

REPORT

FIFTEENTH GENERAL MEETING OF THE NATIONAL COUNCIL HELD IN BLOEMFONTEIN ON 1 AND 2 JULY 1983

OPENING ADDRESS

The opening address was given by Dr. D. P. van Velden, one of our Honorary Vice-Presidents. He was the organiser of a congress where all occupations (medical and non-medical), that use exercise as a medium, spoke together for the first time and defined their different scopes. This was the beginning of biokinetics, and although problems are envisaged, the fear of physiotherapists being phased out is unfounded. Physiotherapists do not recognise their own high educational standards, nor how vital they are in health care, but they need to take cognisance of changes and trends in health care.

There are tremendous possibilities in preventative health care in areas such as cardiac rehabilitation, where education and attitudes to, for instance smoking are very important. The Health Act of 1977 now places responsibility for this kind of health care with local authorities and posts and programmes are already developed in areas such as Johannesburg, Vereeniging and Van der Byl Park. However these programmes are run by non-registered people and physiotherapists need to sell themselves and educate those in charge. There is a great scope for community programmes of this type, as well as, for instance, developing programmes for caring for the aged.

Dr. van Velden suggested that, due to our limited manpower, we delegate preventative care of the *normal* to physical educationalists, after developing these programmes ourselves. However, the physiotherapist needs to show *enthusiasm* for this work. He pointed out that rehabilitation can now be paid for by Medical Aid. He mentioned a research project into sport and particularly health care centres or gymnasia. Of fifty such studios visited, only one (run by a physiotherapist), complied with specifications and was run along scientific lines. The others had a lot of shiny apparatus, sold health foods and were not keen to show their facilities.

There is a great need for rehabilitation of sport injuries, but few physiotherapists have the necessary knowledge or can deal with sport injuries. Muscle power and control is

most important and re-education of joint stability should be resorted to rather than surgery. Here the physiotherapist needs to motivate the athlete/sportsman to abide by the enforced rest period and follow up rehabilitation.

Although the general medical fraternity does not always recognize or realise the role the physiotherapist can play, those in special centres or units do recognise both the abilities as well as the limitations of physiotherapists. However, no rules or laws will protect physiotherapy. This can only come about by sound scientific methods of testing modalities and techniques. The use of machines that have not been tried and tested is becoming a gimmick in the eyes of the medical profession.

He concluded that physiotherapy has a great future, but needs to become involved in prevention. Enthusiasm and active involvement, for instance in sport, as well as the maintenance of high standards of practice is essential. No other profession can fulfill this need.

CHAIRMAN'S REPORT

In her report Mrs Mathias outlined those matters which NEC raised with the Professional Board for Physiotherapy. The amendment of Ethical Rule (21) I, which would allow physiotherapists to treat patients in consultation with, rather than on referral from, medical practitioners, has been accepted by Medical Council, but has not yet been promulgated. Three degree courses have been added to the list of registerable qualifications since 1981: these are B.Phys.T. offered by Pretoria College and the University of Pretoria; B.Sc. Physiotherapy, Medunsa; B. Physiotherapy, offered by the University of Western Cape. The urgent need for physiotherapy in the field of psychiatry as well as the problems of such expansion, were discussed. The SAMDC has agreed to an annual review of tariffs and the next Tariff Committee will meet in September 1983. A diploma in biokinetics has been set up at Potchefstroom University. Details of criteria for selection, syllabus and mode of registration of physiotherapy assistants have been agreed and this register will fall under the Professional Board.

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As regards post-registration courses, interest has been expressed in Industrial/Occupational Physiotherapy and Ergonomics and the possibility of having a course on these subjects has been investigated. Western Province Branch has held a seminar on Industrial/Occupational Physiotherapy. Exercise re-training (physical rehabilitation of persons suffering from chronic disease) also aroused interest, doubt and confusion. It was found to be included in under-graduate courses, but there may be a need to update the knowledge of practising physiotherapists and it could certainly be a field for post-graduate study. The courses on the treatment of adult hemiplegia, run by Miss Joan Mohr, were successful and follow-up courses on this and basic NDT have been suggested.

The revision of the career and salary structure by the Commission for Administration was implemented this year. It is felt that there are definite limitations in this structure and further comment and recommendations have been submitted. It is hoped that other provinces will follow the lead of the Transvaal Provincial Administration who have appointed a control physiotherapist at Head Office. The problems encountered in rural physiotherapy, especially the treatment of patients referred by district surgeons have not been resolved. This is no longer the responsibility of the Department of Health and the Provincial Authorities have been approached on this matter.

