



## The Physiotherapy Board of New Zealand

### **Physiotherapy Board Submission**

This submission has been provided as background information about the Board and its functions by Susan Beggs, CE/Registrar, on behalf of the Physiotherapy Board.

### **Establishment under the Health Practitioners Competence Act 2003, and responsibilities under that Act**

On 18 September 2004 the Health Practitioners Competence Assurance Act 2003 (HPCA Act) came into force. The Physiotherapy Board continued in existence and was appointed as an authority under the HPCA Act. It is a body corporate with perpetual succession.

The Board's purpose under this act is to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise.

### **Functions of the Physiotherapy Board (as set out in S118 HPCAA)**

- (a) *to prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes:*
- (b) *to authorise the registration of health practitioners under this Act, and to maintain registers:*
- (c) *to consider applications for annual practising certificates:*
- (d) *to review and promote the competence of health practitioners:*
- (e) *to recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners:*
- (f) *to receive and act on information from health practitioners, employers, and the Health and Disability Commissioner about the competence of health practitioners:*
- (g) *to notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public:*
- (h) *to consider the cases of health practitioners who may be unable to perform the functions required for the practice of the profession:*
- (i) *to set standards of clinical competence, cultural competence, and ethical conduct to be observed by health practitioners of the profession:*
- (j) *to liaise with other authorities appointed under this Act about matters of common interest:*
- (k) *to promote education and training in the profession:*
- (l) *to promote public awareness of the responsibilities of the authority:*
- (m) *to exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.*

Every person who, immediately before the commencement of HPCAA was registered as a physiotherapist under the Physiotherapy Act 1949 was deemed to be registered under HPCAA with the Physiotherapy Board as a practitioner of the profession of physiotherapy. At that point the Physiotherapy Board was deemed to have authorised the practitioner's scope of practice and any and all conditions imposed remained the same. Current APCs continued to remain in effect.

### **Integration/interaction with other regulatory bodies and acts such as Health and Disability Commissioner Act 1994**

Fourteen health regulatory authorities operate under the same act so there are many opportunities to share information both formally and informally. HRANZ (Health Regulatory Authorities of New Zealand) is a joint coordinated approach by responsible authorities to fulfil the Act's requirements, resolve issues without recourse to the Minister, and strengthen the principles of self-regulation. A CE/Registrar group is an administration body of HRANZ where issues are discussed, prioritised and actioned.

The Physiotherapy Board interacts formally with the Health and Disability Commissioner with complaints and discipline as set out in parts 3 and 4 HPCAA.

### **Any predecessor organisation to the Board, and the regulation of the profession prior to the Board's establishment in 2003**

The Physiotherapy Act 1949 was an act to consolidate and amend the Masseurs Registration Act 1920 and its amendments.

The more limited functions of the Board under the Physiotherapy Act were:

- a) *To give advice, and to make recommendations, on the training and examination of persons seeking to become physiotherapists:*
- b) *To advise the Government on the approval of training schools under this Act, and to approve training schools pursuant to section 19 of this Act:*
- c) *To conduct examinations under this Act; to appoint examiners and make all necessary arrangements for the purposes of the examinations; and to issue certificates of having passed examinations to persons entitled thereto:*
- d) *To receive applications for registration under this Act; and to authorise registration in proper cases:*
- e) *To promote and encourage proper conduct among physiotherapists and to exercise disciplinary powers in accordance with this Act;*
- f) *Generally, within the scope of this authority, to do whatever may in its opinion be necessary for the effective administration of this Act:*
- g) *To give directions to the Registrar with respect to the grant,...suspension, and cancellation of licences to use ultrasonic therapy apparatus under the Physiotherapy Amendment Act 1953:*
- h) *To make provision for the further training and examination of registered physiotherapists and for the qualification and recognition of teachers of physiotherapy.*

## **The Board's role in accrediting physiotherapy undergraduate programmes**

The statutory basis for accreditation of approved educational institutions is set out in the functions of the Physiotherapy Board (as set out in S118 HPCAA) ((a) above). This is regarded as one of the key fundamental responsibilities of the Board.

