

THE PROFESSION OF PHYSIOTHERAPY ON THE INTERNAL MARKET OF THE EUROPEAN UNION

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Abstract. The basic legal act governing professional qualification in the European Union (and the countries of the European Economic Area and Belgium) is Directive 2005/36/EC of the European Parliament and of Council of 7 September 2005 on the recognition of professional qualifications. To practise a profession outside the country in which it was earned, a citizen must comply with certain legal requirements. The author discusses the Polish Act on the Profession of Physiotherapist. The EU has established a European Professional Card. Its holder is entitled to the same rights and privileges, as well as assuming obligations, across the EU as in the state in which the profession was learned. In Poland, pursuant to Article 5 of the Act on the Profession of Physiotherapist, the term “physiotherapist” may only be used by a person who has the right to practice the profession, and the professional title itself is protected by law.

Keywords: profession of physiotherapist; regulated profession; license to practice; free movement of services; European professional card

INTRODUCTION

The European Union is an international organization that originated from the European Communities established in the 1950s. One of the goals pursued by the Communities, and in particular the European Economic Community, was to guarantee a balanced and constant economic growth of the Member States, and to create an internal market that would enable the implementation of four freedoms: movement of workers, movement of services and establishment, movement of capital and payments, and movement of goods. In the initial period, the internal market implemented the indicated freedoms only in the economic context, i.e. EU citizens could move only after proving the economic significance of their activity. The first treaty amending the founding treaties – the Single European Act – introduced the concept of an internal market, which was also based on the above-mentioned freedoms, however, it significantly changed the manner in which they were implemented. The treaty that was of key importance in terms of the concept and implementation of the freedoms of the internal market was the Treaty on the European Union that established EU citizenship, including civil rights.

One of these rights is the freedom of movement and residence in the territory of the host country. The indicated modification resulted in the change of one of the existing freedoms to the freedom of free movement of persons, which initiates each of the EU personal freedoms. Currently, in accordance with the provisions of Article 26(2) of the Treaty on the Functioning of the European Union, “the internal market shall comprise an area without internal frontiers in which the free movement of goods, persons, services and capital is ensured in accordance with the provisions of the Treaties.”¹ In the context of the subject of this article, the freedom of movement of services and establishment, which allows EU citizens to move in order to pursue their professional activity in other EU Member States, is of key importance. Thanks to the legal regulations in force in the Member States, self-employed individuals, representatives of liberal professions and legal persons can permanently and constantly conduct business activity in another EU country (TFEU, Article 49) or temporarily offer and provide services while remaining in their country of origin (TFEU, Article 56).

The free movement of establishment and services is conducive to mobility of workers and enterprises in the EU, but it also requires detailed legal regulations that set, among others, the rules for recognition of professional qualifications.

The elements that are of great importance in the context of the profession of physiotherapy are the Directive on the recognition of professional qualifications and the European Professional Card introduced under it. The Card is a document awarded by the competent national authorities to a specific professional group that is able to practice the profession in the host country without additional formalities.

The aim of this article is to demonstrate that the regulations currently in force in Poland enable one to obtain the indicated document and the freedom of movement within the EU.

1. THE FREEDOM TO PRACTICE PHYSIOTHERAPY IN THE EUROPEAN UNION

The basic legal act that enables one to practice a regulated profession in the European Union (and the countries of the European Economic Area and Switzerland) is Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications. This document sets the rules which are the basis for each Member State to recognize professional qualifications obtained in another

¹ Treaty on the Functioning of the European Union, OJ EU C 202 of 6 June 2016 [hereinafter: TFEU].

Member State, and thus allow a person with such qualifications to practice their profession within its borders.² It is worth emphasizing that these provisions refer to regulated professions,³ and thus it has become necessary to define the concept of a regulated profession. In Title I, Article III of the Directive, a regulated profession is defined as “a professional activity or group of professional activities, access to which, the pursuit of which, or one of the modes of pursuit of which is subject, directly or indirectly, by virtue of legislative, regulatory or administrative provisions to the possession of specific professional qualifications; in particular, the use of a professional title limited by legislative, regulatory or administrative provisions to holders of a given professional qualification shall constitute a mode of pursuit” (Directive 2005/36/EC, Article 3(2)).

