

Revised Education Policy Statement

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European Region of the World Confederation for Physical Therapy Education Policy Statement

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European Region of the World Confederation for Physical Therapy Education Policy Statement

Introduction

The Executive Committee is pleased to present a revised version of the Education Policy Statement, prepared by the Education Working Group of the European Region of the WCPT, taking into consideration the Leuven Communiqué, April 2009.

The purpose of this statement is to provide information to physiotherapists, educators and the appropriate authorities and institutions within the European Union on the principles that underpin programmes of physiotherapy education. These principles cover undergraduate education and the continuum of life-long learning opportunities including higher degrees.

Central to the statement are the revised WCPT declaration of principle and position statements on Education, the Bologna principles and the direction of the Bologna reforms.

The Education Policy Statement seeks to ensure excellence in all aspects and levels of education by advocating quality assurance mechanisms. In addition it seeks to inform the work of the European Region in seeking to achieve a European Common Platform by highlighting the need for transparent pathways and equity in access to physiotherapy education programmes at all levels. The statement aims to provide confidence to the public and to public bodies and the wider higher education sectors promoting the International standing of Physiotherapy Education in Europe.

Sections 1-7 give the contextual information for the policy statement. Section 8 outlines the policy recommendations for the European Region.

1. Charter of the European Region of WCPT

The Charter of the EUROPEAN REGION OF THE WCPT includes the following specific aims and objectives:

- **1.1.** To promote development of physiotherapy reciprocity of physiotherapy qualifications and to improve the quality of physiotherapy education and practice in Europe.
- **1.2** To promote physiotherapy in Europe and to oversee all matters dealing with physiotherapy.
- **1.3** To promote free movement and the right of establishment of physiotherapists in Europe.

2. WCPT Declaration of Principle and Position Statement on Education

2.1 The European Region supports the WCPT declaration on Principles and Position of Education. The Declaration can be found in Annex I.

2.2 Position Statement on Education for entry level Physical Therapists

- 2.2.1 The World Confederation for Physical Therapy recommends that education for entry-level physical therapists be based on university or university-level studies, of a minimum of four years, independently validated and accredited as being at a standard that accords graduates full statutory and professional recognition.
- 2.2.2 The World Confederation for Physical Therapy will assist national physical therapy associations with the development of appropriate educational standards and with the development of accreditation processes. (Originally adopted at the 13th General Meeting of WCPT June 1995 and revised at the 15th General Meeting of WCPT June 2003. Revised 2007 to incorporate the Position Statement: Education for entry level physical therapists (1995) and adopted at the 16th General Meeting of WCPT June 2007)

3. Background

- **3.1** In developing an Educational Policy Statement for Physiotherapy in Europe it is necessary to take account of the Bologna process and its goals. Which include:
 - enhancing the employability of European higher education graduates,
 - promoting mobility in higher education,
 - increasing the attractiveness of European graduates and the higher education processes to the rest of the world.
- **3.2** These goals will be achieved through the development of comparable degree structures in the European Higher Education Area (EHEA), by
 - integration of research and education at all levels of education
 - promoting European joint curricula and joint degrees, through recognition of European degree programmes by professional bodies,
 - using the Diploma Supplement
 - the facilitation of European credit transfer and accumulation (ECTS)
 - promoting recognition procedures in transnational education through initiatives such as ENIC/NARIC (ENIC: European Network of Information Centres in the European Region, NARIC: National Academic Recognition Information Centres in the European Union)
 - creating comparable criteria and methodology for quality assurance in higher education
- **3.3** The focus on the needs of learners and Higher Education Institutions as communities that can provide opportunities for life long learning is acknowledged by the EHEA.
- 3.4 It is important for employability that Higher Education Institutions (HEIs) have regular and close involvement with Physiotherapy professional bodies and employers in curricular development and programme validation events. There is also a mutual benefit for all involved in this process with influence on the development of the profession and on the quality of the services delivered by Physiotherapists. The growing trend towards structuring curricula as a function of the learning outcomes and competencies is useful in ensuring that

academic quality and employability become compatible goals. The European Physiotherapy Benchmark Statement provided a first step towards a common framework for structuring curricula, but has over time been superseded.