Three meetings of the National Committee of Representatives have been held since the last Council meeting and participation by branches, groups/associations and observers has increased a feeling of professional unity. All members are welcome to attend any meeting of NEC or NCR when in Johannesburg. In conclusion Mrs. Mathias expressed concern about the few physiotherapists to have availed themselves of the possible registerable post-graduate qualifications that are available. There is great involvement in existing fields of practice, but community practice and social involvement with other organisations is still less than satisfactory. She also encouraged the younger generation of physiotherapists to become more involved in matters concerning the Physiotherapy Society and thanked those of the older generation who have worked hard to build up a firm foundation for the Society.

APPOINTMENTS INFORMATION SECRETARY

Miss Blake reported that enquiries come from many different countries, but most frequently from the United Kingdom, Germany, Holland, Australia, New Zealand and more recently Belgium. The information sheet sent to enquirers has been revised and salary scales are continually being updated. She requested up to date information on employment possibilities in their areas from Branches.

STANDING COMMITTEES

Editorial Board

Mrs. Gilder outlined the Editorial Board as reconstituted after the last Council meeting, as well as resignations and new members co-opted. Few research or review articles are received and thus a central theme is set for each issue and articles are requested. Even this is not always successful. It is essential that more research and review articles are received from physiotherapists, as well as abstracts of interesting/relevant student projects, treatment notes, abstracts from journals and informative articles on specific areas and units. Circulation is a great problem and members, as well as training centres, are reminded that changes of address or a change in student numbers be submitted to the relevant

Branch Secretary. The Secretaries need to submit these to NEC as soon as possible. The Journal has grown to a stage where a few volunteers can no longer process it in their spare time. She requested that all Branches and main centres contribute to the Journal if they wish it to be truly representative. Miss Chatterton (Treasurer) presented the financial statements for 1981/82 as well as an estimate for 1982/83 and these were adopted.

Resolutions pertaining to the Editorial Board were taken next. It was agreed that a Memorandum of Agreement be signed between the SASP and the Publications Division of the Medical Association of South African (MASA). The new Editor will be responsible for the Editorial side only and MASA will then deal with printing and publishing, advertising and circulation. It was also agreed that the launching grant of R900, as well as the Journal levies payable in July 1983 and January 1984 agreed to, be paid out of the existing journal fund. The remaining balance will be invested and maintained as a separate fund for the duration of the agreement between the SASP and MASA. It was further agreed that the incoming N.E.C. investigate the possibility of publishing manifestoes and curriculum vitae of persons prepared to stand for election to the Professional Board for Physiotherapy in the December issue of the Journal, before the present board is due to be dissolved in order to inform the membership of impending new board elections, as well as making known persons for nomination. In future Branch newsletters may retain charges made for advertisements in order to off-set cost of newsletter production.

Financial Report

Mrs. Victor outlined the income and expenditure of the Society. Although increased subscriptions in effect from the last Council Meeting, as well as the increased interest rate, have increased the income of the Society, major escalation in costs of salaries, W.C.P.T. subscriptions, postage and telephones, printing and stationery, as well as N.E.C. travel, has more than offset this. The Propagation of Professional Knowledge Fund has maintained steady growth and assistance was given to the voting delegate, alternate voting delegates and speakers to the Congress and Council Meeting of W.C.P.T. The course on the treatment of Adult Hemiplegia showed a very small loss. The balance sheets for the general fund and P.P.K. Fund were accepted.

Resolutions relating to finance were taken next and the following were adopted: the entrance fee will be increased, from R10 to R15; annual subscriptions for full practising members will be raised to R35, and other categories will be adjusted accordingly; when newly qualified physiotherapists apply to join the Society within six months of qualification the entrance fee shall be waived provided they were student members for their final two years; the category of reduced subscription will fall away; subscriptions may be increased by 10% per annum during the period between Council meetings should the N.E.C. in consultation with Branches deem it necessary; the travelling allowance of N.E.C. members not residing in the area in which the headquarters of the Society is situated will be reviewed; to qualify for a grant/loan the applicant should have been a member of the Society for a minimum period of two years; and the insurance premium will be increased from R10 to R13,50 per annum in order to raise the limit of indemnity under the malpractice insurance scheme from R10 000 to R25 000. The details of the allocation of annual subscriptions were also accepted and will be forwarded to Branch Secretaries and Treasurers.

