

**An Annual Post-Hire Health Screen for Professional Dancers:
Phase-One of a Preventive Healthcare Program for Professional Dance Companies**

**From the Dance/USA Taskforce on Dancer Health
May 8, 2007**

The Dance/USA Taskforce on Dancer Health

Steven Anderson, MD
Pacific Northwest Ballet

Julia Alleyne, MD
National Ballet of Canada

Boyd Bender, PT
Pacific Northwest Ballet

Ilene Bergelson, HFI
Life Moves Fitness

Shaw Bronner, PhD, PT
Alvin Ailey

Michelina Cassella, PT
Boston Ballet

Erica Coffey, MS, PT
Pittsburgh Ballet Theatre

Julie Daugherty, PT
American Ballet Theatre

Alison Deleget, MSATC
Dance Theater of Harlem

Andrea Dickerson
Dance/USA

Anne Dunning
Dance/USA

Jennifer Gamboa, DPT, OCS, MTC
Washington Ballet

Richard Gibbs, MD (Chair)
San Francisco Ballet

Greg Gilman, ATC, LAT
Texas Ballet Theater/
Metropolitan Classical Ballet

Linda Hamilton, PhD
New York City Ballet

William Hamilton, MD
New York City Ballet/
American Ballet Theater

David C. Johnston, MD
Washington Ballet

Marijeanne Liederbach, MSPT, MSATC, CSCS
Harkness Center for Dance Injuries

Marika Molnar, PT
New York City Ballet

Kathleen Nachazel, ATC
Pittsburgh Ballet Theatre

Julie O'Connell, PT, ATC
Joffrey Ballet / Hubbard Street

Shey Ojofeitimi, PT
Alvin Ailey

Leigh Roberts, PT, OCS
Washington Ballet

Meg Schneider, MS, ATC
Radio City Music Hall

Heather Southwick, PT
Boston Ballet

Elaine Winslow-Redmond, MS, ATC
Radio City Music Hall

Sub-committee on Screening Protocol

(The charge of the sub-committee is the development of a screening tool with guidelines for use.)

Michelina Cassella (Chair), Heather Southwick (Co-Chair)
Steven Anderson, Julia Alleyne, Shaw Bronner, Erica Coffey, Julie Daugherty, Jennifer Gamboa, Mj Liederbach,
Marika Molnar, Kathleen Nachazel, Shey Ojofeitimi

Advisor on Information Technology
Gary Galbraith

**An Annual Health Screen for Professional Dancers:
Phase 1 of a Preventive Healthcare Program for Professional Dance Companies**

CHAPTER HEADINGS:

Members of the Dance/USA Taskforce on Dancer Health.....pg 2

I. Executive Summary; Mission Statement; Primary Recommendationspg 4

II. Annual Post-Hire Health Screen - Primary and Secondary Purposes.... .pg 6

III. Privacy and Confidentialitypg 7

IV. Scope; Format; Timingpg 9

V. Screening Outcomes: Guidelines for Corrective Actionpg 10

VI. Additional Outcomespg 11

VII. Cost of Annual Health Screenpg 12

VIII. Pilot Screening and Feedback Survey from Dancerspg 13

IX. Summarypg 14

Appendices:

1. Letter from AGMApg 16

2. The Screening Toolpg 17

3. Guidelines for Performing the Screeningpg 27

I. EXECUTIVE SUMMARY; MISSION STATEMENT; PRIMARY RECOMMENDATIONS

EXECUTIVE SUMMARY:

In the winter of 2005, the Dance/USA Managers Council requested that the Taskforce on Dancer Health explore and make recommendations on preventing injury and illness in professional dance. Specifically, the Taskforce was asked to pursue the subject of screening. Over a series of meetings, *the Taskforce unanimously concluded that the most important step that companies can take to improve dancer health is to screen dancers for risk factors that contribute to injury and illness, and to counsel each dancer and recommend interventions based on the screening information.* Health screening at appropriate stages in life is a universally accepted practice and is the heart of preventive medicine today. Preventing injury and illness is vastly preferable to treating problems after they have occurred. Because professional dancers are at high risk for physical injury, emotional stress and nutritional imbalances, the Taskforce urges professional companies to incorporate this preventive strategy into their annual routine.

MISSION STATEMENT:

The mission of the Dance/USA Taskforce on Dancer Health is to maintain the health and safety of professional dancers.