If a given profession is regulated in Poland, a person who obtained qualifications in another Member State needs an official recognition of these qualifications. Similarly, recognition is necessary if a person acquired qualifications in Poland and intends to work in another Member State in a profession regulated there.⁴

The possibility of practicing a profession outside the country in which the qualifications were obtained is facilitated for individuals who practice certain regulated professions (a general practitioner and a specialist, a dentist, a pharmacist, a general nurse, a midwife, a veterinarian, and an architect). They automatically have access to their profession in another country. Other individuals who wish to practice their profession in the EU must undergo an appropriate procedure that consists in submitting an application and all relevant documents.⁵ It is clear that the qualifications required for a given profession may vary from country to country. The purpose of the recognition procedure is to identify significant differences that may affect the level of services provided. If the competent authority finds substantial differences in the process of education or in the scope of professional activities in a given profession between the country where the qualifications were obtained and the host country, as well as in order to verify whether the knowledge and skills acquired in the process of gaining professional

² Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications, OJ L 255/22 [hereinafter: Directive 2005/36/EC], Title I, Article 1.

³ In the case of professions that are not regulated in Poland, the decision to employ an employee with qualifications obtained in another EU Member State belongs to the employer.

⁴ Each EU Member State decides to regulate access to professions. Thus, the same profession may be regulated in one EU Member State while not regulated in other Member States.

⁵ Member States specify in separate legal acts the principles of recognition of qualifications. In Poland, such a document is the Act of 22 December 2015 on the Rules Governing Recognition of Professional Qualifications Acquired in the Member States of the European Union.

experience by the person wishing to practice the profession in the host country can compensate for these differences (Directive 2005/36/EC, Article 14), the Directive provides for the possibility of imposing compensation measures in the form of an adaptation period or an aptitude test (Directive 2005/36/EC, Article 7), with the principles of their organization preliminarily outlined in the Directive (Directive 2005/36/EC, Article 3).

The result of such recognition of qualifications is that a person practicing a given profession is subject to the same laws, has the same duties and privileges as the citizens of the country in which the profession will be practiced. The laws in question are those relating directly to the profession, including regulations on professional liability (Directive 2005/36/EC, Article 5).

Under the Directive, individuals who intend to practice their profession in another Member State retain their professional title (if any) and it is given in the language of the country in which the qualifications were obtained (Directive 2005/36/EC, Article 7). On the other hand, if a given profession is regulated in the host Member State by an association or organization (in Poland it is The Polish Chamber of Physiotherapists – KIF), the possibility of using one's professional title is conditional on the presentation of proof of membership in these associations or organizations (Directive 2005/36/EC, Article 52). However, this condition does not apply to the seven regulated professions mentioned above, and their representatives adopt the professional title in force in the host country (Directive 2005/36/EC, Article 7). What is important from the point of view of a physiotherapist is the fact that in the case of professions related to public health or safety, the competent authority of the host country may verify the professional competence of the person wishing to practice a given profession – this also applies to those professions where qualifications are recognized automatically (Directive 2005/36/EC, Article 7). However, it should be noted that the EU legislator introduced an additional element that strengthens the migration capacity of certain professions, i.e. established the European Professional Card. The aforementioned Directive 2005/36/EC provided for the introduction of a professional card that would enable career monitoring of individuals practicing a given profession. However, it was only the Directive of 20 November 2013 that established such a document, and defined it as “an electronic certificate proving either that the professional has met all the necessary conditions to provide services in a host Member State on a temporary and occasional basis or the recognition of professional qualifications for establishment in a host Member State.”⁶ Therefore, the purpose of the card

⁶ Directive 2013/55/EU of the European Parliament and of the Council of 20 November 2013 amending Directive 2005/36/EC on the recognition of professional qualifications and Regulation (EU) No 1024/2012 on administrative cooperation through the Internal Market Information System, OJ L 354/132 of 28 February 2013 [hereinafter: Directive

is to support the mobility of employees and entrepreneurs, and to facilitate the process of recognition of professional qualifications. It is issued in order to enable pursuing one's professional activity on a permanent basis, it should be treated on an equal footing with any other decisions regarding recognition of qualifications, and it is intended to supplement the registration requirements related to a given profession. These cards can be obtained in the country where qualifications were obtained, provided that an application and all appropriate attachments that confirm one's qualifications are submitted. In Poland, the European Professional Card for physiotherapists is issued by KIF.