4. General principles related with the structure of studies

The implementation of a three cycle education system (Bachelor – Master - Doctor), together with a credit system for accreditation, has been generalised within the signatory countries of the Bologna Declaration, and is expected to be completed by 2010.

The need for transparency, and comparability, has lead to the adoption, in 2005, of general descriptors (Dublin descriptors) for each cycle of studies, and the generalisation of the use of learning outcomes to describe the education programmes. The European Qualification framework which links countries qualification systems together acting as a translation device to make qualifications more readable and understandable across different countries and systems within Europe was formally adopted by the EU in 2008. This further aims to promote mobility and facilitate life long learning.

Within these frameworks HEIs will have freedom in the design of their programmes; the framework is there to assist in curricular development and allows for diversity of curricular designs.

ECTS, as a credit transfer and accumulation system can be used to improve transparency and comparability of study programmes and qualifications and can facilitate the mutual recognition of qualifications. The system is based on the work of the student and 60 ECTS equates to one academic year of full time study.

First cycle degrees (Bachelor) must have the minimum of 180 ECTS credits

Second cycle degrees (Masters) normally carry 90-120 ECTS credits. The most common pattern emerging for the two cycle degrees appears to be 180 credits Bachelor + 120 credit Masters (3+2 years). It is acknowledged that due to the different length of Bachelor degree programmes (3 or 4 years) flexibility for the length of Masters Programmes is required, thus the Masters programme can carry less than 120 credits but a minimum of 60 credits must be respected. Thus allowing for 240 credits Bachelors + 60 credits Masters (4+1 year).

Recommendations stressing the relevance of doctoral studies to the Bologna Process have been made, this is referred to as the third cycle. These recommendations stress the need for structured doctoral studies, joint EU programmes at doctoral level, mobility of students, and for the creation of a European doctoral label. At the moment the majority of Doctoral programmes seem to be by research with a taught element and individual supervision arrangements, although a number of structured taught professional/clinical doctorate programmes are emerging. In the EU these programmes usually require a minimum of three years of study to lead to the award. *It is clear that HEIs should seek to embed doctoral programmes, both by research or by taught routes within their institutional strategies. Further they should seek to develop career opportunities for doctoral candidates, and early stage researchers.*

Within the health care professions there is a move towards inter-professional learning within undergraduate and postgraduate curricula. The opportunities for this have been facilitated as a result of the move from Schools of Physiotherapy into Faculty structures in HEIs, which include a variety of other disciplines. The trend has been to share common knowledge and skills with other professionals whilst maintaining respect for the identity and core skills of each profession.

At National level HEIs should be encouraged to consider the development of joint programmes (collaborative work between HEIs) with flexible curricula, as one way in which to support access and mobility of students and staff.

5. Life-Long Learning

- 5.1 In broad terms life-long learning (LLL) provision is still poorly integrated into the general strategies, core-processes and decision making of many HEIs. There is a need for LLL to be given a higher profile within HEIs and for these institutions to identify the added value of their particular expertise, if they are going to position themselves for the expanding LLL market. In Physiotherapy it is predicted that the demand for taught masters, clinical doctorate programmes and research degrees will continue to rise over the next decade.
- 5.2 Life-long learning is not just about post-basic qualifications it is about bringing learning closer to the learner through activities that engage with local communities and employers. This requires HEIs to recognise prior formal and non-formal and informal learning to allow access to programmes and to provide exemptions within programmes. The use of the Diploma Supplement and ECTS can be used along side skills and knowledge portfolios and individual learning pathways to provide access to the first or second degree tiers or other higher degree programmes of study. HEIs should further be encouraged to develop mechanisms by which students can apply for prior learning to be recognised.
- 5.3 HEIs should be encouraged to integrate LLL into their mission statement and development plans. Public authorities for higher education should take appropriate measures to ensure equal access to and appropriate opportunities for participation in LLL to each individual in accordance with his /her aspirations and abilities; ensure the right to fair recognition of qualifications acquired in different learning environments.

6. Quality assurance and quality enhancement

6.1 Quality assurance is a system of recognised procedures for establishing standards in Higher Education and includes procedures for achieving standards, and evaluation of their fulfilment. Principal types of evaluation used in European quality assurance are 'accreditation of programmes' and 'evaluation of programmes'.