COMPOSITION OF THE TASKFORCE:

The Taskforce is composed of the medical personnel from many of North America's leading companies and dance medicine practices. Members include physical therapists, company physicians, psychologists, athletic trainers, nutritionists, massage therapists, Pilates trainers and other experts in the field of dance medicine. Many are former dancers and most have long experience in treating injury and illness in dancers. Importantly, the Taskforce is an independent body whose chief concern is the welfare of the dancers. The Taskforce does not represent the artistic or administrative branches of companies.

PRIMARY RECOMMENDATIONS:

1. *An Annual Post-Hire Health Screen for Professional Dancers*
2. *Associated Protocols* which are essential for the screening to be effective in protecting dancer health and practical in the setting of a professional company.
3. The Taskforce firmly believes that the entire screening tool and associated protocols should be implemented.

SECONDARY RECOMMENDATIONS:

To investigate additional elements of a comprehensive injury prevention and management program. It is important to note that the Taskforce views the Primary Recommendation for an *Annual Post-Hire Health Screen for Professional Dancers* as the *first phase* in pooling our collective knowledge to improve health in the field of dance.

WHY FOCUS ON PROFESSIONAL DANCERS?

The Taskforce recommendations are for professional companies, but in no way do they preclude the need for good health measures at the earliest stages of dance training. The reason that the Taskforce has focused on professionals is because an organization such as Dance/USA provides a mechanism to reach all professional companies. By bringing the head executives of all companies together, it is possible to effect an industry-wide change that can improve the health of all professional dancers. Because professional companies are the most visible and are the leaders in dance, they will set standards that filter down to students and schools of dance.

Secondly, the *time is right* to bring prevention into professional dance. Similar to trends seen in all of society, dancers today have more concern for lifelong good health and are more accepting of preventive measures (they see beyond just “making it” in professional dance). At the same time, company executives have expressed an interest in prevention and a willingness to help with preventive measures.

II. An Annual Post-Hire Health Screen;* Primary and Secondary Purposes

1. **Purposes:** There are both Primary and Secondary Purposes for an annual post-hire health screen:
 - i. **The Primary Purposes** of the screening should be **mandatory** and are:
 - A. To detect potentially life-threatening or disabling medical or musculoskeletal conditions that may limit a dancer's safe participation.
 - B. To detect medical or musculoskeletal conditions that may predispose dancers to injury and/or illness during their season.
 - ii. **The Secondary Purposes** of the screening are **essential** and are:
 - A. To determine the general health of the dancers
 - B. To assess the fitness level of the dancers
 - C. To counsel the dancers by creating intervention recommendations based on the screening information.
 - D. To utilize a standardized screening tool and associated protocols to assess dancer health.
2. **The Taskforce firmly believes that the entire *Screening Tool* and the recommended protocols be implemented.**

***(The *Screening Tool* and *Guidelines for Performing the Screening Assessment* are included as Appendices No. 2 and No. 3.)**

III. Privacy and Confidentiality

It is essential that the dancers have confidence in the privacy and confidentiality of the information gathered in a health screening. To that end, the Taskforce on Dancer Health recommends that a set of guidelines ensuring privacy and confidentiality be required for all offices conducting health screenings. The guidelines are based on the **Privacy and Security** portions of the new **Federal HIPAA** regulations.

HIPAA is an acronym for the *Health Insurance Portability and Accountability Act of 1996* which are regulations mandated by the Federal Government for all medical entities that electronically transmit patient billing and/or insurance information. Part of the regulations are **Privacy and Security** requirements designed to protect patient information. It is true that many on-site medical spaces in dance companies do not conduct electronic billing and are, therefore, not HIPAA covered entities. However, the basic elements of the privacy and security portions of HIPAA are common sense practices that are already employed in most medical offices. These assurances of privacy and confidentiality should be adaptable to medical spaces in dance companies without undue effort or complication.

Please note that the following privacy and security specifics are in regard to the recommended *Annual Post-Hire Health Screen for Professional Dancers* which is designed to prevent injury and illness. Workers Compensation injury is a separate category of medical care, and it may have provisions that are specific to Workers Compensation.

PRIVACY REGULATIONS

The Privacy Regulations are intended to protect the dancers from disclosure of medical information to any party whatsoever without the express written consent of the dancer.

1. **Written Policies and Procedures:**
 - a. All Privacy and all Security Regulations should be stated in a written form, available for review by any interested party.
 - b. Copying the policies and procedures that are listed below, and maintaining them in a binder, should be adequate.
 - c. All dance medicine staff should be thoroughly familiar with the written policies and procedures. Each member of the medical team should sign a form acknowledging their understanding of the privacy and security policies. These signed forms can be kept in the policies and procedures binder.