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Registration Committee

Miss de Bruin read this report and outlined the functions of the committee, viz. to process applications for registration and to make recommendation through N.E.C. to the Professional Board for Physiotherapy as to the acceptability of any particular qualification. The committee drew up an application form incorporating suggestions from the N.E.C. and the Lecturers' Group. An official form based on this original form is now sent by the Board to each applicant for completion both by himself and the training centre issuing the qualification. This has proved very valuable although difficulties are still encountered in assessing the amount of practical training, especially as regards treatment of patients rather than observation or demonstration. Minimal standards for registration after diploma and degree courses, as recommended by the Society, were accepted by the Board. It has become obvious that certain qualifications, previously accepted for registration, are no longer of a registrable standard and it was recommended to the Professional Board that these applicants be required to complete an application form for assessment by the Committee and be accepted on merit. The introduction of a category of "limited registration" has proved valuable as this enables applicants who would otherwise have been refused any form of registration, to register. There has been an influx of applications from Belgium, particularly of male physiotherapists interested in private practice, but this would not be possible under limited registration and salaries in hospitals and institutions are a definite deterrent to the numbers accepting the offer of limited registration. A number of Polish physiotherapists immigrated to this country and were offered limited registration for one year as a lack of documentary evidence and a language problem made assessment of their qualifications impossible. Heads of Department employing these physiotherapists are urged to send in their report to the Professional Board at the end of the year of employment. The Committee appealed to all senior physiotherapists who have foreign trained physiotherapists on their staff to assist the Committee by forwarding comments on the standard of training and capabilities of such persons. The Committee also appealed to senior physiotherapists travelling overseas to obtain as much information as possible on the physiotherapy situation in the countries they visit and to send a report to the Registration Committee.

SUB-COMMITTEES

Action Committee

Mrs. Glauber reported on this Committee which was formed after the last Council meeting in 1981. The brief of this committee was to assess the role that physiotherapy should play in fulfilling future community health needs; to formulate a plan of action in which all physiotherapists in training or qualified, will be adequately equipped to fulfil these needs; to devise means of educating the general public as to what physiotherapy can offer, with the emphasis on preventive physiotherapy; to consider the appointment of a public relations officer and to embark on a fund raising campaign in order to finance such a venture. The original committee consisted of nine people but was gradually reduced to four people as members resigned for personal reasons. The committee's first project was to employ the public relations firm D. Hilton-Barber Associates at a fee of R3000 to do a communications audit in order to identify areas needing attention. Thanks are due to the Branches and Groups that raised funds for this venture. Key target groups were identified. Physiotherapists who are not members of the

SASP were persuaded to join the Society. Information pamphlets were distributed to inform the membership about the SASP and liaison officers were also established in various centres to contact physiotherapists, doctors, etc. for nationwide public relations projects. A survey was conducted in the Southern Transvaal branch to establish why members do not attend meetings. Short articles on different subjects have been published in monthly MASA newsletters but more are needed for continuity. Branches and Groups were encouraged to contact doctors personally, especially in private and hospital practice in order to "sell" physiotherapy by expertise, knowledge and personality. Excellent talks and papers given by competent physiotherapists at medical congresses have helped improve the image of physiotherapy in the eyes of the medical profession. A slide tape programme aimed at the medical profession will be completed later this year. Programmes and articles on the radio, T.V., in the press and even on film brought physiotherapy to the attention of the public in general. The Obstetric Association assisted in the production of a record on ante-natal exercises. There are several ideas for the immediate future but it will involve the co-operation of all branches. Some suggestions are a "back care" or "neck care" week similar to "dental week".

A great deal of discussion arose out of this report. An amended resolution, namely that the Action Committee have power to appoint ad hoc committees in Branches from time to time, was passed.