2. PHYSIOTHERAPY IN POLAND

Physiotherapists are the third largest (after nurses and doctors) professional group of medical personnel in Poland. As of 7 January 2023, over 74,000 people are registered in the National Registry of Physiotherapists. The profession of physiotherapy, despite some doubts [Łakomski, Kędziora-Kornatowska, Podhorecka, et al. 2014, 48ff.] related to the lack of legal regulations, was considered a medical profession [Karkowska 2012, 298] and functioned as such in the Polish health care system [Migała 2015, 70-71]. In the Regulation of the Minister of Labor and Social Policy of 7 August 2014 on the classification of professions and specialties for the needs of the labor market and the scope of its application, it was classified in the category "health care specialist", and a distinction was made between physiotherapists and physiotherapy specialists.⁷ However, due to this profession's specificity and subject matter, and bearing in mind patient safety, the community of physiotherapists requested for years the introduction of legal regulations that would define the principles of practicing the profession [Wierdak and Kiljański 2015, 6-12]. A particularly important provision in the Act on the Profession of Physiotherapy⁸ is Article 2, which defines the profession of physiotherapy as an independent medical profession. This change raised the status of the profession and gave physiotherapists specific rights. Pursuant to APP, a physiotherapist has the right to: keep the patient's medical records; access medical records; obtain from the entity providing health care services full information about the state of the patient's health, diagnosis, proposed diagnostic methods, treatment, rehabilitation,

2013/55/EU], Article 1(1)(k).

⁷ Regulation of the Minister of Labor and Social Policy of 7 August 2014 on the classification of professions and specialties for the needs of the labor market and the scope of its application, *Journal of Laws* of 2018.

⁸ Act of 25 September 2015 on the Profession of Physiotherapy, *Journal of Laws* of 2015, item 1994 [hereinafter: APP].

preventive methods and foreseeable consequences of the actions taken, to the extent necessary to provide the patient with physiotherapeutic health care services; demanding from the doctor justification of the need to perform a specific order in the field of physiotherapy; in the event of justified doubts – physiotherapists have the right to refuse to perform the service.

3. EDUCATION OF PHYSIOTHERAPISTS IN POLAND

The Act of 25 September 2015 on the Profession of Physiotherapy has become a document guaranteeing that only a person with appropriate qualifications can become a physiotherapist, which is supposed to increase the effectiveness of treatment and patient safety [Henc 2018, 364]. The APP contains clear guidelines on the principles of practicing the profession, obtaining the license to practice, the scope of competences, duties and professional responsibilities of physiotherapists, as well as education requirements.

In Poland, since 1 October 2017, physiotherapists have been educated only at five-year uniform master's studies at various universities, including medical universities and physical education academies. Other individuals who want to use the title "physiotherapist" must meet the requirements that depend on the date of starting their studies. Firstly, those who started their education after 30 September 2012 and before 1 October 2017, must complete studies in the field of physiotherapy and obtain a Bachelor's degree (at least 180 ECTS credits, including at least 100 ECTS credits in physiotherapy) or an additional Master's degree (at least 120 ECTS credits, including at least 60 ECTS credits in physiotherapy). Secondly, individuals who started their education after 31 December 1997 must have a degree in physiotherapy (Bachelor's or Master's degree). Thirdly, individuals who started their education before 1 January 1998 must have a degree in functional rehabilitation or rehabilitation (Master's degree), or a degree from the Academy of Physical Education (Master's degree) and a first or second degree specialization in functional rehabilitation. Fourthly, individuals who started their education before 1 January 1980 must have a degree in physical education (Master's degree) and a two-year specialization in therapeutic gymnastics or functional rehabilitation, or a degree in physical education (Master's degree) and a three-month specialized course in rehabilitation in accordance with the regulations of the Central Committee of Physical Culture and Sport [Styczyński and Sywula 2016, 4-5]. Other individuals who are allowed to use the title "physiotherapist" and provide physiotherapy services to a limited extent are those who graduated from a public or non-public post-secondary school with the rights of a public school before the date of entry into force of the APP.

