

Policy challenges & opportunities Irish & European perspective

Emma K. Stokes

Senior Lecturer, Trinity College Dublin

Irish Society of Chartered Physiotherapists

ER-WCPT

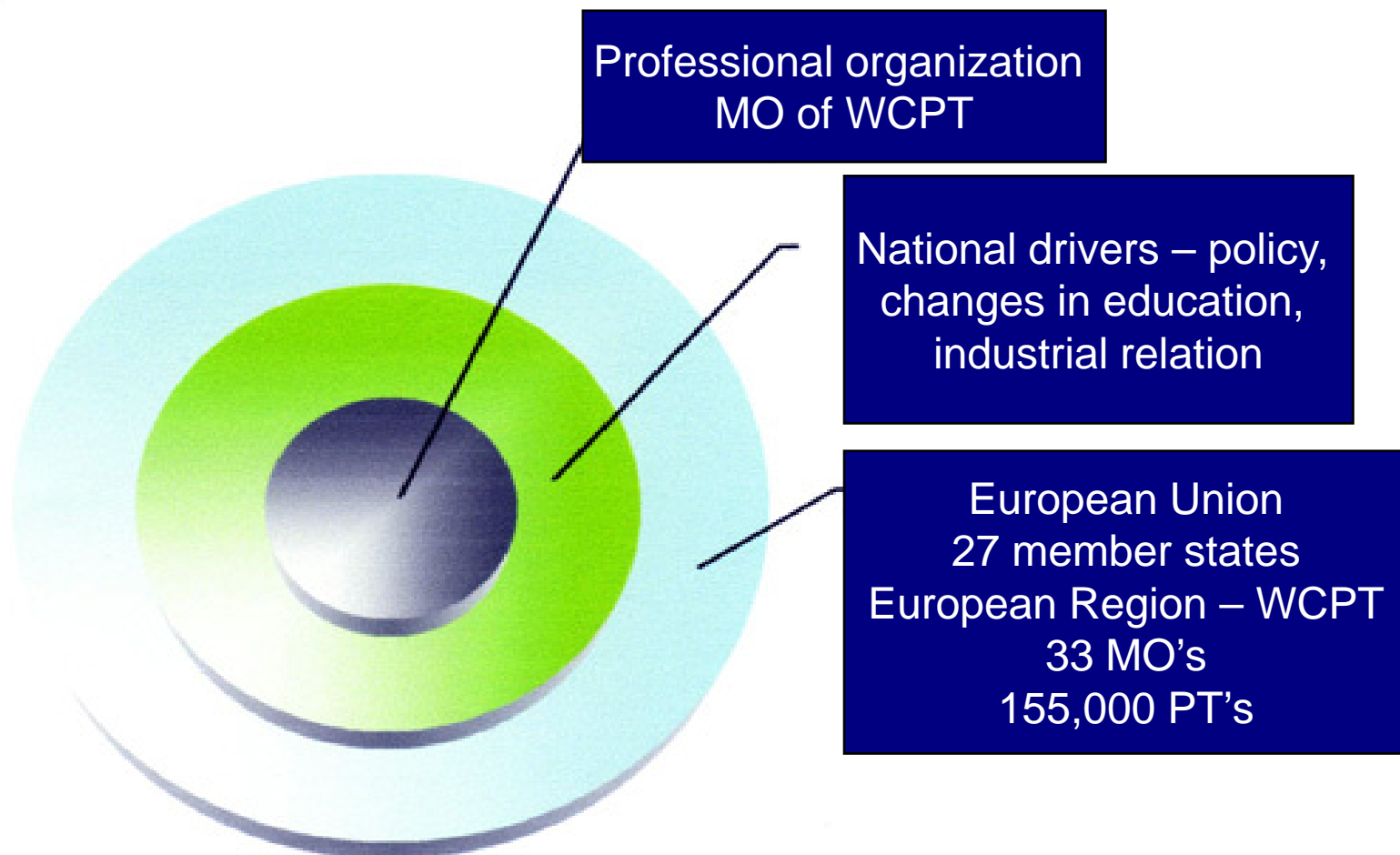
Irish Society of Chartered Physiotherapists