Constitution Committee

Miss Irwin-Carruthers pointed out that over the last few meetings of the National Council a large number of amendments have been made both to the Constitution and the bye-laws of the Society. Since these necessitated other amendments in other parts of the Constitution and/or bye-laws, a complete revision of the Constitution was undertaken by the Committee over the last few months. Afrikaans translations of the already passed amendments are available on request. The amendments fell into the following three categories: minor corrections of grammar or spelling which in no way alter the essential meaning of the text; minor alterations of text in order to achieve consistency of wording throughout the Constitution, and/or renumbering and/or transposition of certain items from Bye-laws to Constitution or vice-versa, again not altering the essential meaning of the text; finally true amendments to the Constitution which will have to be passed by the National Council, but in most instances again these were minor alterations needed for clarity or consistency. The first two types of amendments were accepted and the third type discussed. It was also agreed that the incoming N.E.C. be empowered to approve these minor amendments/corrections. It is of interest to note that temporary membership has been abolished and that a new standing committee, namely an Education Committee, has been established. Ethical rule J 45 (a) was amended to conform with the wording now accepted by the Professional Board for Physiotherapy to read as follows:

Not to undertake the treatment of any patient unless that patient has been referred by a medical practitioner or a registered dentist, or in close co-operation with such registered practitioner, except in an emergency.

Note that this wording has been accepted by the S.A.M.D.C. but has not yet been promulgated by the Minister of Health. Once the revised Constitution is printed it will be made available to all members and student members.

AD HOC COMMITTEES

Co-ordinating Committee for the International Year of the Aged

Professor Beenhakker reported that many of the projects started last year will continue into the future. Some of these are student visits to the lonely aged, giving social contact, physical and moral assistance and referring the elderly to other services where needed; classes were started at Old Age Homes, selected polyclinics and clubs for Senior Citizens; a guide on the organization and presentation of geriatric classes was drawn up and a manual compiled to teach aides the correct handling of the frail aged; nursing assistants were taught handling of frail aged and there proved to be a great need for this. The role of physiotherapy in the management of the aged was illustrated by means of symposia, photographic displays and handouts. There is still a great deal that needs to be done in furthering the needs of the aged in the community as well as in homes for the aged, particularly in view of the growing numbers of the aged.

Research

At the last Council Meeting it was thought that the Society could either give advice and guidance to those embarking on research or could record on-going research projects at undergraduate and postgraduate levels. Professor Beenhakker reported that a small committee investigated the possibilities and drew up a questionnaire requesting information on the type of research intended or being done, and whether researchers would be prepared to share their knowledge. Many replies were received and lists were drawn up. However, the response to invitations to join this Research Group was very disappointing, especially from people known to be actively involved in research. No solutions to this were offered at the meeting.

BRANCH REPORTS

Branch representatives read the various reports and presented their financial statements. Membership has increased in most of the branches. A very interesting variety of lectures, symposia and courses were offered by the Branches over the past two years. The smaller Branches are particularly to be commended for initiative in organising an interesting programme despite financial constraints. Mrs. Victor, Treasurer, noted that there seemed to be discrepancies between the numbers of members in the reports and the capitation fees paid, and requested Branch Secretaries and Treasurers to investigate the matter.

SPECIAL GROUPS

Lecturers' Group

Miss Eksteen, elected as Chairman at the meeting in June this year, read the report. No annual meeting of the group has been held since the last Council meeting but it has been involved in several projects. A report on industrial physiotherapy and ergonomics defined terms, outlined what is being done in other countries and suggested content of courses in industrial physiotherapy and ergonomics at undergraduate and postgraduate level. Theory and/or clinical practice in psychiatry has been included in the undergraduate syllabus of most training centres and postgraduate training in psychiatry at Branch level was suggested. A survey of the field of exercise retraining revealed that most training centres include this in undergraduate training and a request went out to set up postgraduate training in this field as well. The group felt that there is a need for the establishment of a central Educational Committee as a standing committee of N.E.C. Updating of the scope of physiotherapy has been taken on as a long term project. The constitution of the group has been

extensively revised and has been brought in line with that of the Society itself. A quarterly Newsletter, put out in turn by the various Universities, has dealt with new ideas in teaching, examining, research, etc., as meetings of the Group have been infrequent.

Under constitutional resolutions the membership (with voting power) and the period for which office bearers of the Group are eligible, were accepted.

