



Ag Rialáil Gairmithe Sláinte
agus Cúraim Shóisialaigh

Regulating Health +
Social Care Professionals

Public Consultation Report

on the Physiotherapists Registration Board Standards of Competence for Referral for Radiological Diagnostic Procedures and Requirements for Education and Training Providers offering Referral for Radiological Diagnostic Procedures Education and Training Programmes

December 2025

Bord Clárchúcháin na Fisiteiripeoirí
Physiotherapists Registration Board



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Introduction

About the Physiotherapists Registration Board

The Physiotherapists Registration Board has statutory responsibility for: the registration of members of the profession; approval and monitoring of education and training programmes; establishing the Code of Professional Conduct and Ethics and standards of performance to which physiotherapists must adhere; and recognition of qualifications gained outside the State.

About CORU

CORU is responsible for regulating health and social care professions. It comprises the Health and Social Care Professionals Council and the Registration Boards established under the Health and Social Care Professionals Act 2005 (as amended).

CORU's role is to protect the public by promoting high standards of professional conduct, education, training and competence through statutory registration of health and social care professionals.

The designated professions under the Act are clinical biochemists, counsellors, dietitians, dispensing opticians, medical scientists, occupational therapists, optometrists, orthoptists, physiotherapists, podiatrists, psychologists, psychotherapists, radiation therapists, radiographers, social care workers, social workers and speech and language therapists.



The Public Consultation Process

Background

The *Health and Social Care Professionals Act 2005 (as amended)* provides for the establishment of Registration Boards to establish and maintain registers for the health and social care professionals named in the Act that are subject to statutory regulation. The fundamental objective of each Registration Board is to protect the public by fostering high standards of professional conduct and education, training and competence among its registrants.

To this end, Part 5 of the *Health and Social Care Professionals Act 2005 (as amended)* makes provision for the approval of education and training programmes (Section 48) and the monitoring of the continuing suitability of education and training programmes (Section 49). The Act also makes provision for each Registration Board to *issue guidelines concerning the requirements for its approval of education and training programmes* [Section 48(2)]. There are two types of requirements set by a Registration Board:

- **Standards of Proficiency:** the threshold level of knowledge, skills and professional behaviours required to enable a person to practise safely and, in so doing, keep the public safe; and
- **Criteria for Education and Training Programmes:** the requirements around how a professional education and training programme is designed and managed to ensure that it can consistently produce graduates who meet the standards of proficiency.

Collectively, these two documents are known as a Registration Board's pre-registration education and training requirements.

In advance of the opening of the Physiotherapist Register on 30 September 2016, the Physiotherapists Registration Board set its *Standards of Proficiency* and *Criteria for Education and Training Programmes*, following a public stakeholder consultation process. These *Standards* and *Criteria* were revised, following a public stakeholder consultation process in 2017, and published in November 2019. The *Standards* and *Criteria* are accessible on the CORU website [here](#).

Physiotherapist Referral for Radiological Diagnostic Procedures

In July 2023, the then Minister for Health, Stephen Donnelly, announced a policy decision to enable physiotherapists to refer for diagnostic radiological procedures, including procedures that would involve exposure to ionising radiation, such as x-ray.

There are extensive legislative requirements concerning the exposure to ionising radiation for the safety and protection of service users, practitioners and the public more generally, most notably: Statutory Instrument 30/2019: Radiological Protection



Act 1991 (Ionising Radiation) Regulations 2019 and Statutory Instrument 256/2018: Basic Safety Standards for Protection Against Dangers Arising from Medical Exposure to Ionising Radiation.

The Physiotherapists Registration Board was requested to provide advice to the Department of Health on the regulatory requirements that would enable physiotherapists to refer for diagnostic radiological procedures. Recognising the need to ensure public protection, the Registration Board concluded that designation of appropriately trained physiotherapists to act as referrers for radiological diagnostic procedures requires regulatory oversight to set the standard of competence for the practice of referring.

The Physiotherapist Registration Board made the decision in 2024 to undertake a detailed scoping and review exercise of its education and training requirements to distinguish between the threshold requirements for general physiotherapy practice and the threshold requirements for physiotherapy referrals.

The Board examined the extensive and detailed legislative requirements concerning exposure to ionising radiation which are in operation for the safety and protection of service users, practitioners, and the public. The European Council Directive 2013/59/Euratom Basic Safety Standards (BSS) establishes the basic safety standards for protection against the dangers of exposure to medical ionising radiation. These requirements were transposed into Irish Law by two separate statutory instruments:

- **Statutory Instrument 30/2019:** Radiological Protection Act 1991 (Ionising Radiation) Regulations 2019, which details requirements around protections for workers and the public, establishing responsibility with the Environmental Protection Agency (EPA) and the Office of Radiation Protection and Environmental Monitoring (ORM); and
- **Statutory Instrument 256/2018:** Basic Safety Standards for Protection Against Dangers Arising from Medical Exposure to Ionising Radiation details patient protection requirements and assigns responsibility to the Health Information and Quality Authority (HIQA).

The Board, with input from the Department of Health's Expert Advisory Group for Physiotherapist Referral, reviewed the only existing comparable standards published by the Nursing and Midwifery Board of Ireland (NMBI) *Nurse Authority to Refer for Radiological Procedures: Standards and Requirements for Education Programmes*. In addition, reflecting that practice of radiological referral would be extended to existing practitioners (i.e. physiotherapists who are registered on the Physiotherapists Register), the Board assessed the NMBI *Standards and Requirements* against its existing *Standards of Proficiency* – the knowledge, skills and professional behaviours



required for entry into practice – and its *Code of Professional Conduct and Ethics for Physiotherapists*, which all registrants must adhere to.

The Board determined that the knowledge, skills and professional behaviours required of physiotherapists to act as referrers were not part of the threshold standards for entry into general physiotherapy practice.

Recognising the public protection need to establish regulatory oversight of the practice of physiotherapist referral for radiological procedures using ionising radiation, along with the assessment that this practice required knowledge and skills that were beyond threshold for entry into general practice as a physiotherapist and were, therefore, not articulated in its *Standards of Proficiency*, the Board – following approval of the Health and Social Care Professionals Council – made the decision to establish divisions of the Physiotherapists Register.

Section 36(2) of the *Health and Social Care Professionals Act 2005 (as amended)* provides for a Registration Board to establish divisions to its register, subject to guidelines issued by the Council in line with Section 31(7) of the Act. The Physiotherapists Registration Board, in order to facilitate the introduction of physiotherapist referrers as an area of specific professional practice, post-entry into practice, made the decision to divide its register into two divisions:

- a **general division** in which all registrants must be registered in order to use the title 'physiotherapist' or 'physical therapist'; and
- a **referral for radiological diagnostic procedures division**, for those physiotherapists who meet the regulatory requirements to deliver this service.

Physiotherapists Registration Board Register



Given the establishment of a separate division of its register and the assessment that the practice of referral for radiological diagnostic procedures was not part of the threshold standards for entry into practice, the Board was required to set distinct education and training standards for entry to the division for physiotherapist referrers



and approve education and training programmes designed to prepare physiotherapists to deliver this practice.

Building on the initial analysis and review work undertaken in the assessment of whether it was necessary to draft specific standards for physiotherapist referral for radiological diagnostic procedures, the Board prepared a draft set of education quality assurance standards and issued these for public stakeholder consultation.

The Board agreed different titles for its education and training standards for physiotherapist referral for radiological diagnostic procedures:

- *Standards of Competence for Referral for Radiological Diagnostic Procedures*: these articulate the knowledge and skills that a registrant must demonstrate on completion of an education and training programme specific to the practice of referring for radiological procedures; and
- *Requirements for Education and Training Providers offering Referral for Radiological Procedures Education and Training Programmes*: these identify the curriculum, assessment and quality assurance requirements an education provider must meet around how its referral for radiological procedures education programme is designed and managed to ensure that all graduates meet the *Standards of Competence*.

Public Consultation Process

A 4-week consultation period launched on Monday, 15 July 2024 and closed on Friday, 9 August 2024.

The consultation process sought to ensure that the draft requirements set by the Board are at the threshold level required for safe practice and entry to the professional register to ensure public protection and that they are proportionate and in line with the Board's obligations under Statutory Instrument 413 of 2022 which requires an assessment of proportionality to be conducted before the adoption of new or amending of existing regulations on professions, as required under Directive 2018/958 of the European Parliament and Council.

Following the close of the consultation process, the Board reviewed all the submissions received before finalising, issuing and publishing its revised *Standards of Competence* and *Requirements for Education and Training Providers*.

This report presents the feedback and the Registration Board's response to the feedback received in respect of the *Standards of Competence* and *Requirements for Education and Training Providers* that informed the final articulation and setting of its education quality assurance requirements.



Publicising the Consultation Process

Several channels were used to publicise the consultation process and invite the submission of observations:

- An advertisement was placed in The Irish Times newspaper on 23 July 2024 and An Seactain on 24 July 2024. (See Appendix 1)
- Information on the consultation was hosted on the CORU website. (See Appendix 2)
- CORU's social media platforms, including X (formerly Twitter) and LinkedIn, were utilised throughout the consultation. (See Appendix 3)
- An online feedback form was developed and a link to this form was included in the public consultation notice on the CORU website and stakeholder email communications. (See Appendix 4)
- An email highlighting the consultation process to an amalgamated list of physiotherapy and radiology education providers of approved programmes and relevant professional bodies.

CORU invited people to participate in the consultation process in several ways:

- They could visit www.coru.ie and choose to complete an online feedback form, print a copy of the form, and post it, or email it to CORU.
- They could email submissions to strategyandpolicy@coru.ie
- They could submit written submissions to Public Consultation, Strategy and Policy Unit, CORU, Infinity Building, George's Court, George's Lane, Smithfield, Dublin 7, D07 E98Y.