2. **Notice of Privacy Practices:**
 - a. Dancers should receive a copy of a statement informing them of the privacy practices of the medical space. A copy of the privacy practices as stated here would suffice.

3. **Patient Right to Inspect Medical Information:**
 - a. Dancers have the right to inspect and receive a copy of their medical record in regard to the health screen.

4. **Disclosure of Patient Information:**
 - a. Individually identifiable health information may not be used or disclosed unless specifically approved by the dancer. Approval must be given on a *Release of Medical Information Form* signed by the dancer, which specifically states:
 - i. who the information will be shared with.
 - ii. exactly which information is to be shared.

SECURITY REGULATIONS

The Security Regulations provide for physical and electronic protection of patient information in order to prevent unauthorized access. The Taskforce recommends the following procedures:

1. **Written Policies and Procedures:** (Please see Section No. 1 under Privacy Regulations.)

2. **Access to Dancer Health Information:**
 - a. All dancer health information must be kept out of plain sight.
 - b. Files, charts, imaging results and all other dancer information must be stored in cabinets or spaces that are lockable.

3. **Computer Security:**
 - a. Computer screens should not be visible to visitors or other patients.
 - b. Staff members must each have individual passwords, and passwords must be changed on a regular basis.
 - c. Computer passwords should be safeguarded (kept in private places by users); never stored on “sticky notes” on the computer screen or otherwise visible.
 - d. When an employee is terminated, keys should be changed and passwords changed.
 - e. Computers should have a virus checking program.
 - f. Use of personal software should be forbidden on computers that are used for medical and patient business.

IV. Scope; Format; Timing

Scope of the Health Screen for Professional Dancers:

In order for an annual screening of dancers to effectively reduce injury and contribute to better health, it should include consideration of the *physical, emotional, nutritional, and general health* issues that place dancers at increased health risk. The screening tool designed by the Taskforce on Dancer Health is intended to accomplish the following:

1. Reveal pertinent medical history, that if ignored, can be life-threatening or put the dancer at unnecessary risk (i.e. diabetes, cardiac conditions, hypertension)
2. Note previous injury (the leading risk factor for future injury)
3. Uncover biomechanical imbalances that may predispose to physical injury
4. Uncover existing injury that will only get worse if left unattended
5. Uncover increased risk for emotional and nutritional problems

Format for a Dancer Assessment:

1. A check-the-box type medical history (to be completed by the dancer)
2. A check-the-box orthopedic history (completed by the dancer)
3. A dance specific physical assessment(done by the company medical team)
4. A summation of concerns and recommendations for addressing the concerns

It is estimated that the dancers can complete the history portion of the assessment in as little as 15 minutes. The time required for the physical assessment will be variable and will depend on the number of medical personnel who are able to participate. To facilitate the physical assessment, and to standardize the manner in which it is conducted, the Taskforce has included *Guidelines* for the use of the assessment tool.

Timing

The screening should take place early in the company season (in the first week of rehearsal), and should occur yearly as part of the company routine. Furthermore, it should be *a post-hire assessment* to assure all parties that the screening has no relation to employment status, but is solely for the purpose of helping each dancer achieve a safer, healthier and more productive season.

V. Screening Outcomes: Recommendations for Corrective Action

Corrective Action Based on Screening Information

The immediate goal of annual screening is to identify areas of risk for each dancer, then make appropriate recommendations for those areas that need attention. In contrast to group education and lectures, an annual screen followed by recommendations *personally tailored* for each dancer provides a unique opportunity to consider the individual, taking into account the dancer's history of illness and injury and the dancer's individual response to the physical, emotional and nutritional stress of dancing for a living.

There are two important points to emphasize in regard to the outcomes of an Annual Health Assessment:

1. The assessment is a *screening protocol*. Thus, it seeks to utilize a brief assessment to uncover areas of concern which sometimes require more in-depth evaluation. With the exception of concerns that can be addressed with simple advice by the in-house medical team, the screen will often result in a recommendation for specialty input, either to advise corrective action on a defined problem or to further define a suspected problem. In many cases the specialist will already be associated with the medical team (i.e. many companies have existing relationships with an orthopedist or a nutritionist). Examples of such recommendations include, but are not limited to:
 - a. Referral to an orthopedist, physical therapist, or dance medicine specialist to assess a biomechanical imbalance and create a plan for improvement.
 - b. Referral to a dance teacher or ballet master for training issues.
 - c. Referral to a nutritionist for help with weight and eating concerns.
 - d. Referral to a sports or dance psychologist/psychiatrist for concerns regarding stress, anxiety, depression and eating issues.
 - e. Referral to a specialist or physician for smoking cessation.
 - f. Referral to the dancer's primary care physician for general health concerns, or to establish primary care if the dancer has not done so already.
2. The second point to emphasize is that the Annual Health Screen is not meant to replace the need for primary care. On the contrary, an annual on-site assessment in the company facilities is an opportunity to urge the dancers to establish and maintain regular contact with their primary care provider.