The APP is further specified in the Regulation of the Minister of Health of 27 June 2018 on a detailed list of professional activities of a physiotherapist. It contains a list of professional activities of a physiotherapist within individual professional tasks and the corresponding level of education necessary to perform them. The above-mentioned regulation defines three levels of education of a physiotherapist, i.e.: basic, extended, specialist. The first of them – basic – is held by a person who graduated from a public post-secondary school or a non-public post-secondary school with the rights of a public school and obtained the professional title “physiotherapy technician”. The next level – extended – is held by a person who obtained a Master’s degree diploma that confirms their qualifications. The third level – specialist – is held by a physiotherapist with the title “physiotherapy specialist” or the title “specialist in functional rehabilitation” of the second degree.⁹ Graduates can work in health centers, hospitals, private practices, sports clubs, associations and foundations for the disabled, special and inclusive schools, as well as in companies that produce orthopedic supplies. Additional ways of practicing the profession of physiotherapy also include: teaching the profession, scientific and research work, managing the work of physiotherapists, employment in administrative positions related to planning, organizing or supervising the provision of health care services [Słowińska 2018, 4-8].

From 1 April 2019, the legislator expanded the catalog of activities performed by a physiotherapist, which guarantees the individuals employed in entities that do not conduct medical activity (nursing homes, sports clubs) the possibility of retaining the right to practice the profession after a period of 5 years from the date of employment.¹⁰

4. LICENSE TO PRACTICE PHYSIOTHERAPY (PWZF)

Pursuant to Article 5, the title “physiotherapist” may only be used by a person who has been authorized to practice the profession, and the professional title itself is legally protected.

Mere completion of relevant studies does not give one the right to practice the profession of physiotherapy, and in particular to provide health care services. The element that is necessary to practice the profession is obtaining the so-called license to practice physiotherapy. The person who has the license may use the professional title “physiotherapist”. Therefore, one cannot use the above title without having such a license. According to Article 13

⁹ Regulation of the Minister of Health of 27 June 2018 on a detailed list of professional activities of physiotherapists, Journal of Laws item 1319.

¹⁰ Ibid.

APP, the license to practice physiotherapy is granted to individuals who meet the following conditions jointly: they have full legal capacity; their health allows them to practice the profession, which is confirmed by a medical certificate or other document stating the lack of contraindications to practice the profession required in a Member State of the European Union other than the Republic of Poland or the Swiss Confederation, or in a Member State of the European Free Trade Association (EFTA) – a party to the agreement on the European Economic Area, issued by competent entities in that country; they demonstrate sufficient knowledge of the Polish language to practice as a physiotherapist; with their current behavior, they guarantee the proper fulfilment of professional duties, in particular, they have not been convicted by a final judgment for an intentional crime against life and health, against sexual freedom and decency, and for actions specified in Article 207 and Article 211 of the Penal Code;¹¹ they have a diploma, a certificate or other documents that confirm their qualifications to practice as a physiotherapist. After completing 5-year studies in the field of physiotherapy, the interested person submits an application to the Polish Chamber of Physiotherapists for a license to practice. On the basis of resolutions on confirming or granting the right to practice the profession, the Polish Chamber of Physiotherapists makes an entry in the National Registry of Physiotherapists and issues a document called “Physiotherapy License”. According to Article 28 APP, a physiotherapist, before commencing his or her tasks in a given entity, should submit a document that confirms their right to practice the profession, while the entity intending to employ a physiotherapist, regardless of whether on the basis of an employment contract or other civil law contract, should request such a document. This is important because anyone who allows services to be provided by an unauthorized person is subject to a fine or restriction of liberty.

Further paragraphs of Article 13 APP define in detail the documents that confirm the required education and enable one to apply for the license. Ultimately, the right to practice as a physiotherapist will be available to individuals who, after 1 October 2017, started uniform 5-year master’s studies that covered 300 ECTS points, including at least 160 points in the field of physiotherapy, and completed a six-month apprenticeship. The APP also assumed that a State Physiotherapy Examination would be obligatory for such individuals, however, at the time of submitting the article to print, the amendment to the APP that abolishes the examination is pending the president’s signature.¹² The abandonment of the exam is intended

¹¹ Act of 6 June 1997, the Penal Code, Journal of Laws of 2018, item 1600 and 2077.