Overview of Responses to the Consultation

There were 65 responses to the public consultation:

Source	Number of Respondents
Online feedback form	62
Email submission	3
TOTAL	65

Respondents were asked to identify if they were offering feedback on their behalf or on behalf of an organisation:

Individual	56
Organisation	9

Feedback was received from the following respondents who agreed to be identified in the consultation report:

- IAPM - Irish Association of Physicists in Medicine
- Irish Association of Physical Therapists
- AsIAm
- ULHG Radiation Protection Unit Task Force (RPTF)



Acknowledgements

CORU would like to extend its appreciation and thanks to all those who participated in the consultation process.



Issues emerging from Consultation Process

The consultation questionnaire was divided into 5 sections:

- **Part One** – Feedback on the draft *Standards of Competence for Referral for Radiological Procedures*. The *Standards* were structured under three domains:
 - *Domain One: Professional Knowledge for Referral for Radiological Procedures*
 - *Domain Two: Justifying a Referral for Radiological Procedures*
 - *Domain Three: Safety and Communication*

Respondents were asked to consider each of the standards and identify whether they considered it to be set at *threshold*, *partly threshold* or *not threshold* for entry into practice as a physiotherapist referrer for radiological diagnostic procedures. Respondents who indicated the standard was either partly or not threshold were asked to provide a rationale to aid understanding of their response.

- **Part Two** – Respondents were asked to consider if there were any omissions in the proposed *Standards of Competence* and, if so, explain their rationale and propose wording to rectify the omission.
- **Part Three** – Feedback on the draft *Requirements for Education Providers offering Referral for Radiological Procedures Education and Training Programmes*. The *Requirements* is comprised of three overarching criteria, under which there are specific requirements articulated:
 - *Criterion One: Programme Design and Delivery*
 - *Criterion Two: Assessment*
 - *Criterion Three: Programme Governance, Management and Quality Assurance*

Respondents were asked to consider each criterion and identify whether they considered them to be set at *threshold*, *partly threshold* or *not threshold* for entry into practice as a physiotherapist referrer for radiological diagnostic procedures. Respondents who indicated the standard was either partly or not threshold were asked to provide a rationale to aid understanding of their response.

- **Part Four** – Respondents were asked to consider if there were any omissions in the proposed *Requirements for Education Providers* and, if so, explain their rationale and propose wording to rectify the omission.



- **Part Five:** Respondents were provided with an opportunity to provide any additional feedback or comment to be considered by the Physiotherapists Registration Board.

Email responses received were in the form of free text and did not follow the same structure as the questionnaire. When analysing these submissions, feedback against specific standards or requirements was extrapolated and included alongside the questionnaire feedback for those same standards and requirements, thereby ensuring all feedback received – regardless of the means of submission – was reviewed and considered by the Board.

A copy of the Online Feedback Form is provided in Appendix 4.

What follows below is the response to each of the standards and requirements received. This response is captured in two forms:

- firstly, the noting of high level themes that consistently emerged through the consultation feedback against multiple standards and/or requirements; and
- secondly, the Board's rationale for any amendments made to the *Standards* and *Requirements* that includes its response to both the qualitative and quantitative feedback received and what – if any – changes were made to the standard or requirement in light of this feedback.



High Level Thematic Issues emerging from Qualitative Feedback

In reviewing the feedback received from stakeholders, the Physiotherapists Registration Board identified a number of consistent themes that emerged in the qualitative responses from stakeholders against a range of individual standards and/or requirements **and** issues that were not specific to an individual standard or requirement, but with the articulation of the standards or requirements overall. These overarching or high-level issues are identified below, alongside the Board's response to them.

Issue One: Level of Detail and Description in *Standards of Competence*

Throughout the consultation feedback received, particularly in respect to the articulation of the *Standards of Competence*, a number of respondents noted that there should be greater level of specificity in the content of the education and training requirements, most notably that the standards statements should be more descriptive in the learning content required as part of the programme or that there should be an indicative syllabus included to supplement the *Standards* and *Requirements*.

While the Board noted the concerns raised, it reaffirmed in its discussions the underpinning drafting principle that regulatory standards should articulate the *outcome of learning*, be that an area of knowledge or skill, as opposed to prescribing how this outcome is to be achieved. In short, regulatory standards are concerned with the *what* of learning, not *how* of learning. It is for this reason that the *Standards of Competence* are set at a higher level as they focus on what knowledge or skill is required for entry into practice as a physiotherapist referrer for radiological diagnostic procedures, not the prescription of how this knowledge or skill is to be acquired. It is the responsibility of each education provider to design a curriculum and assessment strategy that delivers on the achievement of the *Standards of Competence*. In this regard, education providers are given the flexibility to design their education and training programme, allowing opportunities for innovation in teaching, learning and assessment, all while ensuring that it ensures each graduating student has demonstrated achievement of the *Standards*.

This approach aligns with how the Physiotherapists Registration Board drafted its *Standards of Proficiency for Physiotherapists*.

In light of these considerations, the Registration Board made the decision that it would retain its approach of drafting higher-level outcomes-based standards statements.

Issue Two: Clinical Governance Arrangements

Across the feedback received from stakeholders, a recurring concern identified related to the clinical governance arrangements that will facilitate the introduction of



physiotherapist referrers for radiological diagnostic procedures.

The regulatory remit of the Physiotherapists Registration Board, as defined under the *Health and Social Care Professionals Act 2005 (as amended)*, is to set the threshold level of knowledge and skills required for entry into practice. The issue of governance arrangements falls outside the scope of the regulator and, therefore, it is not for the Registration Board to set clinical governance arrangements. This responsibility falls to the relevant employer.

The Department of Health's *Physiotherapist Referral for Radiological Procedures Expert Working Group* has responsibility for the setting of national guidelines on clinical governance arrangements and, at the time of drafting this report, is in the process of engaging with stakeholders in order to finalise these arrangements.

In terms of regulatory assurance around the provision of safe care to members of the public, the Registration Board highlighted that under its *Standards of Competence*, at entry to the division for physiotherapists referrers for radiological diagnostic imaging procedures, graduates must be able to:

- **1.4:** Know the legislative and regulatory framework governing the use of ionising radiation and the requirements related to the practice of referring for radiological procedures
- **3.1:** Operate in accordance with legislation and national and/or local policies, guidelines and/or procedures for the referral of service users for radiological diagnostic procedures

In addition, all registered physiotherapists – including those practitioners on the division for physiotherapists referrers for radiological diagnostic imaging procedures – are subject to the *Physiotherapists Registration Board Code of Professional Conduct and Ethics* that requires that each registrant **obeys the laws, regulations and guidelines** that are specific to their area of practice:

- **7(a):** You must know and work within the laws, regulations and guidelines governing your practice and keep up to date with any changes in legislation or regulation or guidelines.

In addition, ultimately, all practitioners are required under Section 9 of their *Code of Professional Conduct and Ethics* to:

- **9(a):** You must act within the limits of your knowledge, skills, competence and experience.
- **9(c):** You must refer the service user to a colleague or other appropriate professional who has the skills, competence or experience to help the service user where a task is beyond your knowledge, skills, competence or experience.



Issue Three: Scope of Practice

Punctuating stakeholder feedback in the consultation response was a concern that the practice of referring for radiological diagnostic procedures was beyond the *scope of practice* of a physiotherapist. The implication of this feedback was that physiotherapists would not possess the knowledge and skills identified in the *Standards of Competence*.

In evaluating this feedback, the Physiotherapists Registration Board emphasised the difference between the *Standards of Competence* that it was setting and, what are known as, *Standards of Practice*.

The *Standards of Competence* set the *threshold* knowledge and skills that an individual must have on **day one** of their practice as a physiotherapist referrer for radiological diagnostic procedures. In contrast, *Standards of Practice* set the minimum acceptable levels of performance that a practitioner must meet in the delivery of services and care. The Registration Board does **not** set *Standards of Practice* and, therefore, the *Standards of Competence* articulated by the Board should **not** be understood as areas of skills and knowledge that are applicable to all physiotherapists.

As detailed above, in the assessment of what was required to facilitate the Minister for Health's decision to introduce physiotherapist referrers for radiological diagnostic procedures, the Physiotherapists Registration Board concluded that the knowledge and skills required to safely undertake this area of practice were not part of the threshold practice as a physiotherapist. It is for this reason that the conclusion was reached that specific education and training was required for physiotherapists to be able to practice referral for radiological diagnostic procedures safely. The *Standards of Competence* articulate the *additional* knowledge and skills required of physiotherapists in order to practice as referrers for radiological diagnostic procedures and are used by education and training programmes to design the curriculum and assessment strategy to ensure that graduates have achieved these competencies.

The Physiotherapists Registration concluded that the knowledge and skills needed for practice as a referrer for radiological diagnostic procedures was not part of the threshold training for physiotherapists and, as such, only those registered physiotherapists who had completed the regulatory approved training would be eligible for registration on the division for referrers for radiological diagnostic procedures.

Issue Four: Reference to Graduates

The Board noted feedback that identified a concern with the use of 'graduates' in the *Standards of Competence* and the potential that this could be mis-interpreted as



entry-level physiotherapists.

Following review, the Board concluded that 'graduate' refers to those who have graduated from an approved education and training programme for entry onto the division of the register for physiotherapist referrers. While it agreed that no change would be made to the use of the term in the *Standards of Competence*, the introduction to the document would emphasise the application of these *Standards* to only registered physiotherapist practitioners who are on the General Division of the Physiotherapists Register.



Standards of Competence for Physiotherapist Referrers for Radiological Diagnostic Procedures

Standard 1.1: Know the guidelines and the clinical application of the range of modalities used in diagnostic imaging

Registration Board Response

The Board noted that the majority of respondents considered this standard, as articulated, as set at threshold. It noted that some feedback raised concern around the reference in this standard to 'diagnostic imaging' and considered it should more specifically reference procedures that involve exposure to ionising radiation.

Following detailed consideration, the Board concluded that it was essential that a graduate has knowledge of a range of imaging modalities in order to be able to effectively justify the selection of a procedure that involves exposing a service user to ionising radiation.

