a full class of low intensity is offered to those dancers who continued to work over the break
- a modified class is offered to the majority who rested
- up to an hour is then available for marking rehearsal, followed by an hour of learning repertoire
- after lunch there are another two hours allocated for marking rehearsals
- the last seventy-five minutes are used for learning repertoire from visual aids and education sessions

During days four and five of Week One:
- full or modified classes are offered
- rehearsals are still relatively short, but of slightly higher intensity
- the end of the day is set aside for non-physical activities as at the start of the week

During the first two days of Week Two:
- a full class including grande allegro is available to all dancers, although they are encouraged to work at their own pace
- rehearsals are longer and more intense
- non-physical activities are scheduled at the end of the day

By the end of the second week, dancers have gradually increased the hours and intensity of their workload to a full day of class and rehearsals.

The education sessions are an important part of this programme, as they cover a variety of health topics. The sessions aim to increase dancers' appreciation of the importance of injury prevention measures and their understanding of current injury management strategies. Topics include nutrition, stress management, recovery strategies, cross-training and cardiovascular training.

The programme has been successful not only in dramatically reducing the incidence of stress fractures, but also in equipping dancers with self-management techniques to improve their wellbeing.
Post-performance Recovery Strategies

Recovery from rehearsal and performance loads is an integral part of maximising performance. Both the mind and the body need to recover and there are many tools available to facilitate this process. The tools utilised at The Australian Ballet include: the use of spa and plunge pool; contrasting hot/cold showers; ice baths and compression garments. In addition, dancers are trained in specific methods of flexibility recovery such as dynamic stretching. Relaxation and leisure pursuits are also encouraged to provide balance to the workload.

Dancers utilising recovery facilities at the Victorian Institute of Sport.
Photograph: Tim Buckley

In-flight and Post-flight Recovery Strategies

A recent initiative by the Medical Team has been to address the adverse effects of air travel on the body. The principal issues covered by this latest prevention program are: swelling of the limbs; immobility; hydration and scheduling.

Research has shown that graduated compression stockings reduce lower leg swelling and the incidence of Deep Vein Thrombosis (DVT). These stockings are provided to all members of the touring company and their use is strongly encouraged. In addition, heel rise foot pump exercises are taught to the dancers, as these exercises have proven to be most effective in activating the calf musculature while sitting, thus preventing pooling of fluid in the legs.

Prolonged immobility in-flight may cause stiffening of joints and adverse stress on the lower back. Dancers are encouraged to regularly walk in the cabin during flight and perform spinal mobilisation exercises to minimise this.
It is widely recognised that hydration should be maintained during flight, and excessive consumption of diuretic beverages such as coffee and alcohol is best avoided. Dancers are informed of the benefits of in-flight consumption of electrolyte-carbohydrate beverages (such as commercially available sports drinks) to assist hydration and prevent blood thickening in the lower legs.

Smart scheduling is a key feature of our post-flight recovery program. Where possible, long-haul flights are scheduled to arrive during daylight to allow exposure to natural light and encourage adjustment to the day-night cycle at the destination. A reduced dance workload is undertaken on the first two days, and an optional light intensity ballet class is offered on the first day after the flight. During these days light intensity exercise, especially in a pool, is encouraged to promote mobilisation and loosening of muscles, joints and ligaments.

Communication

Lines of communication are essential to ensure the effectiveness of The Australian Ballet's Injury Management and Prevention Programme. Communication begins with daily liaison between the Medical Team, Artistic Staff and dancers and a weekly injury report. This report becomes the basis for a weekly medical meeting between the Medical Team and Artistic Staff. The meetings, which are documented, are a forum for discussing the status of dancers and short-term treatment and prevention strategies, including workload modification.

The entire Medical and Artistic teams meet bi-annually to discuss injury data, incident trends, future prevention strategies as well as to monitor and evaluate the effectiveness of current preventative measures. Senior management are involved in these meetings, including the Artistic Director, Executive Director and Director of Operations. This meeting looks beyond the short-term and is a forum for innovative solutions to issues that have arisen in the previous six months.

The EHS Committee meets quarterly and discusses a range of issues, including hazards within the dancers’ working environment in the rehearsal room and on stage. From these discussions the committee develops safe working procedures and communicates them to all relevant personnel. The vision for the company's health and safety management system is "Speaking Up For Safety" and the EHS Committee is a key element in that line of communication.
On-site Facilities

The Australian Ballet has an ever-growing range of facilities used to promote fitness and prevent injuries. These include an in-house exercise studio, travelling exercise equipment and a variety of portable devices located in and around the rehearsal studios. In addition, female dancers are provided with customised pointe shoe fittings.

Exercise Facilities

An exercise studio at The Australian Ballet's Melbourne headquarters is available to dancers, providing them with the opportunity for training and maintenance of cardiovascular fitness. The facilities in the studio have been expanding gradually over time and are reviewed periodically to ensure that the most effective equipment is provided within the available resources.

Exercise bikes are located outside rehearsal rooms for dancers to use between breaks and whilst waiting for rehearsals to begin. Mini trampolines are set up backstage for dancers to warm up and keep muscles warm between Acts. These, along with other fitness equipment, are transported whenever the company tours interstate to assist dancers in the prevention of injury. Other travelling equipment includes Swiss balls, free weights, Theraband and a Pilates Reformer.
A great deal of attention is paid to the use of pointe shoes at The Australian Ballet, as incorrectly fitting pointe shoes have been identified as a pre-disposing factor to injury in female dancers. When a female dancer joins the company, she is fitted for pointe shoes by an expert, in consultation with the Rehabilitation Facilitator, a Physiotherapist and/or a female member of the Artistic Staff. The shoes are then custom-made to specifications designed for maximum comfort and support and minimum risk of injury.

This process is reinforced through education of the dancer in pointe shoe modification and correct performance techniques. The dancers' use of shoes is monitored periodically to ensure that the shoes continue to conform with the company's high expectations for injury prevention.

Repertoire plays a significant role in the wear and tear of pointe shoes, but on average Principal Artists are allocated up to six pairs per week, Senior Artists and Soloists up to three pairs and the Corps de Ballet two pairs per week.
Conclusion

The development of The Australian Ballet's Injury Management and Prevention Programme has evolved over several years, involving all levels of the organisation. The success of the programme extends both from the enthusiasm and commitment of all participants and the desire for continual improvement. The Medical Team regularly formulates innovative ideas and solutions to maintain the health and well-being of its dancers and thereby enhance the company as a whole.

Photograph: Justin Smith