¹² See <https://kif.info.pl/sejm-przeglosowal-nie-bedzie-egzaminu-pef-wazna-informacja-dla-tegorocznych-absolwentow/> [accessed: 13.08.2022].

to facilitate the entry into the labor market for people who completed education in the field of physiotherapy.¹³

The introduction of the authorization requirement and the entry in the National Registry, as well as legal protection of the professional title “physiotherapist”, caused significant difficulties for individuals who had previously run a business in this field. Prior to the introduction of the APP, anyone could call themselves a physiotherapist and run a business that consisted in providing physiotherapy services [Jacek 2019, 133-56]. By 31 May 2018, all those who still wanted to use this title had to have their qualifications verified. As a result, owners of physiotherapy offices or salons had to improve their qualifications in order to continue using this title or change the name of the business to a massage studio or a massage parlor. If they refused, they had to discontinue some services. This is because some of these services are reserved only for physiotherapists with appropriate qualifications. According to many physiotherapy practitioners, the APP will make it possible to draw clear boundaries between physiotherapists and masseurs who had completed a short physiotherapy course that did not give them any chance to gain thorough knowledge of functional anatomy or physiology, and yet they were present on the market as physiotherapists and competed with educated professionals.

Regulating the profession of physiotherapy also has a positive effect on patient safety. The patients are assured that they are under the care of specialists with appropriate experience and qualifications, and in the event of a medical error, pursuing claims has become easier. The introduction of the APP makes obtaining the title “physiotherapist” more time-consuming and demanding, and the obligations indicated in the APP complicate performing physiotherapy activities, however, the new regulations allow for greater participation of physiotherapists in the entire process of diagnosing and treating a patient, which seems particularly important in the face of the population’s aging.

5. STANDARDS OF PRACTICING THE PROFESSION OF PHYSIOTHERAPY

In order to determine the legal status of the profession of physiotherapy it is necessary to analyze whether it is a regulated profession, a liberal profession, and a profession of public trust. The applicable regulations do not

¹³ See <https://www.gov.pl/web/premier/projekt-ustawy-o-zmianie-ustawy-o-zawodach-pielegniarki-i-poloznej-oraz-niektorych-innych-ustaw> [accessed: 10.08.2022].

provide precise definitions of all the above terms¹⁴ and their explanation should be sought in the literature [Kłusek 2016, 44-56].

The definition from the Directive on the recognition of professional qualifications quoted above describes the essence of a regulated profession (Directive 2005/36/EC, Article 3(2)). It clearly emphasizes the need to have a legally defined education and professional title. The Act on the Profession of Physiotherapy clearly included it among such professions.

In the judgment of the Constitutional Tribunal of 19 October 1999, it was indicated that the essence of the freedom to exercise professional activity is a legal status in which everyone has access to the profession and a real possibility to practice it (conditional upon qualifications and talents), and practicing the profession is not subject to the rigors of subordination.¹⁵

According to A. Krasnowolski, a liberal profession is practiced “on the basis of appropriate education, independently (which does not necessarily mean individually) and on one’s own responsibility in a professionally independent manner, in order to offer intellectual or conceptual services in the interest of the client or in the public interest. The important characteristics of a liberal profession are: the mission to practice the profession, compliance with deontological rules, guaranteeing professional secrecy and a relationship of trust between the person practicing such a profession and the client, and bearing special responsibility due to the manner in which the service is provided” [Krasnowolski 2013, 69-80].

J. Jacyszyn emphasizes that practicing a liberal profession requires detailed legal regulations that indicate its organizational and legal forms, and, like others, he draws attention to the necessity of having appropriate qualifications and professional independence. He also indicates the obligation to belong to a professional self-government when practicing a liberal profession [Jacyszyn 2015, 238].

