education at all levels is the cost-utility of the system in producing skilled physiotherapists. There are cost-efficient ways to deliver didactic teaching to large numbers of students. However, physiotherapy education needs to include intensive hands-on skills training and integrative clinical practice, in the same way as is required in medicine. This tertiary education ‘apprenticeship’ model is expensive. As highlighted by Crosbie et al (2002), such a model works well with the support of an intern year (medicine) or articles (law). The real life experience in ‘just-in-time’ and ‘on the job’ education may be considered as a stepping stone into the profession.

Is it time for the basic physiotherapy qualification to target the core competencies within a three year program and then have a graduate/professional year of specialisation specific to the area in which the graduate physiotherapist is employed? The cost-utility of this suggestion is the crux of the problem.

The profession and educational providers are gazing into the crystal ball. However, the question they ask is not what the future possibilities of modes of education should be but rather what will be accepted by the accreditation board and then subsequently by the profession. It may be time for the stakeholders to think outside the box for an educational model that will best serve the consumer at the undergraduate, graduate masters or doctoral entry and the specialisation process.

It is imperative for the physiotherapy profession to be actively involved in the decision-making process with respect to curriculum content and also to contribute to the provision of quality education.

Garry T Allison
Perth


Change or disappear - a critical point for our profession. (Comment on Crosbie J et al, Australian Journal of Physiotherapy 48: 5-7.)

Important questions for all members of our profession are posed by the thought-provoking Editorial in the last issue of the Australian Journal of Physiotherapy (Crosbie et al 2002). In essence, the Editorial asks: where will the physiotherapy profession be in 2020? The stakeholders who must play a part in addressing this question include registration boards, physiotherapy employers, universities, the Australian Physiotherapy Association (APA) and, most importantly, individual physiotherapists who collectively form “our profession”.

The Australian Physiotherapy Association (APA) has been working to address several of the issues raised over many years. Several of the authors of the Editorial have participated in the development of the APA Charter of Educational Standards, the development of competency standards that describe advanced levels of knowledge, skills and attributes in several areas of specialty in physiotherapy, and the APA Professional Development Framework. All of these documents seek to support and foster university-based postgraduate education.

It has long been recognised that specialisation is not a single step, but a staged process. In mid-1996, an APA working party was formed to review the process of specialisation in physiotherapy conducted under the auspices of the Australian College of Physiotherapists. In order to address the complexity and volume of work required to develop a professional development framework that incorporates specialisation, the APA has employed part time project officers since January 2000. Discussion forums regarding the revised specialisation process were held in each State and Territory of Australia in 2001. Attendance at these forums was poor – in some cases, the forums were cancelled due to lack of interest. Despite this apparent apathy, work has continued with several of the APA National Special Groups to develop a professional development framework that encompasses the revised process of specialisation. Successful implementation of the process will depend upon individual physiotherapists.

For many years, the APA has met with Heads of Schools of Physiotherapy in Australia and New Zealand to discuss professional issues including those raised in the Editorial. Representatives of the APA attended meetings with several of the authors of the Editorial in 1999 and 2000 to establish links and foster articulation between university-based education and professional development offered through the APA. During 2001, all universities were invited to discuss development of courses that formally recognised completion of APA accredited professional development activities in terms of credit points or higher standing for students enrolling in postgraduate programs.

Given the continually growing body of knowledge and skills in our profession, surely it is appropriate to consider postgraduate training as integral to contemporary physiotherapy practice. However, this logic does not appear to be shared by many in our profession. A recent survey of members in Victoria indicates that most physiotherapists are not interested in pursuing postgraduate education. The main reason cited is the lack of tangible benefits to offset the significant financial and time inputs.

Who is responsible for providing these tangible benefits? First and foremost, financial reward is the responsibility of the practitioners themselves. Why is it that physiotherapists continue to undervalue their services? Research commissioned by the National Private Practitioners Group of the APA indicates that the average cost of a physiotherapy consultation – both initial and standard – has risen around five dollars since 1998. In other markets, expensive products are implicitly considered to be better quality - physiotherapists must recognise that Australian business operates in a competitive environment. In fact, the Federal Government established the Australian Competition and Consumer Commission (ACCCC) to
ensure competition. Physiotherapists who have invested in postgraduate education and continuing professional development to ensure they acquire advanced knowledge and skills need to assess their value in the healthcare market relative to other physiotherapists and other professions. The ACCC enforces legislation that prevents the APA from publishing a schedule of recommended fees. It is up to individual practitioners to set fees that reflect their market value and the costs of maintaining their practice - including education.