Manipulative Therapists' Group

Mrs. Cunningham reported that the headquarters moved from Cape Town to Johannesburg in April 1982. At the meeting of the International Federation of Orthopaedic Manipulative Therapists (I.F.O.M.T.) held in Sweden in May 1982, the M.T.G. was represented by Mr. Rebele and South Africa was granted member-elect status. It was hoped to bring Mr. Moshe Nachtoomy to South Africa for a postgraduate course in July 1983 but this has been postponed to possibly July 1984 due to the stringent pre-course requirements. In Cape Town the 75 hour course, in conjunction with the University of Stellenbosch, was held in 1982 and another is currently being run. In Johannesburg a 75 hour course will be completed in July 1983 and in Pretoria in November 1983. Natal Coastal Branch is planning a 75 hour course in Durban in 1984. The formation of a Northern Transvaal Branch of the M.T.G. will be ratified at the next A.G.M. of the Group and it is hoped that Natal Coastal will follow suit. The Cape Interest Group now has a membership of 42. Two members of the Group gave a short talk on Audiomix in an attempt to correct the impression given by the Radio Doctor in an earlier programme that physiotherapy played only an insignificant role in the treatment of backache.

National Hospital Group

Miss Ocker noted that the membership stayed steady though there is tremendous turnover of hospital employed physiotherapists. The Transvaal, Natal and Cape Branches have had interesting and varied programmes and it is hoped that the Free State will set up a branch soon. The new dispensation as regards salaries and career structure was received with mixed feelings and certainly seems to be discouraging to entry-grade physiotherapists. The feasibility of an exchange system with other countries proved negative on both sides, but informal or private inter-hospital exchange arrangements can be made effectively. No post structure for physiotherapy assistants seems to exist, although Natal has some posts. The certificate of competence to be issued at completion of the course of training for physiotherapy assistants has been designed and suitable handouts which could be used as training material have been collected. Job descriptions for the different levels of physiotherapists will have to be reviewed in view of the changed post structure under the new dispensation. The Intensive Care Sub-group has been dissolved and is now incorporated as an integral part of the Hospital Group. A course on counselling skills and interpersonal processes was run by two clinical psychologists from U.N.I.S.A.

Obstetric Association

Mrs. Glauber reported that regular meetings have been held and Newsletters sent out to members, physiotherapy schools and exchanged with Canada and Australia. Original articles, well referenced, were requested in order to maintain the standard as compared with colleagues in the U.K., Canada and Australia. A motivating memorandum based on information obtained from gynaecologists and general practitioners in a questionnaire, will be submitted to the next

Tariff Commission to establish a new item, Obstetric Physiotherapy, in the fee structure. The Group is concerned about the number of non-registered persons involved in ante-natal care and training centres were asked to motivate research in this area. Several interesting lectures and courses were held in the period being reviewed, members were interviewed on the radio and had meetings with representatives of women's magazines.

The Education Sub-Committee has been involved in drawing up a leaflet on setting up in practice, a check-list on aspects of ante-natal training, a pamphlet for information on obstetric physiotherapy to doctors, labour report forms (filled in by labour ward staff) and re-designing the ante and post natal exercise sheet given out by Nestlé. A new register was compiled and circulated in 1982, but will have to be updated soon.

Private Practitioners' Association

Miss Blackwood reported that the Executive Committee, based in Cape Town until September 1982, dealt with the last Tariff Commission, designed a new format for the Private Practitioners' Directory and published a pamphlet on starting a new private practice. Since September 1982 the Executive Committee is now based in Natal. Honorary Life Membership of the P.P.A. has been confirmed on Mr. Vaughan, Miss Winter, Mr. Kilbey and Mr. Jaakke. She outlined the work that went into the first Tariff Commission meeting which resulted in gazetting of the fees in 1981, Workman's Compensation in January 1982 and recently Medical Aid and Workman's Compensation in February 1983. The next Tariff Commission meeting will be in September 1983. The group feels that Malpractice Insurance is much too low and needs to be drastically increased. The brevity of treatment of patients in hospital by private practitioners and the complicated coding of accounts have caused some concern, as has the professional appearance of some physiotherapists in private practice. It is felt that this does not enhance the image of the profession.

REPRESENTATIVES ON INTERNATIONAL AND NATIONAL ORGANISATIONS

National Council for the Care of Cripples

Mrs. Mathias reported that the annual meeting in 1982 was held in Durban, and that interesting reports from different regions of the country, as well as Government, Provincial and Professional Associations concerned with the rehabilitation of disabled persons, were represented. The Cerebral Palsy Sub-Division held its annual meeting in 1982 in Pietermaritzburg and amongst visits, one was made to St. Christopher's School which has grown from a treatment centre started by Phillippa Spooner. The 1982 meeting of the Cerebral Palsy Division was held at the Eros School and included visits to the new and old schools and treatment centres around Cape Town. She urged physiotherapists to utilise the opportunities to attend meetings of the N.C.C.C. as observers and to present items on the agenda. She thanked the N.C.C.C. for their continued assistance in the form of office space.