The analysis of the above sources leads to the conclusion that the most important criteria for a liberal profession include the need to have appropriate qualifications, professional independence, and the obligation to belong to a professional self-government. While referring to professional independence, the Act of 9 November 2018 Amending the Act on Medical Activity and Certain Other Acts¹⁶ should be mentioned. This document

¹⁴ These terms are used in various legal acts, but without definitions. For example, the concept of a liberal profession appears in the Act of 15 September 2000, the Commercial Companies Code, with regard to the possibility of establishing partnerships by partners in order to create a liberal profession, and in the Act of 29 August 1997, Tax Ordinance, where the legislator, in Article 3 pt. 9, recognized pursuing liberal professions as a type of economic activity.

¹⁵ Judgment of the Constitutional Tribunal of 19 October 1999, ref. no. SK 4/99, OTK ZU 1999, No. 6, item 119.

¹⁶ Act of 9 November 2018 Amending the Act on Medical Activity and Certain Other Acts,

confirms the presence of physiotherapy in the catalog of liberal professions and enables one to practice the profession of physiotherapy as part of their apprenticeship.

In Article 17 of the Constitution of the Republic of Poland one may find the concept of a profession of public trust, combined with the possibility of establishing professional self-governments representing these professions under statute. However, there are no criteria for identifying such professions. In the literature on the subject, these criteria are: the regulated nature of a given profession, the service provided in person, professional education, the structure of a liberal profession, professional independence, professional ethos, professional secrecy, special responsibility, and corporate self-governance. The literature on the subject also emphasizes the specific mission of the profession of public trust, i.e. it is performed not for remuneration, but to satisfy the public interest [Młynarska-Sobaczewska 2009, 740]. According to P. Sarnecki, “practicing a profession of public trust is additionally specified by the standards of professional ethics, the specific content of the oath, the tradition of corporate governance, or the special nature of higher education and specialization obtained. When a person practicing this profession is admitted by another person to the sphere of their privacy, this admission must be correlated with the trust that it will not be abused” [Sarnecki 2005, 9]. Similarly, A. Młynarska-Sobaczewska emphasizes that professions of public trust “are professions the practice of which involves providing specific services significant from the point of view of the basic goods of an individual – such as health, protection of property interests, personal rights and others” [Młynarska-Sobaczewska 2009, 740].

The specific features of the profession of public trust were defined by the Constitutional Tribunal in its judgment of 24 March 2015. It emphasized that these features are: the need to ensure proper manner of practicing the profession, and in accordance with the public interest; provision of services and interaction between the representatives of the professions in question and natural persons in the event of potential or real threat to goods of special nature; diligence and attention to the interests of individuals using their services; caring for their personal needs; ensuring the protection of their rights guaranteed by the Constitution; having specific qualifications to practice the profession in question and giving guarantees of practicing it in a proper manner, consistent with the public interest; relative independence in practicing the profession.¹⁷

Journal of Laws item 2219.

¹⁷ Judgment of the Constitutional Tribunal of 24 March 2015, ref. no. K 19/14, OTK ZU 2015, No. 3A, item 32.

The regulations of the APP require physiotherapists to meet all these criteria and they specify the standards for practicing the profession. Therefore, the profession of physiotherapy should certainly be included among the professions of public trust. In the Act on the Profession of Physiotherapy, Article 4(1) defines the basic legal standards for practicing the profession. According to this regulation, physiotherapists should practice their profession with due diligence, in accordance with the principles of professional ethics, with respect for the patient's rights, with care for their safety, and taking into account the current medical knowledge [Paszowska 2015, 72-74]. It is difficult, if not impossible, to specify these concepts, and their exact definitions regarding physiotherapists are not found in legal acts. Therefore, explanations of such terms as diligence or care for safety should be sought in the literature [Borysiak 2017, 79-96] and legal acts on other medical professions [Kłusek 2016, 44-56]. According to the available sources, due diligence should be generally defined as a pattern of conduct developed on the basis of the rules of social coexistence, legal regulations, customs and professional experience, which was created in order to best and correctly fulfil professional obligations¹⁸ [Banaszczyk and Ganecki 2014, 19].

The provisions of the APP state that physiotherapists should respect the patient's rights on several levels. First of all, they have the obligation to inform the patient about the scope of health care services provided, about the proposed methods of diagnosis and treatment and their possible consequences, as well as to obtain the patient's informed consent to therapy.¹⁹

The care for the patient's safety is defined in the literature as the physiotherapists' responsibility for the negative effects of violating the safety rules concerning the patient using their services [Mikos et al. 2017, 502].