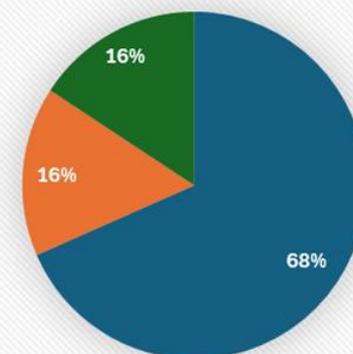
The Board also noted that the wording included in the Introduction to the *Standards of Competence* explicitly identified that the area of referral practice the standards it is setting refers to is those that involve exposure to ionising radiation.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Three and Four).***

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.

Number of Respondents:
n=15

Standard 1.1



■ Threshold ■ Partly Threshold ■ Not Threshold



Standard 1.2: Be able to critically evaluate the strengths and limitations of the range of modalities used in diagnostic imaging

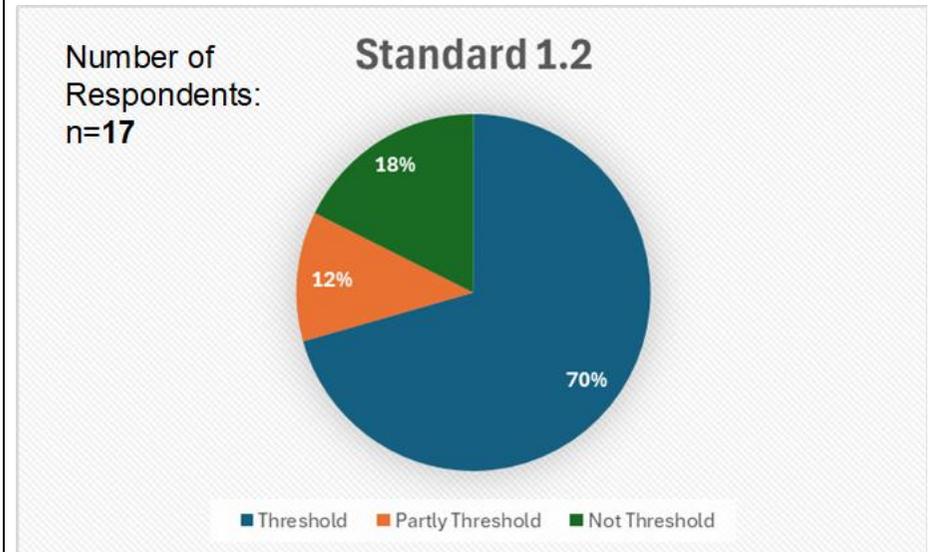
Registration Board Response

The Board noted the majority of respondents commented the standard was set at threshold level for safe practice. One qualitative comment suggested that greater clarity could be provided in the articulation of the standard through specification of its application only to modalities that involve exposure to ionising radiation.

Following detailed consideration, the Board concluded that it was essential that a graduate has knowledge of a range of imaging modalities in order to be able to effectively justify the selection of a procedure that involves exposing a service user to ionising radiation.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Three and Four).***

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.





Standard 1.3: Know the risks and contraindications associated with exposure to ionising radiation in clinical presentations across the lifespan, including children, persons of childbearing age and pregnant people

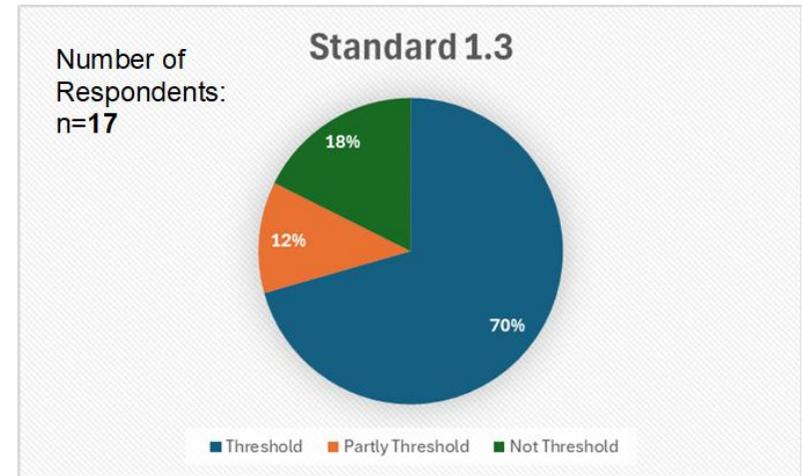
Registration Board Response

The Board acknowledged that the majority of respondents commented that the standard was set at threshold level for safe practice as a referrer for radiological diagnostic procedures.

One qualitative comment sought greater emphasis on distinguishing general safety issues from issues specific to ionising radiation safety. The Board highlighted that standards around general safety standards for entry into practice as a physiotherapist (and which apply to all non-ionising radiation modalities used) are covered in its *Standards of Proficiency for Physiotherapists*:

- **Standard 3.7:** Be able to prioritise and maintain the safety of both service users and those involved in their care
- **Standard 3.10:** Be able to recognise important risk factors and implement risk management strategies; be able to make reasoned decisions and/or provide guidance to others to initiate, continue, modify or cease interventions, techniques or courses of action and record decisions and concerns
- **Standard 3.12:** Be able to carry out and document risk analysis and implement effective risk management controls and strategies; be able to clearly communicate any identified risk, adverse events or near misses in line with current legislation/guidelines

In relation to specific safety procedures for the use of ionising radiation, the Board noted Domain Three of the *Standards of Competence* that address skills around safe practice.



***Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Three and Four).**

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.



Standard 1.4: Know the legislative and regulatory framework governing the use of ionising radiation and the requirements related to the practice of referring for radiological procedures

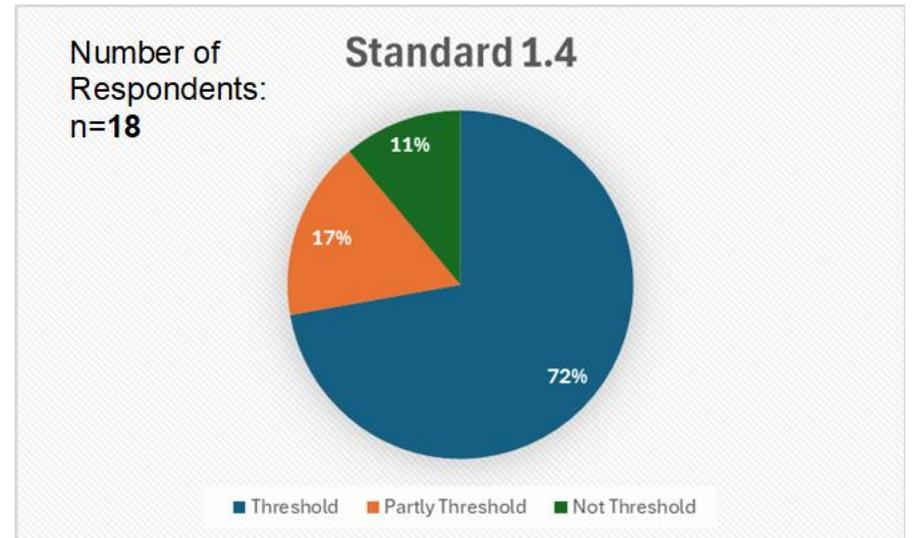
Registration Board Response

The Board noted the responses indicating that the standard, as written, was set at threshold level for entry to practice as a physiotherapist referrer for radiological diagnostic procedures.

One qualitative comment received against this standard queried whether the *Standards of Competence* should make reference to research and ethics. The Board highlighted that under the *Code of Professional Conduct and Ethics* detail the **ethical requirements**, including around conducting research in an ethical manner, in Sections 22 – 26, that all registered practitioners must adhere to.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Three and Four).***

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.





Standard 1.5: Know the principles of radiation protection, including justification and optimisation

Registration Board Response

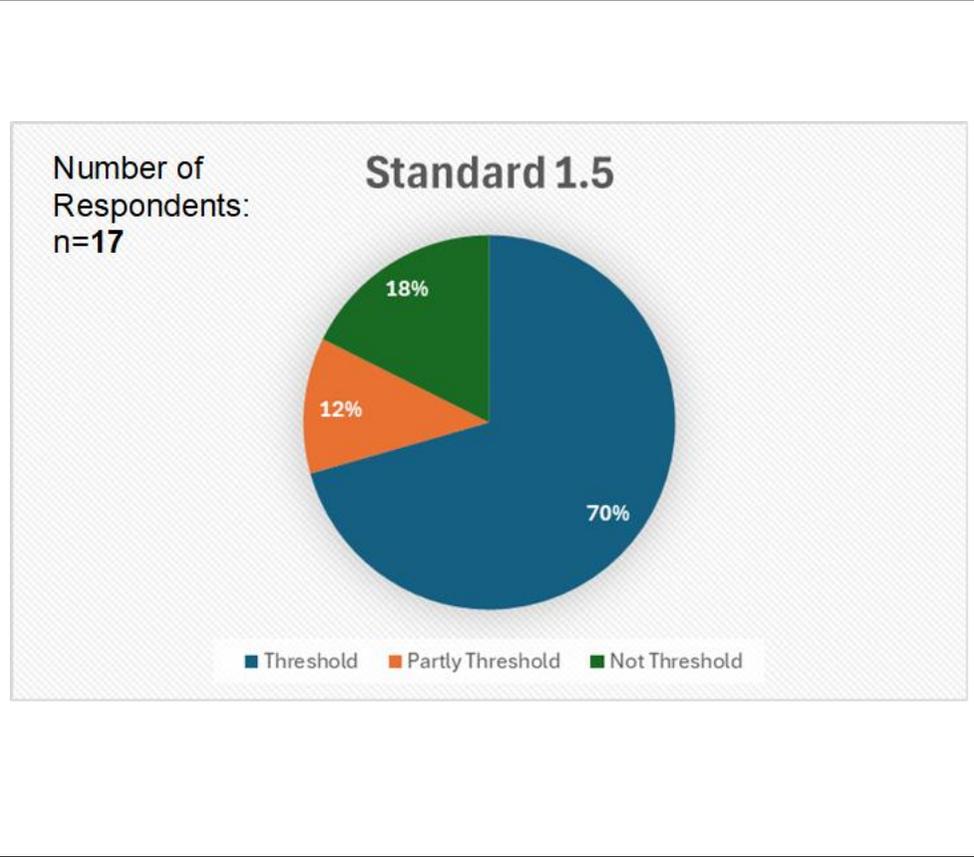
While recognising the strong level of support from respondents to the consultation that this standard was set at threshold for safe practice, the Board also recognised qualitative feedback from a respondent that raised whether reference to clinical audit should be included.

