Direct Access - Challenges and Strategies

International Policy Summit
Direct Access and Advanced Scope of Practice
in Physical Therapy
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Obstacles to direct access

- Legislation
- Economy
- Organization
Legislation

Challenge: New legislation to attain full scope for the profession

• The law on authorization concerns protection of title and protection of the patient
• A physiotherapist may now perform treatment of diseases without a referral from a physician – keeping within accepted principles for professional standards
• The new law: No lawful obstacles for direct access

Strategy:

• The Association works towards attaining new professional extended competences, education at research level, responsibility, role and position in the health service
Economy

**Challenge: Direct access is limited by economic concerns**

- Referral through a physician or triage is often based on financial concerns
- At the private practice setting, the health legislation requires a physician’s referral to obtain reimbursement for treatment
- At the local community settings, the patients have a legal right to rehabilitation, but it is clearly financially ruled
- More often now, private insurance patients are receiving treatment without referral
- The policy in Denmark is to obtain physicians as gatekeepers – reason: a tax-financed health service

**Strategy:**

- The Association works towards that the financial concerns is based on the assessment of the physiotherapist.
Organization

Challenge: Physiotherapeutic professional responsibility

• Within the public hospitals the physicians have the professional responsibility, one reason being the liability for damages.
• It is obligatory to have a physician as professionally responsible at the hospitals – also at privately owned hospitals.
• The physicians can delegate responsibility and physiotherapists are working on extended scope in different areas – but it is not formalized

Strategy:

• The Association works towards obtaining formal organizational accept of expanded physiotherapeutic scope and professional responsibility within hospitals and treatment institutions.
Questions to the Minister of Health

At the first parliament reading of the legislation regarding authorization for health personnel (2006) a number of questions were addressed to the Minister of Health regarding physiotherapy competence -

Questions focused on doubts regarding physiotherapists’ qualifications and competence:

- Competence to diagnose and treat patients with medical illness without a physicians regular diagnosis
- Competence to take the responsibility for the security of the patient
- Necessity to give up the requirement for medical referral if, for example, a physicians statement/ treatment plan for rehabilitation still exists as a regular standard
Answers from the minister of health:

• The new law regards authorization – meaning that it is only a question of what physiotherapists, based on their basic education, can perform independently within the health service. The law does not deal with administration and planning of health service.
• Giving up the request for medical referral for the physiotherapeutic treatment of illness would not with my understanding influence on the security of the patient.