VI. Additional Outcomes

In addition to helping individual dancers, an annual screening has enormous potential to provide outcomes that benefit dance companies and the art form in general. Among the benefits are:

1. **Standardization:** With much thought and discussion, the Taskforce has created a dance specific SCREENING TOOL and GUIDELINES FOR PERFORMING THE SCREENING ASSESSMENT to serve as a standardized protocol. The protocol is relatively simple, and the Taskforce is confident that it can be utilized by companies everywhere regardless of size or type of dance. The decision to create one standardized protocol for all companies is based on the premise that *there are basic principles of functional movement common to all dancers*. Likewise, *there are basic aspects of general health, emotional status and nutrition that are common to all people*, and problems in these areas may increase the dancer's risk of injury and ill health. Where a specific type of company differs in the style of their work, additional assessments are encouraged by the Taskforce. In no way do additional tests prevent pooling of the basic standardized data.

Use of a standardized screening protocol by all North American companies, in addition to a standardized system of reporting injury, would provide an invaluable *pool of nameless data* that can increase our general knowledge of injury and illness in dance. The following are only some of the ways that such data can be used.

- a. Establishing normative data on body types and physiologic variants for different forms of dance, thereby having the information to:
 - i. develop parameters that guide young dancers
 - ii. develop strategies for preventing and treating injury
 - b. Recognizing patterns of injury in regard to variables such as
 - i. length of season
 - ii. the timing within the season
 - iii. type of repertoire
 - iv. type of flooring
2. **Reducing the Heavy Financial Burden of Injury:** Reducing injury and improving the health of professional dancers is a “win-win” situation for all parties. It permits more funds to go toward salaries, benefits, and artistic productions rather than the spiraling costs of injury care.

VII. Cost of an Annual Health Screen

The Taskforce recommends that the company bear the cost of the annual assessment. Although this recommendation requires an initial expense by the company, the Taskforce believes it is justified by the potential for:

- A. A reduction in immediate medical expense
- B. Decreased time lost to injury
- C. Decreased disability expense
- D. Increased dancer well-being and contentment.

The assessment should be part of the dancers paid workday. Only in this way will the process become a routinely scheduled activity involving enough dancers to make the assessment effective. Company budgets should also allow for the additional paid time required of the medical teams. Activities that are dependent on volunteerism tend to weaken over time and finally disappear. Similar to other healthcare screening programs, success depends on broad participation and consistency over time.

VIII. Pilot Screening and Feedback Survey from the Dancers

A reasonable first step in *An Annual Post-Hire Health Screen for Professional Dancers* is a **Pilot Screening** with a small number of selected companies. This “trial run”, with a **Feedback Survey from the Dancers**, would provide invaluable information in shaping a standardized program for all companies in North America.

A. Current Pilot Programs: There are three professional companies currently piloting the Taskforce Screen in the 2006-2007 dance season. They are:

1. Alvin Ailey Dance Theater
2. Boston Ballet
3. Houston Ballet
- 4.. Pittsburgh Ballet Theater

B. Essential Elements of a Pilot Program Include:

1. Permission of the dancers, facilitated by:
 - a. Educational briefings promoting the benefits of the screening.
 - b. Assurances of privacy and security.
2. Assuring that the Privacy and Security Regulations are in place:
 - a. Guidelines, *templates* for written Privacy & Security procedures, *consent forms*, etc. are readily available.
3. Acceptance of the cost by the company:
 - a. Paid time for the dancers.
 - b. If needed, extended paid hours for the medical team.
4. Training the in-house medical team in the use of the *Screening Tool*.
 - a. Written *Guidelines* accompany the Screening Tool.
 - b. A *Demonstration Video* is in development by the Taskforce.
 - c. Educational Workshops for, company medical personnel are under consideration by the Taskforce.
5. *Feedback Survey* from the Dancers.
 - a. Having the trust of the dancers is critical to generating a broader program involving all professional companies. A *Feedback Survey* from the dancers of companies participating in the Pilot Program will provide information necessary for general acceptance by all parties.