The Board noted that under the *Standards of Proficiency for Physiotherapists* for entry into general practice – at the threshold level – the skill of auditing and evaluating practice is included in Domain 3: Safety and Quality:

- **Standard 3.9:** Understand the need to monitor, evaluate and/or audit the quality or practice and be able to critically evaluate one’s own practice against evidence-based standards and implement improvements based on the findings of these audits and reviews.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Three and Four).***

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.





Standard 1.6: Know the clinical pathways for follow-up care as appropriate

Registration Board Response

The Board acknowledged that the majority of respondents commented that the standard was set at threshold level. In reviewing the qualitative feedback, it noted that a number of respondents had suggested a greater level of clarity around the intended outcome. The Board reaffirmed its intention in drafting the standard was concerned with ensuring that a practitioner has knowledge of what to do when incidental or unexpected findings are identified.

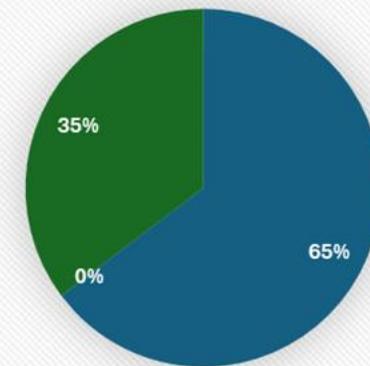
**Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Two, Three and Four).*

The Board agreed that the standard required minor rearticulation to ensure greater clarity around its intended application. The Board agreed the following revised wording:

Standard 1.6: Know the clinical pathways for follow-up care, including where critical and/or incidental findings are identified

Number of Respondents:
n=17

Standard 1.6



■ Threshold ■ Partly Threshold ■ Not Threshold



Standard 2.1: Identify service user suitability for referral for radiological procedures and select the clinically appropriate diagnostic imaging modality to address service user presentation

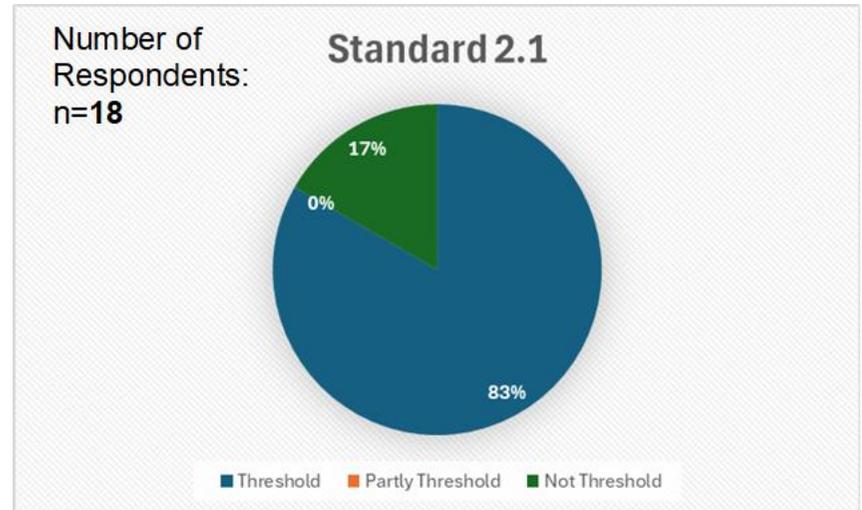
Registration Board Response

The Board noted the high level of support from respondents for this standard as written. One qualitative comment suggested that greater clarity could be provided in the articulation of the standard through specification of its application only to modalities that involve exposure to ionising radiation.

Following detailed consideration, the Board concluded that it was essential that a graduate has knowledge of a range of imaging modalities in order to be able to effectively justify the selection of a procedure that involves exposing a service user to ionising radiation.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Two, Three and Four).***

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.





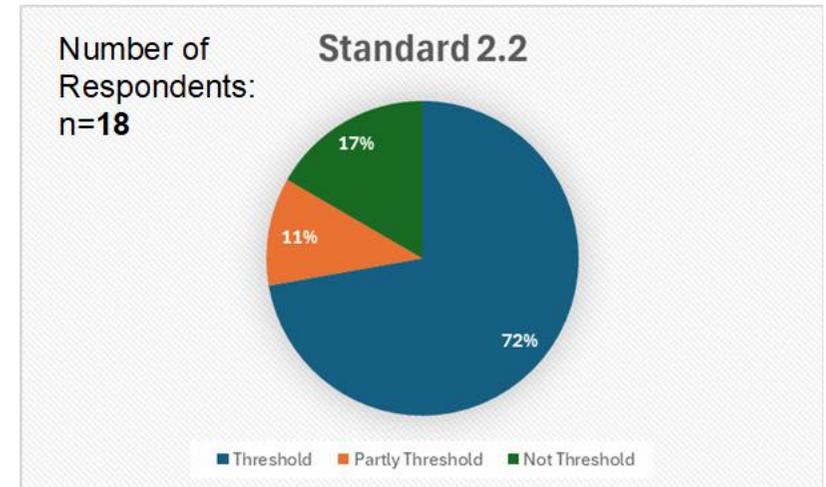
Standard 2.2: Apply the principle of justification for radiological referring using evidence-based imaging referral guidelines

Registration Board Response

The Board noted the responses indicating the standard was set at threshold level for safe practice.

**Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Three and Four).*

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.

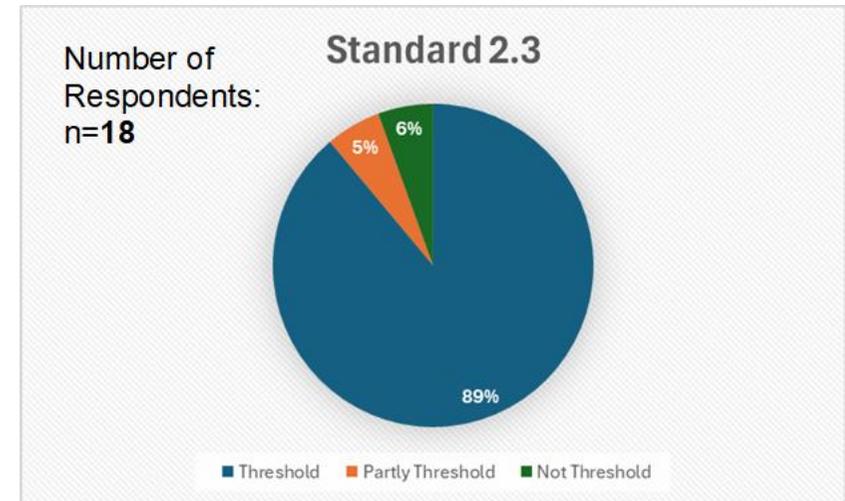




Standard 2.3: Justify the referral decision in written form through the production of clear, concise, timely and accurate documentation that provides the relevant and appropriate clinical information to aid the justification and optimisation process.

Registration Board Response

The Board acknowledged that the majority of respondents considered the standard to be set at threshold for safe practice. Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.





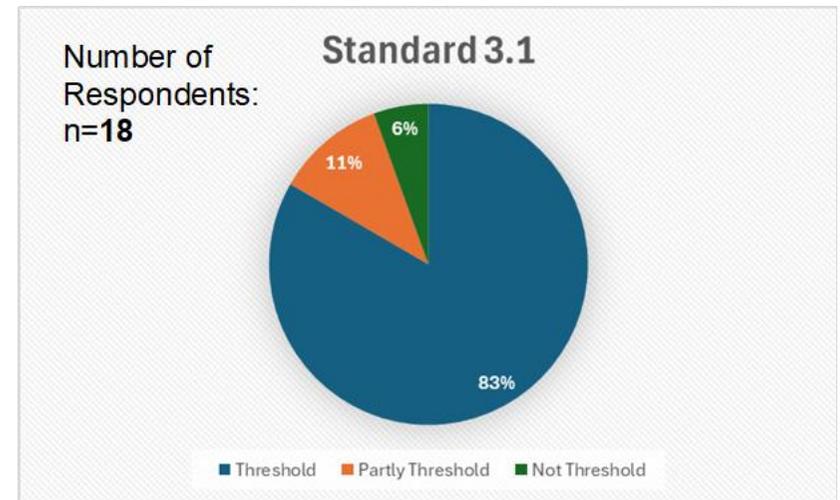
Standard 3.1: Operate in accordance with legislation and national and/or local policies, guidelines and/or procedures for the referral

Registration Board Response

The Board noted the majority of respondents supported the articulation of this standard as originally written.

**Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Two and Four).*

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.

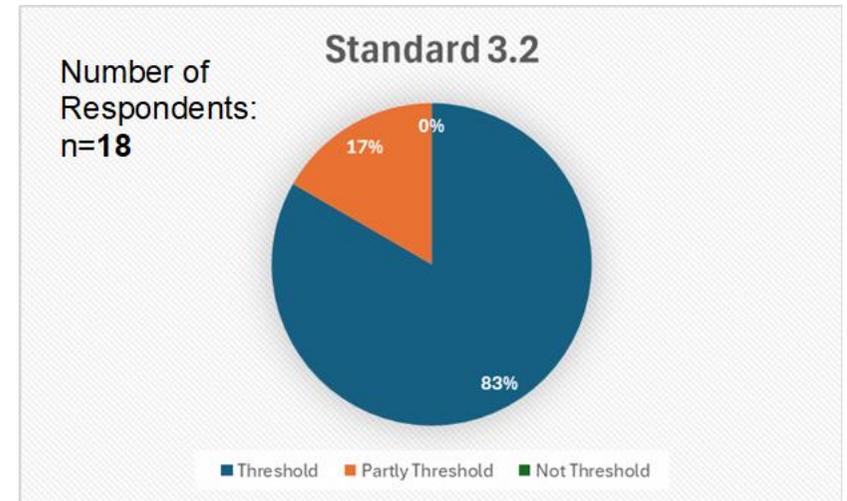




Standard 3.2: Identify the service user's pregnancy and breastfeeding status, as appropriate

Registration Board Response

The Board acknowledged the high level of feedback from respondents indicating this standard was set at threshold for safe practice. No qualitative feedback was received against this standard. Therefore, the Board made no changes to the original proposed wording of this standard.