Other tangible benefits include recognition – both peer and external. The revised process of specialisation provides two levels of recognition via award of a title for physiotherapists who demonstrate advanced levels of knowledge and skills, for example, “APA Sports Physiotherapist” and “APA Specialist in Sports Physiotherapy”. This provides tangible recognition via a different “brand” to physiotherapists who have not demonstrated advanced levels of knowledge and skills. Already, some external parties including employers and compensable bodies have recognised these titles in the form of increased remuneration for physiotherapy services. Interestingly, peer recognition in the form of referral is poor - again, it is up to individual physiotherapists to embrace the concept of specialisation and incorporate specialist practitioners into the fabric of our profession.

Our profession is imploding. Resistance to change, unwillingness to embrace opportunities to define what makes physiotherapy unique, and continued refusal to acknowledge the highly competitive environment in which our profession is practising threaten to eliminate physiotherapy. Unless individual physiotherapists who collectively form “our profession” recognise the importance of postgraduate education, the fundamental necessity of a career pathway and the vital influence of market forces, our profession will stagnate.

So, the challenges are there. The issues raised most certainly require urgent discussion, but meaningful discussion requires interest, not apathy and resistance to change. All stakeholders must be prepared to tackle these issues now - before physiotherapy in Australia is absorbed by like professions.

Margaret Grant
Melbourne


Physiotherapists risk losing their identity. (Comment on Crosbie J et al, Australian Journal of Physiotherapy 48: 5-7.)

The Heads of Schools of Australia and New Zealand have challenged the profession to consider how the universities are to continue producing physiotherapists who satisfy the expectations of the profession in the current health and tertiary education environment (Crosbie et al 2002). Their discussion primarily focuses on undergraduate education and the need to consider a specialisation process. However, the issues raised by the Heads have far greater implications. The Editorial in fact begs the broader question: will the profession of physiotherapy exist in 20 years time and if so, in what form? Will physiotherapists (in particular clinicians) still have a role or will a physiotherapy qualification be the springboard for careers in health management, health research and health promotion?

The APA, as a member-based organisation responsible for the advocacy of physiotherapy, has developed a framework for specialisation which establishes a career path for a graduate physiotherapist to progress to a specialist level of clinical practice. The framework is yet to be fully implemented, however there has been significant progress in defining the expectations for the titled stage of the process. Whilst the framework takes shape as a result of the input from various groups within the profession, the real challenge remains in motivating the profession to recognise and pursue specialisation as a worthy goal.

For a specialisation framework to operate effectively, the profession must be able to appreciate and utilise the knowledge and skills of expert physiotherapists through a system of consultation. There is a tendency within the profession to consider that the undergraduate qualification is sufficient to equip physiotherapists to deal with most clinical situations. This is evidenced by the fact that very few physiotherapists undertake postgraduate studies in clinical specialties. Without the development of knowledge and skills beyond that afforded by the undergraduate qualification, physiotherapists run the risk of losing the ability to distinguish themselves from competitors in the health market. In recent years we have seen “traditional” areas of clinical physiotherapy being taken up by other professions such as nurses, massage therapists, sports trainers, exercise physiologists and rehabilitation specialists of various titles, to name but a few. In an era of “credentialism”, formal postgraduate education is essential if the profession wishes to demonstrate its credibility to a market place that is increasingly competitive and discerning.

Recognising and developing experts is one aspect of specialisation, a system of consultation is the other vital aspect. The profession needs to develop and utilise a system of consultation between practitioners of differing levels of expertise and also between areas of practice (such as musculoskeletal, women’s health, sports, gerontology etc). A formal system which allows experts to provide advice for the ongoing management of complex, multifactorial or specialised cases would greatly enhance the efficacy of physiotherapy and provide a significant competitive edge to our profession.

Physiotherapists have very little experience in seeking or providing advice from other physiotherapists. The most common situation in which physiotherapists can experience a system of consultation is in large clinical