IX. Summary

The mission of the Dance/USA Taskforce on Dancer Health is to maintain the health and safety of professional dancers. Because professional dancers are at high risk for physical injury, emotional stress and nutritional imbalance, it is the **primary recommendation** of the Taskforce that companies facilitate *An Annual Post-Hire Health Screen* of all dancers at the beginning of each season followed by a program of risk reduction tailored for each dancer based on the information from the screen. Screening all people at appropriate stages has become a universally accepted practice in healthcare and is the heart of preventive medicine today. Preventing injury and illness is vastly preferable to treating problems after they have occurred. The use of screening has saved countless lives in regard to cardiovascular disease and cancer, and it has been proven to reduce physical injury in the workplace.

The Taskforce further recommends that screening professional dancers be carried out with a standardized protocol using standardized forms. The Taskforce has developed a simple dance specific protocol and form. It is designed for use by all companies whether they are large or small and whether they are oriented toward ballet, contemporary or show dance. A standardized protocol assures quality control in the screening process, and it provides an invaluable opportunity for collecting nameless bulk data, facilitating the recognition of norms, trends, and increasing our knowledge of dance in a way that would profit the entire profession.

As with all medical encounters, patient privacy and confidentiality is of paramount importance. Any aspect of the health assessment that could reveal medical information to any other party, including employers and colleagues, should be avoided at all costs. To insure privacy and security, the Taskforce firmly recommends that company medical offices follow HIPAA Privacy and Security regulations.

The Taskforce on Dancer Health makes a **secondary recommendation** *to investigate additional elements of a comprehensive injury prevention and management program.*

It is notable that The Taskforce on Dancer Health is composed of healthcare professionals who have devoted much of their working lives to treating dancers. Many are former dancers, and their collective experience with dance injury and illness is considerable. Their overriding concern is the welfare of dancers, and they represent neither the administrative nor artistic sides of a company. At the same time, most members of the Taskforce have long experience working on-site with professional companies. Their recommendations come with an awareness of the necessities and the realities of life in a dance company.

In March 2007, the Taskforce streamlined the Screen and incorporated the experience of the Pilot Companies into the screening protocols. In the 2008-2009 season, **twenty-two companies** are bringing better health to their dancers by using the Taskforce Screen. In addition, companies are combining anonymous data to provide characteristics, trends and patterns particular to the professional dancer. This is an historic effort; it is the first time ever that information in numbers large enough to be meaningful has been collected on fully professional dancers.

Appendices

- 1. Letter from AGMA**
- 2. The Screening Tool**
- 3. Guidelines for Performing the Screening Assessment**



AMERICAN GUILD OF MUSICAL ARTISTS

1430 Broadway, New York, NY 10018 – 212-265-3687 – Fax: 212-262-9088

Affiliated with the AFL-CIO, Branch of Associated Actors and Artistes
of America

Nora Heiber, National Dance Executive
James Fayette, New York Area Dance Executive

The **American Guild of Musical Artists** applauds the members of the Taskforce on Dancer Health for their tremendous dedication and skill in attending to the health needs of our professional dancers. AGMA is honored to have been asked to participate in the development of a national screening that we know will be beneficial to dancers and the companies for which they work. This partnership has thus far been extremely valuable in helping to form a screening that should prove to be flexible enough to be introduced into dance companies everywhere. It is important to understand that in order to implement a new national standard screening in union companies that would be effective, it would have to be negotiated into collective bargaining agreements on a company by company basis. Although AGMA cannot guarantee that every company will be receptive to such a screening in that the union cannot force its members to accept one, we fully embrace the goals of the Taskforce to create systems that will help to ensure dancer health and longevity. The best way for AGMA to continue to support these efforts is to be involved in the process of development and stewardship of such a program as it continues to move forward. The importance of this project deserves a joint commitment from all parties involved to keep the needs and concerns of the dancers upper most in everyone's minds as we move forward in these efforts. In order for this to be possible, the voice of the dancer must be part of this process. AGMA cannot only help to provide that voice but serve as a bridge for expressing the value of these programs back to the dancers once they are developed. AGMA feels strongly that this is the beginning of a ground-breaking collaborative approach in addressing one of the most vital needs associated with being a professional dancer and want to support the efforts of the Task Force in any way we can.