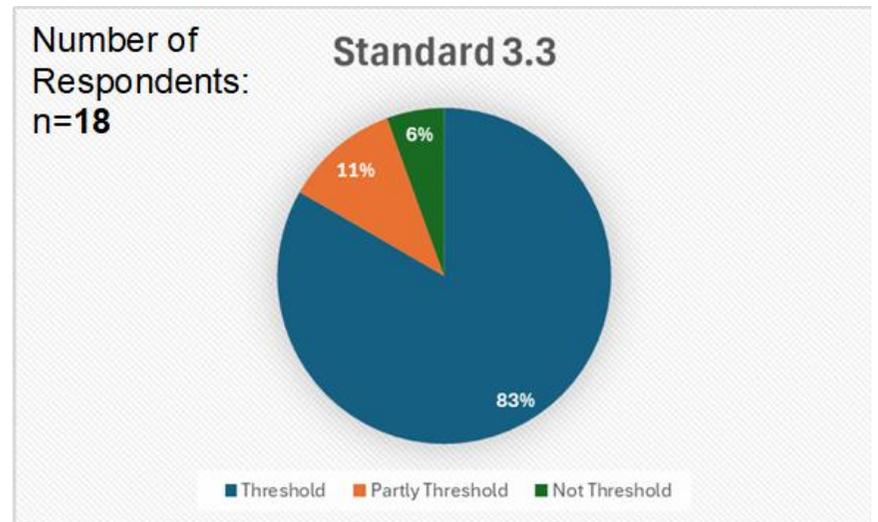
Standard 3.3: Be able to recognise the signs of clinical change during the referral process that may affect appropriateness and suitability for referral, and communicate with the multidisciplinary team as appropriate

Registration Board Response

The Board noted the majority of respondents were satisfied with the original proposed articulation of this standard.

**Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issue One).*

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.





Standard 3.4: Be able to communicate the role and responsibilities of a referrer for radiological diagnostic procedures

Registration Board Response

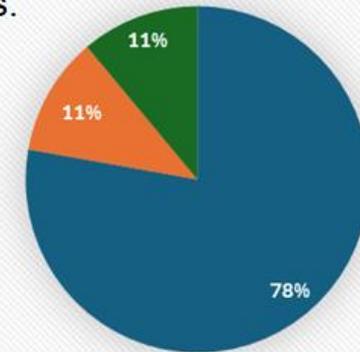
The Board noted the responses indicating this standard was set at threshold for safe practice.

**Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Two and Four).*

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.

Number of Respondents:
n=18

Standard 3.4



■ Threshold ■ Partly Threshold ■ Not Threshold



Standard 3.5: Apply communication approaches, appropriate to the service user, to explain the purposes, benefits and risks of diagnostic imaging, to enable the service user to make an informed decision on referral and follow-up care as indicated

Registration Board Response

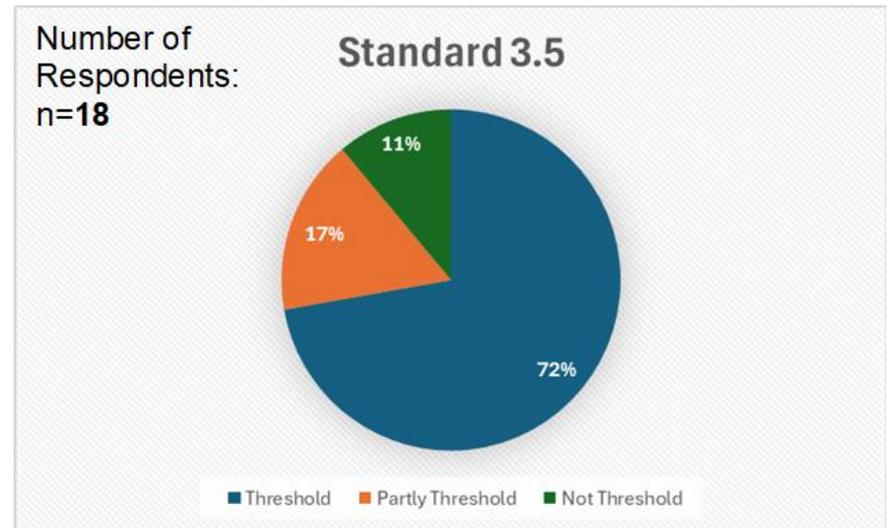
The Board recognised the high level of feedback received from stakeholders suggesting the standard, as written, was set at threshold level for safe practice.

One qualitative comment suggested that greater clarity could be provided in the articulation of the standard through specification of its application only to modalities that involve exposure to ionising radiation.

Following detailed consideration, the Board concluded that it was essential that a graduate has knowledge of a range of imaging modalities in order to be able to effectively justify the selection of a procedure that involves exposing a service user to ionising radiation.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issues One, Two and Three).***

Having reviewed all the feedback, the Board agreed that the standard, as written, was required for threshold entry to the division of the register and made no changes to the original wording.





Possible Omissions from *Standards of Competence*

Respondents to the public consultation were asked to consider if there were any possible omissions in the *Standards of Competence for Referral for Radiological Diagnostic Procedures* that the Registration Board should consider. 63.64% (n=7) of respondents commented that there were no omissions, while 36.36% (n=4) identified some areas of omission for consideration. The following table identifies the areas noted through the consultation process and the Board's response to these. While these areas are identified separately as areas of omission, it is important to note that they were also identified in feedback provided against individual standards.

Possible Omission Area	Proposed Wording/Feedback	Registration Board Response
<p>Descriptive Detail around Curriculum Content</p>	<p><i>Add extra domain. See 'Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education Programmes'</i></p> <p><i>need to pin down what is included in the scope of document</i></p> <p><i>Overall very broad statements with little detail.</i></p>	<p><i>Standards of Competence</i> set the knowledge and skills required of a graduate for entry onto a professional register. It is the responsibility of the education provider to identify the curriculum through which a student will be taught and assessed against all the <i>Standards</i>.</p> <p>Regulatory standards as drafted across all CORU's Registration Boards are not, therefore, prescriptive in setting explicitly what the content of a programme should be – e.g. the current <i>Standards of Proficiency for Physiotherapists</i> does not include an indicative curriculum. Regulatory standards are concerned with articulating the <i>what</i> of learning and, from these standards education providers determine the <i>how</i> of learning (i.e. the curriculum and assessment strategy).</p>



Possible Omission Area	Proposed Wording/Feedback	Registration Board Response
		<p>As such, the education provider is given flexibility to design an education programme and identify how it will deliver on the standards which is then assessed by each Board through its programme approval and monitoring process.</p> <p>Having reviewed all the feedback received, the Board agreed that the standards would retain their articulation as outcomes-based requirements and made no changes were proposed to the original wording.</p>
<p>Governance Arrangements</p>	<p><i>There is no description of structures or practical arrangements.</i></p> <p><i>Both presented documents are extremely weak with no evidence to support the statements provided. There is no information on clinical governance. Patient management. Report management. Roles & Responsibilities. No statement that candidate must be an experienced Senior Physiotherapists with advanced practice skills. No detail on appropriate clinical supervisor. No detail on service need. No detail on Scope of Practice. No detail on Risk Management. No detail on LIG. No detail on Monitoring, Audit & Outcome Management, Compliance. No detail on CPD & maintaining competence. No detail on local/national policy.</i></p>	<p>The <i>Standards of Competence</i> identify the knowledge and skills an individual physiotherapist requires for safe and effective practice as a referrer. These are the standards against which every education provider's education programme is assessed.</p> <p>The issue of governance arrangements falls outside the scope of the <i>Standards</i> and the Board's regulatory remit in setting its requirements for entry to its register.</p>



Possible Omission Area	Proposed Wording/Feedback	Registration Board Response
		<p>The Department of Health's <i>Physiotherapist Referral for Radiological Procedures Expert Working Group</i> has responsibility for the setting national guidelines for clinical governance and, at the time of drafting this report, is in the process of engaging with stakeholders in order to finalise these arrangements.</p> <p>The second comment from the consultation is broad in scope and includes a number of issues that extend beyond that of clinical governance:</p> <ul style="list-style-type: none"> • CPD and maintaining competence – met under the <i>Code of Professional Conduct and Ethics Requirement 10: Keep your professional knowledge and skills up to date</i> • Risk Management and Audit are addressed through the pre-registration education and training <i>Standards</i> in Domain 3: Safety and Quality <p><i>*The other issues identified have either been addressed above – e.g. more prescriptive detail in standards – or are outside the scope of the</i></p>



Possible Omission Area	Proposed Wording/Feedback	Registration Board Response
		<p><i>Standards – e.g. roles and responsibilities associated with position of employment are the responsibility and remit of each individual employer.</i></p> <p>The Board made the decision that no additional standard was required.</p>
Clinical Audit	<i>Participate in clinical audits</i>	<p>The <i>Standards of Proficiency for Physiotherapists</i> under Domain 3 includes reference to clinical audit and the need to evaluate practice and assess the findings of the audit process:</p> <p>Standard 3.9: Understand the need to monitor, evaluate and/or audit the quality or practice and be able to critically evaluate one’s own practice against evidence-based standards and implement improvements based on the findings of these audits and reviews.</p> <p>As articulated, the skill set required for clinical audit is common across different areas of physiotherapy practice and a standard around the skill of undertaking clinical audit is not</p>



Possible Omission Area	Proposed Wording/Feedback	Registration Board Response
		<p>required specifically for the practice of referral for radiological diagnostic procedures.</p> <p>The Board made the decision that no additional standard was required.</p>



Requirements for Education and Training Providers offering Referral for Radiological Procedures Education and Training Programmes

Criterion One: Programme Design and Delivery

Registration Board Response

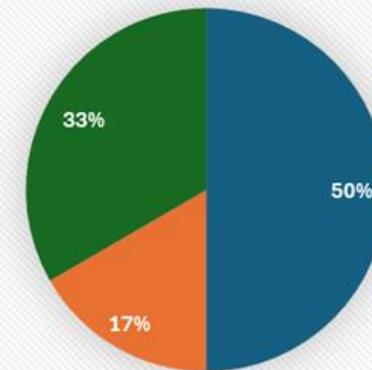
Criterion One contains 7 individual requirements around programme design and delivery. While the quantitative feedback suggests that half of respondents were of the opinion that the criterion was set at threshold level, a number specific requirements elicited qualitative comments from respondents.