- 6.2 The following characteristics are common features of European quality assurance systems; autonomous body for QA, self-evaluation, review of targeted internal and external aspects of quality assurance by visiting experts, and publication of results. Almost all EU member states and associated countries have established an evaluation agency. The aims of these agencies are to:
 - safeguard the quality of higher education within the economic, social and cultural contexts of their countries, while taking into account the European dimension, and the rapidly changing world;
 - encourage and help higher education institutions to use appropriate measures, particularly quality assurance as a means of improving the quality of learning and training in research;
 - stimulate a mutual exchange of information on quality and quality assurance at community and global levels and to encourage co-operation between higher education institutions.
- 6.3 The quality assurance procedures should aim to achieve a balance between accountability and improvement, as HEIs develop more sophisticated internal mechanisms for QA they should also move the balance away from compliance towards quality enhancement and improvement. The Member Organisations of the European Region of WCPT have an important role to contribute and support the development of the physiotherapy education in the HEI's through their quality enhancement activities.
- 6.4 Quality enhancement requires a greater voice for student representatives in assessing institutional quality and the dissemination of improved forms of public information regarding institutional quality. Quality enhancement can be facilitated through the delivery of a national programme aimed at developing and sharing good practice in learning and teaching in higher education.
- 6.5 For physiotherapy education the enhancement of quality across programmes of physiotherapy in EU is essential for students, educators and employers. The quality assurance agencies disseminate knowledge and information and some provide the function of programme accreditation. Overall they provide the HEI sector with an important function that includes investigating and deciding on certain legal matters pertaining to HE institutions and acting as

guarantor for accountability in HE by benchmarking (**European Physiotherapy Benchmark Statement**). Physiotherapy educators and HEIs should view internal and external QA procedures as positive as they enhance institutional quality culture.

6.6 Currently all Bologna signatory countries have or are in the process of setting up external agencies responsible for monitoring quality assurance in HEIs. The primary function of these agencies is to enhance quality and to act as gatekeepers ensuring standards, procedures and guidelines are implemented accordingly.

7. Challenges to meet the Bologna goals

- 7.1 Developing qualification frameworks for Physiotherapy in HEIs recognised by National governments based on qualification descriptors and level descriptors, competencies, learning outcomes and skills and that those articulate with a Common European Qualification Framework.
- **7.2** Encouraging HEIs delivering programmes of physiotherapy to use ENIC/NARIC to facilitate recognition in transnational education.
- **7.3** Ensuring that higher education at all levels is based on research and innovation.
- 7.4 Ensuring that bachelor degrees are seen by academics and employers as valid first degrees as a minimum qualification to enter the profession of physiotherapy, whilst recognising the increasing number of countries that are developing masters courses as an entry point to the profession of Physiotherapy.
- **7.5** Raising awareness of the benefits of the Diploma Supplement within the profession and to employers.
- **7.6** Articulating the need for masters degrees, taught doctoral and higher degree research programmes as part of continuing professional development within a life-long learning professional development progression.

- 7.7 Ensuring that specialisation pathways include both clinical and academic development and achievement, for example as illustrated within the European Region Specialisation Framework.
- **7.8** Encouraging the use of ECTS as the European credit system, to cover formal, non-formal and informal education for transfer and accumulation of credit.
- **7.9** Ensuring the move away from state intervention provides the potential for HEIs to increase their autonomy.
- **7.10** Ensuring that evaluation procedures consider the links between teaching and learning, and among teaching, research, knowledge transfer and other dimensions of institutional management, having in mind their impact on professional practice.
- **7.11** Ensuring mutual recognition of physiotherapy programmes and quality assurance mechanisms through common criteria for institutions that facilitates sharing of good practice, without undermining the importance of diversity and competitiveness.
- **7.12** Encouraging Member Organisations to work with the HEIs, and other professional organisations, to facilitate the development of inter-professional education in clinical and academic settings.

8. Policy Recommendations.

- 8.1 The curricula for physiotherapy education should reflect the health and social priorities of the nation within a qualification framework that defines transparent and comparable 'level descriptors', 'learning outcomes' with other European countries. The European Benchmark Statement for Physiotherapy can provide a common framework for structuring curricula.
- 8.2 Physiotherapy education should include aspects of integrated health care through collaborations with other professionals while respecting each other's professional autonomy.