In 1991, before the commencement of HPCAA, the Regulations to the Physiotherapy Act 1949 were amended in response to the implementation of four-year undergraduate physiotherapy degree programmes in New Zealand, and the consequent agreed discontinuation of the State Examinations conducted by the Board. In order to ensure that graduates from the undergraduate degree programmes continued to meet the competencies required for registration (refer "*Registration Requirements, Competencies and Learning Objectives, March 1999*") the Physiotherapy Board of New Zealand developed and implemented moderation processes, which have now been superseded by an Accreditation process.

The Accreditation of approved New Zealand physiotherapy undergraduate programmes is a good faith process requiring cooperation between Board and the Educational Institution to achieve the mutual goal of producing safe and competent graduate physiotherapists.

The Board contracts independent auditors to conduct a thorough and transparent audit and report back to the Board on their findings. The Audit focuses on assessment for objective evidence of the competencies throughout the training programme, rather than on isolated observation or exploration of individuals or facilities.

Applications for registration from physiotherapists educated overseas are assessed individually on the same competencies as are used to audit the curriculum and subsequently accredit the NZ undergraduate programmes.

## **Any relevant statistics the Board might have as to number of practising physiotherapists, exit rates from the profession, work in private or public sector, or other information about the makeup of the profession.**

At this stage the Board holds no workforce statistics so is unable to comment on areas of work, exit rates from the profession etc.

Relevant information that is available is:

Number physiotherapists with current practising certificates (March 2007) (Compared to 2491 in 2000)	3481
Number NZ graduates registered 2006-07 (Compared to 132 in 2000)	211
Number overseas applicants registered 2006 (Compared to 86 in 2000)	215

These figures indicate a steady increase in the number of practitioners registered and eligible to practice in New Zealand.

**Particular focus on issue of practising certificates, disciplinary and competence abilities (including withholding practising certificates), and any stats on discipline/competence that they may have compiled**

Physiotherapy in New Zealand is generally regarded as a safe profession.

Since the establishment of HPCA Act a key part of protecting the public is to ensure all health professionals are competent and fit to practise. Therefore the Board implemented a recertification programme under section 41 HPCA Act for all annual practise certificate holders. It is the responsibility of these practitioners to keep themselves up-to-date by means of lifelong learning throughout their career. Although this learning is closely related to the individual needs of the registrant, the ultimate purpose of continuing professional development is to contribute to high-quality service provision and excellence in physiotherapy.

The recertification programme requires practitioners to complete a minimum of 120 hours of CPD activity over three years. The first three-year cycle began on 1 January 2005. Except for meeting the minimum requirement (20 hours in any one year) practitioners can set their own workload over the three-year cycle (details of the programme are set out in the Board publication "Recertification Guidelines").

Those that are currently non-practising but intend to resume practising in the future are encouraged to continue with their continuing professional development.

Physiotherapists are required to disclose information relating to their competence and fitness to practise. Renewal of their APC is dependent upon successful completion of relevant continuing professional development (CPD) activities and they must make a self declaration they are competent to practise within their scope of practice and that they have completed the minimum number of CPD hours required to meet the recertification requirements.

There are few comparative statistics available on the number of discipline issues the Board has had to deal with since the commencement of HPCAA. It may be reasonable to assume though that since there is now an avenue to report on practice below the required standard of competence (see section 34 HPCAA) as well as discipline issues (see section 64 HPCAA) there may be more issues addressed by the Board in the future.

**Comment on ways in which the practice of physiotherapy may have changed over the last 15-20 years.**

The Board has no data or comment on evolving professional practices; such information is likely to come from the professional body.

The Physiotherapy Board is pleased to provide this background information to the Independent Review. If any clarity or more detailed information is required I am available to be contacted at any time.