



UK Redefines Scope of Practice for Physiotherapists

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The United Kingdom's Chartered Society of Physiotherapy (CSP) issued the following open letter based on a Council decision in December, 2010. Note that it establishes an open-ended authority for physiotherapists "...to consider that any reasonable practice could be included within the scope of the profession. This means that where there is benefit to the patient, a body of evidence to support the practice and the individual is competent to carry out the treatment procedure or method, then the CSP will support the activity as being within scope of practice."

Dear Members,

We wish to draw your attention to the recent Council endorsement of a new CSP approach to the interpretation of the definition of the scope of physiotherapy practice. The profession's scope of practice is defined by the royal charter, granted to the Society in 1922, which sets out the four pillars of physiotherapy practice as: massage, exercise and movement, electrotherapy and kindred methods of treatment.

This definition remains unchanged. However, the fourth pillar has been explored thoroughly by the professional practice committee, which recommends a new approach to the interpretation of 'kindred methods of treatment.'

We specifically ask that you consider the implications for your personal professional practice. It is hoped that the new emphasis will support members by facilitating new and innovative practice to be explored safely by chartered physiotherapists.

Council agreed that the scope of practice of physiotherapy should now be defined as. "Any activity undertaken by an individual physiotherapist that may be situated within the four pillars of physiotherapy and that the individual is educated, trained and competent to perform. Such activities should be linked to existing or emerging occupational and/or practice frameworks acknowledged by the profession."

So what does this mean for you?

The first three pillars are straight-forward to interpret. The fourth pillar should now support an individual to consider that any reasonable practice could be included within the scope of the profession. This means that where there is benefit to the patient, a body of evidence to support the practice and the individual is competent to carry out the treatment procedure or method, then the CSP will support the activity as being within scope of practice.

This will allow the CSP to support individual physiotherapists who wish to develop their practice and apply their skills in new roles, while retaining the philosophical basis of physiotherapy that is defined within the royal charter, the curriculum framework and the World Confederation for Physical Therapy definition of physiotherapy.

The PPC will be the final arbiter on scope of practice issues if a formal challenge is received about the nature of physiotherapy. Provided there is substantive evidence of an individual's competence to undertake the role/activity in question and the activity can be shown to be linked in some way to the four pillars of practice, the individual would be covered by their professional liability insurance as working within the scope of the profession.

We would encourage all members to read the new briefing paper, which sets out the detail of this change, and where a clear decision-making pathway is available to assist members, the CSP and the Health Professions Council in determining whether a given or proposed activity is within the scope of practice of the profession and/or the individual.

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