- **8.3** Physiotherapy education should comprise of a three cycle structure. The first cycle, of a Bachelor degree leading to a minimum entry qualification to the profession, followed by a second cycle of a Masters degree. The first and second cycle should comprise 5years in total. The third cycle allows access to higher degrees by research (DPhil and PhD) and taught professional/clinical doctorate programmes in Physiotherapy.
- 8.4 Programmes of Physiotherapy within the two cycles should demonstrate flexibility in their structure and delivery pattern to provide equity in access to individuals from a variety of social and academic backgrounds.
- **8.5** The Diploma Supplement should be available for all Physiotherapy Programmes and all programmes should use ECTS.
- 8.6 LLL, including CPD should be promoted as a process though which individuals are able to attend to their professional development needs to enhance their practice and their contribution to service delivery and patient care. HEIs should ensure equity of access and appropriate opportunities for participation for individuals in accordance with his /her aspirations and abilities.
- 8.7 LLL and continuing professional development can take place in a variety of settings, including a variety of learning experiences. A system of reflection and recording (i.e. professional portfolios) should be maintained in order to allow accreditation.
- **8.8** HEIs should seek to meet the needs of physiotherapists through the provision of learning communities that can provide opportunities for life long learning.
- 8.9 Member Organisations should facilitate development of learning environments in collaboration with employers in physiotherapy workplaces
- **8.10** Member Organisations should facilitate the implementation of a framework for specialisation according with WCPT recommendations.
- 8.11 HEIs should recognise prior formal, non-formal and informal learning to enable access to programmes and to provide exemptions within programmes, in a fair way.

- 8.12 HEIs should promote procedures in transnational education through systems such as ENIC/NARIC.
- 8.13 HEIs should have regular and close involvement with Physiotherapy professional bodies and employers with regard to curricular development and programme validation events.
- 8.14 All physiotherapy programmes at each appropriate level (undergraduate, masters, doctoral), should be placed within a national qualifications framework that seeks to describe the qualifications making up the framework in terms of workload, level, quality, learning outcomes and profile. This framework should articulate with other national qualification frameworks within the EU.
- 8.15 Member Organisations and HEIs should endeavour to support clinical academic/research careers in order have a direct impact on the clinical practice
- 8.16 Member Organisations should co-operate with competent authorities, HEIs and quality assurance agencies to develop common quality assurance criteria and methodologies at national level and to stimulate a mutual exchange of information on best practice between HEIs across Europe.
 - 8.16.1 Quality assurance mechanisms in the HEIs should ensure that evaluation procedures consider the links between teaching and learning, research, knowledge transfer and other dimensions of institutional management, as well as their relevance to professional practice.
 - **8.16.2** Quality assurance procedures in the HEIs should aim to achieve a balance between accountability and quality enhancement and improvement.
 - **8.16.3** Quality assurance procedures should include / consider the input of all relevant stakeholders, including patients, users of physiotherapy services, and user organisations.

8.16.4 Quality Assurance procedures in the HEIs should use the Quality Assurance Policy of the ER-WCPT to inform their criteria and methodologies.

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For the revision of the document in 2010 (to be approved at the General Meeting, Berlin, May 2010) the contribution of the Education WG of the European Region of the WCPT (2008 – 2010) is acknowledged.

Annex 1. Relevant resources of information

Documents used as references on the first version of the statement

Adam, S (2003) Qualification structures in European Higher Education, study prepared for the Danish Bologna seminar Copenhagen, 27-28 March.

Campbell, C. Rozsnyai, C (2002) Quality Assurance and the Development of Course Programmes. Bucharest:UNESCO/CEPES Papers on Higher Education, Annex 1.