Some respondents were of the opinion that the minimum number of episodes of supervised referral were too low. The Board made the decision to retain the proposed threshold of 10 episodes noting:

- This was the recommendation of the Expert Advisory Group and reflects the current threshold for nurse referrers education and training programmes;
- 10 episodes of supervised practice is typical in education and training for practitioners; and
- A student cannot graduate from the programme without having demonstrated achievement of all the *Standards*. This is why the current articulation includes 'no less than' 10 supervised episodes. The 10 episodes is the threshold required for safe practice, but – depending on the student – more episodes may be required to demonstrate achievement of the *Standards*.

Number of Respondents:
n=18

Criterion One



■ Threshold ■ Partly Threshold ■ Not Threshold



Other feedback from respondents sought greater specificity around the arrangements that must be in place around supervision. The Board noted that the requirements are written, in as far as possible, as outcomes-based requirements and that each education provider has the autonomy and flexibility to organise and structure its education and training programme. From a regulatory perspective, the principal concern for the Registration Board is that the arrangements designed by the education provider provide assurance that students on the programme are appropriately supervised and assessed as having demonstrated achievement of the *Standards*.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issue One).***

Having reviewed all the feedback, the Board agreed that each of the requirements in Criterion One, as written, were set at threshold for entry to the division of the register and made no changes to the original wording.



Criterion Two: Assessment

Registration Board Response

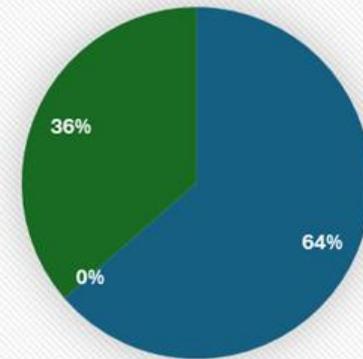
Criterion Two contains three individual requirements related to the assessment of the *Standards of Competence*. The Board noted that a majority of respondents noted support for the requirements as proposed.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issue One).***

Having reviewed all the feedback, the Board agreed that each of the requirements in Criterion Two, as written, were set at threshold for entry to the division of the register and made no changes to the original wording.

Number of Respondents:
n=18

Criterion Two



■ Threshold ■ Partly Threshold ■ Not Threshold



Criterion Three: Programme Governance, Management and Quality Assurance

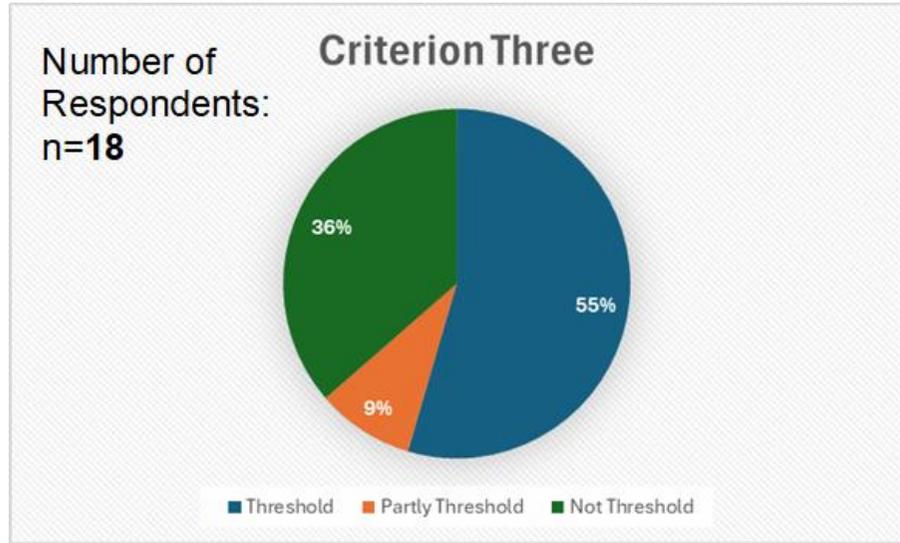
Registration Board Response

Criterion Two contains eight individual requirements related to the governance, management and quality assurance processes related to the education and training programme. The Board noted that a majority of respondents noted support for the requirements as proposed.

A number of respondents provided qualitative feedback against some of the individual requirements suggesting further detail be prescribed around how the education provider should manage programme and institutional level governance and quality assurance arrangements.

The Board noted that its requirements are written, in as far as possible, as outcomes-based statements and that each education provider has the autonomy and flexibility to organise and structure its education and training programme. From a regulatory perspective, the principal concern for the Registration Board is that the arrangements designed by the education provider provide assurance that students on the programme are appropriately supervised and assessed as having demonstrated achievement of the *Standards*. It is not the role of the regulator to prescribe how an education provider should manage the organisation and governance of a programme.

****Feedback and Board rationales identified under the High-Level Thematic Analysis above apply to this standard (Issue One).***



Having reviewed all the feedback, the Board agreed that each of the requirements in Criterion Three, as written, were set at threshold for entry to the division of the register and made no changes to the original wording.



Physiotherapists Registration Board



Possible Omissions from *Requirements for Education and Training Providers*

Possible Omission Area	Proposed Wording/Feedback	Registration Board Response
<p>Governance Arrangements</p>	<p><i>No mention of LIG participation and how a physio should implement this.</i></p> <p><i>again just to reiterate the importance of governance and follow up of results</i></p> <p><i>Alignment to Reporting Structure within the hospital – Importance of Aligning to Reporting Structure in terms of Quality</i></p> <ul style="list-style-type: none"> • <i>Reporting Structure to ensure Quality is maintained is crucial for the service to be beneficial to the end user. Inspections conducted by HIQA require evidence of this structure to be in place via RSC and LIG.</i> <p><i>Private physio referrals, management of incidental findings - Patients safety at risk if additional finding outside of physio scope are not managed.</i></p> <p><i>Clarity on how incidental findings will be managed outside the hospital setting</i></p>	<p>The <i>Requirements for Education Providers</i> identify quality assurance processes and mechanisms an education provider has in place to provide assurance that all graduates from an education and training programme has demonstrated achievement of the <i>Standards of Competence</i>.</p> <p>The issue of governance arrangements falls outside the scope of the <i>Requirements</i> and the Board's regulatory remit in setting its requirements for entry to its register.</p> <p>The Department of Health's <i>Physiotherapist Referral for Radiological Procedures Expert Working Group</i> has responsibility for the setting of National Guidelines for clinical governance arrangements and, at the time of drafting this report, is in the process of engaging with stakeholders in order to finalise these arrangements.</p>



Possible Omission Area	Proposed Wording/Feedback	Registration Board Response
<p style="text-align: center;">Clinical Audit</p>	<p><i>No mention of audit, poor detail only use of broad statements</i></p> <p><i>clinical audit & part of multidisciplinary team - See Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education Programmes</i></p>	<p>The <i>Standards of Proficiency for Physiotherapists</i> under Domain 3 includes reference to clinical audit and the need to evaluate practice and assess the findings of the audit process:</p> <p>Standard 3.9: Understand the need to monitor, evaluate and/or audit the quality or practice and be able to critically evaluate one's own practice against evidence-based standards and implement improvements based on the findings of these audits and reviews.</p> <p>As articulated, the skill set required for clinical audit is common across different areas of physiotherapy practice and a standard around the skill of undertaking clinical audit is not required specifically for the practice of referral for radiological diagnostic procedures.</p> <p>The Board made the decision that no additional standard was required.</p>



The Board noted that, in addition to the above areas, comments were submitted in relation to the following issues:

- selection process inviting applications for currently registered physiotherapists to undertake further education to train as a referrer for radiological diagnostic procedures and the wider application process managed by the Department of Health; and
- greater level of prescription in the *Requirements*.

While this issue was identified as an omission, it either lies outside the scope of this consultation process and does not relate to the revision of the Board's *Requirements for Education and Training Providers* or has been previously addressed in relation to feedback submitted in relation to the *Standards of Competence*.



Conclusion

The Physiotherapists Registration Board approved and adopted its revised *Standards of Competence for Referral for Radiological Diagnostic Procedures* and *Requirements for Education and Training Providers offering Physiotherapist Referral for Radiological Diagnostic Procedures Education and Training Programmes* at its meeting on 11 September 2024.

Following this decision, copies of the *Standards* and *Requirements* were published on the CORU website and all relevant stakeholders were communicated with to highlight the availability of the Board's education and training requirements online.

Copies of the documents are available on the CORU website here: <https://www.coru.ie/health-and-social-care-professionals/education/criteria-and-standards-of-proficiency/>



Appendix 1: Copy of Advertisement



Ag Rialáil Gairmithe Sláinte
agus Cúraim Shóisialaigh
Regulating Health +
Social Care Professionals

Public Consultation

The role of the Health and Social Care Professionals Council is to protect the public by promoting high standards of professional conduct, education, training and competence through statutory registration of health and social care professionals.