The rules of professional ethics for physiotherapists are provided in the resolution of the Polish Chamber of Physiotherapists No. 20/I KZF/2016 of 29 December 2016 on the Principles of Professional Ethics for Physiotherapists.²⁰ This document contains 10 standards for practicing the profession of physiotherapy and indicates, among others, the obligation to practice the profession within the scope of knowledge possessed,

¹⁸ Judgment of the Court of Appeal in Łódź of 16 January 2014, ref. no. I Ac1148/12, Legalis.

¹⁹ Act of 25 September 2015 on the Profession of Physiotherapy, Journal of Laws item 1994.

²⁰ The Ethical Code of Conduct for Physiotherapists of the Republic of Poland was also established by the Polish Association of Physiotherapy in 2009. The document developed by a team led by Dr. habil. Wojciech Kiebzak resembles other documents, i.e. Code of Medical Ethics and Code of Professional Ethics for Nurses and Midwives of the Republic of Poland. It contains the oath and the principles of relations with the patient and society, as well as those concerning one's own activity and scientific research. It also includes a provision on continuing development.

to enable access to rehabilitation for every person, to constantly improve qualifications, and the obligation of professional secrecy.²¹

Article 4 of the Act on the Profession of Physiotherapy and Article 6 of the Act on Patient Rights and Patient Ombudsman stipulate that patients have the right to receive health care services that meet the requirements of the current medical knowledge.²² The key concept here is timeliness [Widłak 2017, 610], which has no definition in legal acts, but is referred to by various authors [Haberko 2009, 49], especially in relation to health care services provided by doctors. However, it seems justified to transfer these definitions to the field of physiotherapy, especially in the context of the standards of professional practice. In general, it may be assumed that a physiotherapist should provide health care services in accordance with confirmed scientific achievements in the field of medical sciences, but also in accordance with the guidelines developed by the authorities of the Polish Chamber of Physiotherapists [Henc 2018, 364].

6. PROFESSIONAL ACCOUNTABILITY

Physiotherapists bear legal responsibility for their professional activity in accordance with the principles provided in Chapter 7 APP. They are held accountable if they commit the so-called professional misconduct, which is referred to in Article 85 as violation of the rules of professional ethics or rules of practicing the profession. In the case of professional misconduct, the following proceedings are conducted: preliminary inquiry – aimed at examining whether there are grounds for initiating investigative proceedings; investigative proceedings – aimed at determining whether a given activity may be qualified as professional misconduct, and if so, identifying the person culpable and collecting evidence for the Disciplinary Tribunal; disciplinary proceedings – aimed at holding the person culpable to account; enforcement proceedings – enforcement of the judgments given in the course of proceedings before the Disciplinary Tribunal. Disciplinary proceedings are two-instance, so it is possible to appeal against the judgment of the Disciplinary Tribunal to the Higher Disciplinary Tribunal. On the other hand, a valid judgment of the Higher Disciplinary Tribunal may be appealed against by filing a cassation appeal to the Supreme Court.

²¹ Resolution of the Polish Chamber of Physiotherapists No. 20/I KZF/2016 of 29 December 2016 on the Principles of Professional Ethics for Physiotherapists, <https://kif.info.pl/wp-content/uploads/2017/01/20-I-KZF-2016-zal.pdf> [accessed: 02.09.2022].

²² Act of 6 November 2008 on Patient Rights and Patient Ombudsman.

CONCLUSIONS

Nowadays, the profession of physiotherapy has become one of the most needed and wanted both on the Polish and EU market. There is no doubt that its importance will increase due to the aging of Europe's population and the consequences of changing lifestyles. Each Member State has exclusive competence in shaping the education system and establishing the conditions for practicing the profession in the country. Without affecting the indicated area, the European Union has created legal regulations that enable qualified individuals to move and practice their profession in any Member State. However, the basic condition in the indicated process is the precise shaping of the processes of education and acquisition of professional titles. The above considerations indicate that the current solutions adopted in Poland regarding the profession of physiotherapy meet this requirement.

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