European Physiotherapy Benchmark Statement (2003) http://www.physio-europe.org/

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Meeting of Directors general of Higher Education and Presidents of Rectors Conferences of the EU/EEA Cordoba, 7-9 April 2002. http://www.bologna-berlin2003.de

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Scotland http://www.gaa.ac.uk/reviews/ELIR/handbook08final/default.asp

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Communiqué of the Conference of European Ministers Responsible for Higher Education, Leuven and Louvain-Ia-Neuve, 28-29 April 2009

http://www.ond.vlaanderen.be/hogeronderwijs/bologna/conference/documents/Leuven Louv ain-la-Neuve Communiqu%C3%A9 April 2009.pdf

European Research Area http://cordis.europa.eu/era/home_en.html

Other sources of information

The following main documents of the Bologna Process are available at

http://www.bologna-bergen2005.no/

- Sorbonne Declaration
- Bologna Declaration
- Prague Communiqué
- Berlin Communiqué
- Bergen Communiqué
- London Communiqué

Translated versions

- Lisbon Convention and subsidiary documents
- European Cultural Convention

Adopted by the Ministers

- European Quality Assurance Standards
- Framework of Qualifications for the European Higher Education Area

Progress reports

- The BFUG Report From Berlin to Bergen, dated 3 May 2005
- Zgaga Report From Prague to Berlin, dated September 2003
- Lourtie Report From Bologna to Prague, dated May 2001
- Bologna Process Stocktaking, dated 9 May 2005
- <u>National Reports to the Bologna Process</u>
- EUA Trends Reports

Current Documents

- <u>Standards and Guidelines for Quality Assurance in the European Higher Education</u> <u>Area, dated 21 February 2005</u>
- <u>A Framework for Qualifications of the European Higher Education Area, dated 18</u> February 2005
- Maastricht Communiqué on the Future Priorities of Enhanced European Cooperation
 in Vocational Education and Training (VET), dated 14 December 2004

Other Documents of Relevance

From 1 July 2007 Belgium, the Netherlands and Luxemburg have taken over joint responsibility for the Secretariat to the Bologna Follow Up Group and its Board. New documents will be available at

http://www.bologna2009benelux.org

Appendix I

WCPT Declaration of Principle and Position Statement on Education

Declaration of Principle on Education

- 1 Physical Therapy education is a continuum of learning beginning with admission to an accredited physical therapy school and ending with retirement from active practice.
- 2 The goal of physical therapy education is the continuing development of physical therapists who are entitled, consistent with their education, to practice the profession without limitation.
- 3 The curricula for physical therapy education should be relevant to the health and social needs of the particular nation.
- 4 The term accredited is used in relation to physical therapy education to describe a programme, which is regularly evaluated according to established educational standards.
- **5** The first professional qualification should represent completion of a curriculum that qualifies the physical therapist for practice as an independent professional.
- 6 An integral component of the curriculum for the first professional qualification is direct clinical experience under the supervision of appropriately qualified physical therapists. This clinical education will involve gradual access to responsibility as skill and experience increase.
- 7 The curriculum should equip physical therapists to practice in a variety of health care settings including, but not limited to, institutional, industrial, occupational and primary health care that encompass urban and rural communities. Consideration should also be given to preparing physical therapists to work in environments that reflect the health care funding models that operate in different countries.
- 8 The curriculum and continuing professional development (CPD) opportunities should prepare physical therapists with knowledge of educational approaches to facilitate the supervision, education and transference of skills to others.

- **9** Life-long learning and professional development is the hallmark of a competent physical therapist. It should be recognised that learning and development may take place in a variety of ways and is not limited to attendance at formal courses.
- **10** Physical therapists should be equipped for evidence-based practice.
- **11** Research methodology should be included in entry-level programmes.
- **12** Physical therapists should be encouraged to undertake post-graduate education in physical therapy or related fields for advanced professional development.
- 13 Professional physical therapy education should be conducted by physical therapist-educators able to transfer knowledge and skills about physical therapist examinations / assessment / evaluations, and interventions / treatment and their outcomes, including the critical analysis of theories and methods of physical therapy.
- 14 Basic and foundational sciences (e.g. anatomy, histology, physiology, imaging, etc) and research methodology should be taught by individuals with appropriate education and / or credentials in the area.
- **15** Where national physical therapy associations have adopted practice specialisation, the process to become recognised as a specialist should meet the academic and practice rigors of such a qualification.
- 16 The goals, content, format and evaluation of the education programmes provided for physical therapists are the responsibility of the faculty but should involve the active participation of the national physical therapy association.

(Revised at the 15th General Meeting of WCPT June 2003)