- Shared history with CSP – Irish Branch
- First academic programme, 1904
- Founded in 1983
- Currently has 2128 full members; likely to represent 80% of PT's in Ireland
- 5 full-time staff
- Regulation pending – ISCP Competent Authority for EU legislation
- Equality regulation – all treated like EU member states
- Mix of private & public, for profit and not for profit



European perspective

- EU – 27 member states
- Some, but not all of whom, have direct access
- Directive – temporary provision of service & right of establishment
- Freedom of movement of people & services
- ER-WCPT – 33 MO's
- A number of countries preparing for membership
- Some advanced, others just developing organisations

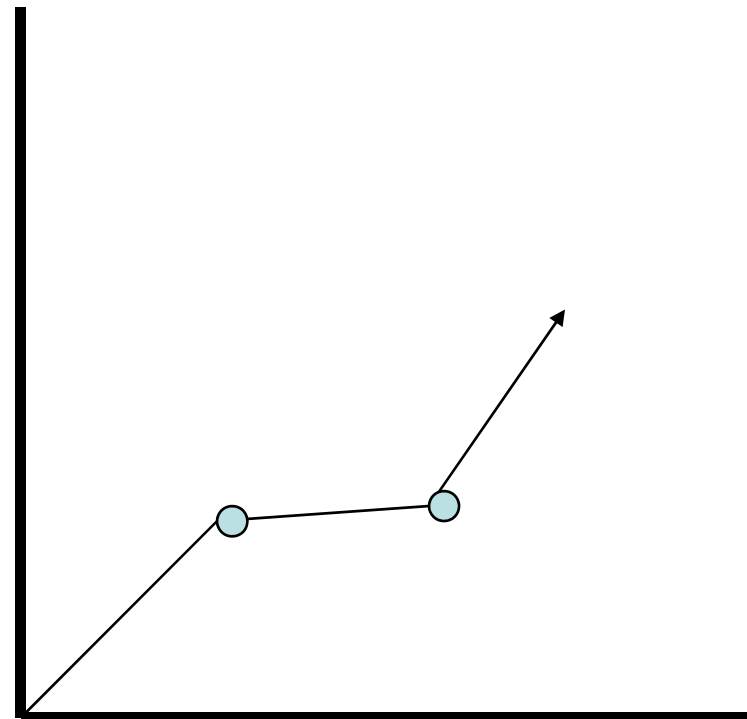


A variety of drivers co-exist which can enable change in practice, exerting different degrees of influence at different times

Significant change can provide opportunities & consolidation

- In 1980's
 - New professional organisation
 - Move into university for entry-level programmes
 - First honors degree
- Later, emergence of new players in health insurance allowed consolidation of position in private practice
- Recent strategy *Primary Care A New Direction 2001* includes a commitment to services that are “fully accessible by self referral”

- And it may not be linear



Direct access – is there a downside?

- In the absence of regulation & adequate protection of title – yes
- Education of the public becomes very important
- Physiotherapy = Physical Therapy?
- PT from a country not in EU or WCPT,
 - using title but as not Chartered PT → GP's would not refer
 - tried to recruit post-graduate student to do assessment

EU Legislation is influential

- 27 member states, not all have direct practice
- Directive has provision for Common Platform but ER-WCPT does not believe this mechanism is possible currently
- Freedom of movement - if there is a short-fall in the entry-level education and attestations of competency of an applicant from another member state
 - A compensatory measure **must be offered**
 - Period of adaptation or an aptitude test

Which has been positive & negative for ISCP

- Requires a competent/regulatory authority
 - ISCP lobbied to take this on
 - Designated authority on behalf of Minister
- ISCP is responsible for the accreditation of entry-level programmes – clearly influence what is expected of new graduate
- Ensure PT's whose applications are being reviewed are equivalent

But it has raised questions...

- Can these compensatory mechanisms make up the short fall?
 - Have we defined explicitly the educational components of entry-level programmes that produce autonomous practitioners ‘able to act as first contact practitioners’
- Is this too reductionist?
- Or an opportunity for leverage by MO’s?
- Do we know what regulatory authorities require?

Some lessons learned

- National equality legislation may be > than EU
- Document the changes explicitly
 - For small, new MO's
- Direct access is one of a suite of advances in the profession
- Changes in national policy are opportunities to gain traction for consolidating a position or negotiating a new position