The Physiotherapists Registration Board currently seeks the views of the public, the professions, and other interested parties on its draft education and training requirements for physiotherapists referral for radiological diagnostic procedures:

- **Standards of Competence for Referral for Radiological Diagnostic Procedures**
- **Requirements for Education and Training Providers offering Physiotherapist Referral for Radiological Diagnostic Procedures Education and Training Programmes**

Further information on these consultations and details on how to make a submission, are available on <https://coru.ie/public-protection/public-consultations/>

The closing date for receipt of feedback and submissions is **5pm on Friday 9 August 2024**.

Submissions received after this time and date will not be considered.

CORU, Infinity Building, George's Court, George's Lane, Smithfield,
Dublin 7, D07 E98Y. T: 01 2933160 E: info@coru.ie W: www.coru.ie



Ag Rialáil Gairmithe Sláinte
agus Cúraim Shóisialaigh

Regulating Health +
Social Care Professionals

Comhairliúchán Poiblí

Is é an ról atá ag CORU, an Chomhairle um Ghairmithe Sláinte agus Cúraim Shóisialaigh, ná an pobal a chosaint ach ardchaighdeán iompair ghairmiúil, oideachais, oiliúna agus inniúlachta a chur chun cinn trí bhíthin chlárú reachtúil na ngairmithe sláinte agus cúraim shóisialaigh.

Tá tuairimí an phobail, na ngairmeacha agus páirtithe leasmhara eile anois á lorg ag Bord Clárúcháin na bhFisiteiripeoirí maidir leis na dréachtriachtanais oiliúna um atreorú le haghaidh gnáthaimh raideolaíocha dhiagnóiseacha arna dhéanamh ag fisiteiripeoir:

- **Na Caighdeán Inniúlachta um Atreorú le haghaidh Gnáthaimh Raideolaíocha Dhiagnóiseacha**
- **Riachtanais do Sholáthraithe Oideachais agus Oiliúna a Chuireann Clár Oideachais agus Oiliúna ar Fáil a Bhaineann leis an Atreorú le haghaidh Gnáthaimh Raideolaíocha Dhiagnóiseacha arna Dhéanamh ag Fisiteiripeoir**

Tá tuilleadh faisnéise faoin gcomhairliúchán agus sonraí faoin gcaoi ar féidir aighneacht a dhéanamh ar fáil ar <https://coru.ie/public-protection/public-consultations/5> i.n., **Dé hAoine, an 9 Lúnasa 2024** an spriocdháta chun aiseolas agus aighneachtaí a fháil.

Ní bhreithneofar aighneachtaí a gheofar i ndiaidh an ama agus spriocdháta sin.

CORU, Infinity Building, George's Court, George's Lane, Smithfield,
Dublin 7, D07 E98Y. T: 01 2933160 E: info@coru.ie W: www.coru.ie



Appendix 2: Notice of Public Consultation on CORU's website

Public Consultation: Physiotherapists – Draft Education and Training Requirements for Physiotherapists Referral for Radiological Diagnostic Procedures

The Minister for Health, Stephen Donnelly, announced on 1st July 2024 that physiotherapists working in relevant roles across the health service will soon be invited to apply to train for the authority to refer patients for radiological diagnostic procedures, including procedures that would involve exposure to ionising radiation such as x-ray. The first group of physiotherapists will begin training in University College Dublin (UCD) in September 2024. The development of this training programme is funded by the Department of Health through the Sláintecare Integration Innovation Fund.

There are extensive legislative requirements concerning the exposure to ionising radiation for the safety and protection of service users, practitioners and the public more generally, most notably: Statutory Instrument 30/2019: Radiological Protection Act 1991 (Ionising Radiation) Regulations 2019 and Statutory Instrument 256/2018: Basic Safety Standards for Protection Against Dangers Arising from Medical Exposure to Ionising Radiation.

Recognising the need to ensure public protection, the designation of appropriately trained physiotherapists to act as referrers for radiological diagnostic procedures requires regulatory oversight to set the standard of competence for the practice of referring.

Having reviewed the threshold entry level requirements to the Physiotherapists Register – the *Standards of Proficiency for Physiotherapists* – the Physiotherapists Registration Board determined that the knowledge, skills and professional behaviours required of physiotherapists to act as referrers were not part of the threshold standards for entry into general physiotherapy practice. As such, for practitioners to act as referrers they will be required to undertake additional education and training.

* Please note the mandatory entry requirements, as established by the Physiotherapist Referral for Radiological Procedures Expert Working Group convened by the Department of Health, for admission onto an education training programme for physiotherapist referral for radiological procedures, are accessible [here](#).

To this end, and to ensure physiotherapists are trained and have the competence to act as a referrer, the Physiotherapists Registration Board has drafted education and training requirements for physiotherapist referral for radiological procedures education and training programmes. These draft requirements are comprised of two documents:



- *Standards of Competence for Referral for Radiological Diagnostic Procedures*: these articulate the knowledge, skills and behaviours that a registrant must demonstrate on completion of an education and training programme specific to the practice of physiotherapist referral for radiological diagnostic procedures; and
- *Requirements for Education and Training Providers offering Physiotherapist Referral for Radiological Diagnostic Procedures Education and Training Programmes*: these identify the curriculum, assessment and quality assurance requirements an education provider must meet with regard to how its physiotherapist referral for radiological diagnostic procedures education and training programme is designed and managed to ensure that all graduates meet the *Standards of Competence*.

Copies of both documents are available **below** for you to access.

Education providers seeking to design and deliver an education and training programme to train physiotherapists to act as referrers for radiological diagnostic procedures will be required to seek approval of their programme by the Physiotherapists Registration Board. All programmes seeking the Board's approval must demonstrate how they meet all the requirements the Board will set out in its *Standards of Competence* and *Requirements for Education and Training Providers*.

Public Stakeholder Consultation

As part of the Physiotherapist Registration Board's process in setting the education and training requirements for physiotherapist referral for radiological diagnostic procedures education and training programmes, it is seeking feedback from stakeholders, including members of the professions, education providers, employers, professional bodies, as well as members of the public.

How to submit your views:

You are invited to submit your feedback – your personal views or on behalf of your organisation by:

- completing the online questionnaire, accessible [here](#);
- submitting written feedback via email to strategyandpolicy@coru.ie; or
- writing to: PRB Public Consultation, CORU, Infinity Building, George's Court, George's Lane, Smithfield, Dublin 7, D07 E98Y

Closing Date:

The consultation will run for 4 weeks, opening for feedback on **Monday, 15 July 2024** and closing at **5pm on Friday, 9 August 2024**. Any submissions received after this date will not be considered.

Physiotherapists Registration Board



Following the close of the stakeholder consultation period, CORU will review all the feedback received as part of this public engagement and prepare a report of findings for the Physiotherapists Registration Board.

The Board will review and evaluate the feedback received, making any changes or amendments to the draft *Standards of Competence* and *Requirements for Education and Training Providers*, before agreeing and issuing final versions of the documents to education providers.

If you have any questions or if you require further information, please contact CORU by email strategyandpolicy@coru.ie.

We thank you in advance for your participation in this consultation.



Appendix 3: Copy of Online Feedback Form

Physiotherapists Registration Board (PRB)

Stakeholder Consultation Questionnaire: Standards of Competence for Referral for Radiological Procedures and Requirements for Education and Training Providers offering Referral for Radiological Procedures Education and Training Programmes

Data Protection and Freedom of Information

Completion of this questionnaire is voluntary. By completing it, you are allowing your responses to be analysed by CORU for the purpose of seeking feedback on the *Standards of Competence for Referral for Radiological Procedures and Requirements for Education and Training Providers* offering post-registration education and training in referral for radiological procedures for physiotherapists. A report on the survey will be compiled and shared with the Physiotherapists Registration Board.

The information you provide to this survey will be stored in a secure and confidential manner by CORU. It will only be used for the purposes outlined above, and it will be maintained as per the CORU's record retention policy. CORU uses SurveyMonkey to gather feedback on our public consultations. Full details of how your information is processed via SurveyMonkey are documented in this [privacy policy](#).

Please be advised that submissions made to CORU are subject to the provisions of the Freedom of Information Act 2014.

Do you agree to the terms above? <i>By selecting 'Yes' you are confirming that you consent to providing your answers to the questions in this questionnaire.</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you contributing to this survey in:	Personal Capacity <input type="checkbox"/> On behalf of an Organisation <input type="checkbox"/>
If on behalf of an organisation, please specify:	
Please indicate if you would like your name and/or organisation to be kept confidential and excluded from the consultation report	Include in Consultation Report <input type="checkbox"/> Exclude from Consultation Report <input type="checkbox"/>

About CORU

CORU is Ireland's first multi-profession health and social care regulator. Our role is to protect the public by promoting high standards of professional conduct, education, training, and competence through statutory registration of health and social care professionals.

Physiotherapists Registration Board



CORU was set up under the Health and Social Care Professionals Act 2005. We are an umbrella body made up of the Health and Social Care Professionals Council and Registration Boards, one for each profession named in our Act. The designated professions under the Act are clinical biochemists, counsellors, dietitians, dispensing opticians, medical scientists, occupational therapists, optometrists, orthoptists, physical therapists, physiotherapists, podiatrists, psychologists, psychotherapists, radiation therapists, radiographers, social care workers, social workers and speech and language therapists.

About the Consultation

This consultation is seeking your feedback on two documents drafted by the Physiotherapists Registration Board:

- *The draft Standards of Competence for Referral for Radiological Procedures*
- *The draft Requirements for Education and Training Providers offering Referral for Radiological Procedures Education and Training Programmes*

Both documents are accessible on the CORU website [here](#).

Proportionality of Proposed Regulations

[Directive 2018/958 of the European Parliament and Council](#) – on a *proportionality test before the adoption of new regulations for professions* – establishes rules for proportionality assessments to be conducted by EU countries before the adoption of new professional regulations or the amendment of existing regulations. The aim of the Directive is to:

- Prevent undue restrictions on access to or the pursuit of professional activities, and
- ensure transparency and the proper functioning of the EU internal market.

The Directive was transposed into Irish law in August 2022 through Statutory Instrument [413/2022](#).

The setting of *Standards of Competence for Referral for Radiological Procedures and Requirements for Education and Training Providers*, as part of the Board's work towards opening a division of its register for physiotherapists who are able to refer for radiological procedures, requires that an assessment of proportionality be undertaken before the adoption of the *Standards of Competence and Requirements for Education Providers* by the Board.

This public consultation and report findings form a key component of the proportionality assessment CORU completes.



All proportionality assessments, following completion and submission to the European Commission, are accessible on the *Regulated Professions Database*, available [here](#).

Consultation Section [1]: *Standards of Competence for Referral for Radiological Procedures*

The *Standards of Competence for Referral for Radiological Procedures* detail the professional knowledge, skills, and behaviours required of practitioners for the safe practice of referring for radiological procedures, including procedures involving ionising radiation. There are three domains of standards of competence:

- *Domain One: Professional Knowledge for Referral for Radiological Procedures*
- *Domain Two: Justifying a Referral for Radiological Procedures*
- *Domain Three: Safety and Communication*

Please Note

The *Standards of Proficiency for Physiotherapists* detail the threshold level knowledge, skills and professional behaviours required of new entrants into the profession. These are different education and training requirements to what you are being invited to provide feedback on as part of this consultation process.

The *Standards of Competence for Referral for Radiological Procedures* apply only to current practitioners who are registered with the Physiotherapists Registration Board and set out the knowledge, skills, and behaviours that a registrant must demonstrate upon completion of an education and training programme specific to the practice of referring for radiological procedures.

The *Standards of Competence* set out what is required for safe and effective practice for referral for radiological procedures. They are the threshold standards the Physiotherapists Registration Board considers necessary to protect the public.

In reviewing the *Standards of Competence*, you are reminded that practitioners on the physiotherapists register have already demonstrated achievement of the *Standards of Proficiency for Physiotherapists* and, as registered professionals are subject to their *Code of Professional Conduct and Ethics for Physiotherapists*.

You can access the *Standards of Proficiency for Physiotherapists* [here](#) and the *Code of Professional Conduct and Ethics for Physiotherapists* [here](#).

In this section of the consultation, you are invited to review each of the individual standards of competence and assess whether each is set at the threshold level for the practice of referring for radiological procedures.



Please be reminded that in this instance the term threshold refers to the minimum requirements for safe and effective practice.

- 'Consider threshold' means that the minimum requirement detailed is appropriate.
- 'Partly or not threshold' could refer to either being more or less than the minimum requirement.

Please indicate in the comment box if you consider it more or less than the minimum requirements and provide a brief rationale.

Standard		Feedback
1.1	<i>Know the clinical application – and critically evaluate the strengths and limitations – of a range of modalities used in diagnostic imaging.</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
1.2	<i>Know the risks associated with exposure to ionising radiation in clinical presentations across the lifespan, including children, persons of childbearing age and pregnant people</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
1.3	<i>Know the legislative and regulatory framework governing the use of ionising radiation and the requirements related to the practice of referring for radiological procedures</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		



Standard		Feedback
1.4	<i>Know the principles of radiation protection, including justification and optimisation</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
1.5	<i>Know the guidelines for diagnostic imaging referral</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
2.1	<i>Identify service user suitability for referral for radiological procedures and select the clinically appropriate diagnostic imaging modality to address service user presentation</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
2.2	<i>Apply the principle of justification for radiological referring using evidence-based imaging referral guidelines</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
2.3	<i>Justify the referral decision in written form through the production of clear, concise, timely and accurate documentation that provides the relevant and appropriate clinical information to aid the justification and optimisation process</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>



If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why

Standard		Feedback
3.1	<i>Operate in accordance with national and/or local policies, guidelines, and/or procedures for the referral of service users for radiological procedures</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
3.2	<i>Apply pregnancy enquiry and breastfeeding enquiry as appropriate</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
3.3	<i>Be able to recognise the signs of clinical change during the referral process that may affect appropriateness and suitability for referral, and communicate with the multidisciplinary team as appropriate</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
3.4	<i>Be able to communicate the role and responsibilities of a referrer for radiological procedures</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Standard		Feedback
3.5	<i>Apply communication approaches – appropriate to the service user – to explain</i>	Consider Threshold <input type="checkbox"/>



	<i>the purposes, benefits and risks of diagnostic imaging to enable the service user to make an informed decision</i>	Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the standard to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Consultation Section [2]: Gaps/Omissions in the Standards of Competence

In this section of the consultation, you are invited to consider whether there are any gaps or omissions in the draft *Standards of Competence for Referral for Radiological Procedures*.

If you feel there are omissions, note these in the table below, along with your proposed wording to rectify an omission. It is important that if you feel that a standard has been omitted, that you explain your rationale so we can better understand your comment and consider whether it is something that should be included in the final document.

The *Standards of Competence* set out what is required for safe and effective practice to referral for radiological procedures. They are the threshold standards the Physiotherapists Registration Board considers necessary to protect the public.

In reviewing the *Standards of Competence*, you are reminded that practitioners on the physiotherapists register have already demonstrated achievement of the *Standards of Proficiency for Physiotherapists* and, as registered professionals, are subject to their *Code of Professional Conduct and Ethics for Physiotherapists*.

Do you consider there to be any omissions from or factual errors in the draft <i>Standards of Competence</i> ?	Yes <input type="checkbox"/> No <input type="checkbox"/>
----------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------

If yes, please complete the following as appropriate:

Domain	
Suggested Omission/Error	
Proposed Wording to rectify omission	
Rationale for Comment	



Domain	
Suggested Omission/Error	
Proposed Wording to rectify omission	
Rationale for Comment	

Domain	
Suggested Omission/Error	
Proposed Wording to rectify omission	
Rationale for Comment	

Consultation Section [3]: Requirements for Education and Training Providers offering Referral for Radiological Procedures Education and Training Programmes

The *Requirements for Education and Training Providers offering Referral for Radiological Procedures Education and Training Programmes* identify the requirements an education provider must meet around how its referral for radiological procedures programme is designed and managed to ensure that all graduates meet the *Standards of Competence*.

The *Requirements* are comprised of three overarching criteria, under which there are specific requirements articulated:

- *Criterion 1: Programme Design and Delivery*
- *Criterion 2: Assessment*
- *Criterion 3: Programme Governance, Management and Quality Assurance*

In this section of the consultation, you are invited to review each of the criteria and the specific requirements articulated under each and assess whether each criterion is set at the threshold level.

Please be reminded that in this instance the term **threshold refers to the minimum requirements**.

- 'Consider threshold' means that the minimum requirement detailed is appropriate.
- 'Partly or not threshold' could refer to either being more or less than the minimum requirement.



Please indicate in the comment box if you consider it more or less than the minimum requirements and provide a brief rationale.

Criterion		Feedback
Criterion 1	<i>Programme Design and Delivery</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the criterion to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Criterion		Feedback
Criterion 2	<i>Assessment</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the criterion to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Criterion		Feedback
Criterion 3	<i>Programme Governance, Management and Quality Assurance</i>	Consider Threshold <input type="checkbox"/> Do Not Consider Threshold <input type="checkbox"/> Party Threshold <input type="checkbox"/>
<i>If you do not consider the criterion to be at threshold level or if you consider it to be partially threshold, please explain why</i>		

Consultation Section [4]: Gaps/Omissions in the Requirements for Education Providers offering Referral for Radiological Procedures Education and Training Programmes

Having reviewed the *Requirements for Education Providers offering Referral for Radiological Procedures Education and Training Programmes*, you are now invited to consider if there are any gaps or omissions in the requirements articulated.

If you feel there are omissions, you should note these below, along with your proposed wording to rectify an omission. It is important that if you feel that a criterion has been



Suggested Omission	
Proposed Wording to rectify omission	
Rationale for Comment	

omitted that you explain your rationale so we can better understand your comment and consider whether it is something we should include it in the final document.

Do you consider there to be any omissions from the <i>Requirements for Education Providers offering Referral for Radiological Procedures Education and Training Programmes</i> ?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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If yes, please complete the following as appropriate:

Suggested Omission	
Proposed Wording to rectify omission	
Rationale for Comment	

Suggested Omission	
Proposed Wording to rectify omission	
Rationale for Comment	

Consultation Section [5]: *Additional Feedback*

CORU welcomes your contribution to this consultation process.

If you do have any further general comments related to these documents, please include it below and describe the relevant issue for our consideration.

Issue	
General Comment	
Rationale for Comment	

Issue	
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General Comment	
Rationale for Comment	

Issue	
General Comment	
Rationale for Comment	

Consultation Section [6]: Submission

Thank you for completing this survey.

If you have any questions about this consultation, please email strategyandpolicy@coru.ie



Appendix 4: Copy of Social Media Posts

CORU Ireland @CORUIreland · Aug 1, 2024

The Physiotherapist Registration Board is seeking feedback from stakeholders, including members of the professions, education providers, employers, professional bodies, as well as members of the public on the following draft documents:

- o Standards of Competence for Referral for Radiological Diagnostic Procedures
- o Requirements for Education and Training Provider offering Physiotherapist Referral for Radiological Diagnostic Procedures Education and Training Programmes.

The opening of the consultation follows the announcement of the Minister for Health, Stephen Donnelly, on the 1st July 2024 that physiotherapists working in relevant roles across the health service will soon be invited to apply to train for the authority to refer patients for radiological diagnostic procedures, including procedures that would involve exposure to ionising radiation such as x-ray.

Full details are available on the following webpage: [coru.ie/public-protect...](https://www.coru.ie/public-protection/public-consultations)
Consultation closes 5pm Friday 09 August 2024

CORU
Public Consultation
Now Open!
Physiotherapists Registration Board
Consultation on draft education and training requirements for physiotherapists referral for radiological diagnostic procedures
Full details on www.coru.ie/public-protection/public-consultations

ISCP and 9 others

1 7 8 1.5K