National Council of Women

Mrs. Utermöhlen reported that she had attended local meetings and had requested local representatives to attend meetings of the Council when held in other regions. She felt continued liaison with this organisation is valuable to the Society.

South African National Council for the Care of the Aged

Professor Beenhakker reported on important points made at the Southern African Conference on the Care of the Aged held in September 1982 in Johannesburg. Today there is no need for an increase in the number of homes for the aged but an urgent need to re-orientate the management of these homes. They are increasingly becoming a haven for the physically and mentally infirm elderly rather than accommodation for the aged, which is desirable. However, services such as appropriate nursing, medical and social care will have to be developed for elderly persons in the community in order to provide the active elderly with greater security. More teaching units, including assessment units, need to be established and need to link with rehabilitation, day care centres/hospitals and the community to provide holistic geriatric care. The return home from the acute hospital situation has proved particularly problematic. Better knowledge, research and teaching of, and by the health professions, will engender enthusiasm and skilled care for the aged.

A motion that the Society affiliate to the South African Gerontological Association was carried. This is a newly formed multi-disciplinary professional body, providing a forum at which medical and allied professions concerned with the science of ageing can combine their knowledge to the benefit of the present and future aged population, whereas the SA Council for the Aged is more a service organisations providing care for the aged.

South African Association for Health Education

Mrs. Kvasz informed Council that this organisation has now become regionalised, has no national committee and national meetings will be called on an ad hoc basis only. Regional committees have been set up in the Western Cape, Eastern Cape, Southern Transvaal and Northern Transvaal and she suggested that local Branches appoint representatives to these regional committees. The national representative could then liaise with these regional representatives and collate information for regular reports to N.C.R. Discussion on the role of this Association ensued and the conclusion was that physiotherapists could certainly contribute a great deal to health education.

South African Neuro-developmental Therapy Association

Affiliation to S.A.N.D.T.A. was ratified at the last Council meeting. Membership is open to physiotherapists, occupational therapists and speech therapists who have successfully completed an approved basic two month course in N.D.T. There is a category of associated membership for other interested persons. The Association publishes a journal three times a year and the present editor is a physiotherapist. The executive moved from Pretoria to Cape Town in 1982 and presently consists of physiotherapists. The constitution of the Association was amended to allow the election of an Editorial Board and an Educational Subcommittee. The latter is to revise the requirements for certification as instructor in N.D.T. and regulations for the conduct of courses in South Africa are also under review. Most courses have been offered by the University of Stellenbosch as the only certified instructor/co-ordinator is employed there, but other courses have been run at C.P. School by S.A.N.D.T.A. A course on early evaluation and treatment is planned for September and another three courses are planned before the end of 1983.

South African Sports Association for the Physically Disabled

This report was read by Mrs. Klemp. The 1983 National Games were held in Stellenbosch in April. Teams from 14

affiliated regions competed and junior and senior games were run concurrently. Two hundred and nine seniors and two hundred and sixty-five juniors from the following categories competed: paraplegic or other spinal cord involvement; cerebral palsied; amputees; and visually handicapped. Classification is based upon neurological and/or functional levels and aimed at providing fair competition amongst athletes of similar disability. In each category there are again several sub-divisions or classes. The introduction of a fifth disability group — les autres — is being investigated and will cover physical disabilities not classifiable under the above categories. At the National Games 81 South African and 9 world records were bettered. The 26 Springbok athletes chosen to represent South Africa at the 1983 Stoke Mandeville Games in England were announced at the end of the games.

World Confederation for Physical Therapy

Miss Bowerbank, voting delegate for South Africa, reported on the 10th World Council Meeting and International Congress of W.C.P.T. held in Sweden in 1982. Six papers were presented by South Africa. As the Council meeting was held concurrently with the congress, delegates missed much of the scientific programme. Delegates from 43 different countries attended the Congress where 180 scientific papers were presented at concurrent sessions. The standard of the papers were very variable as they were vetted by the member organisations themselves and not the host country. The main topics of the Congress were: man's response to muscular training and exercise; health and nursing care, research; pain treatment; pedagogics; and 23 free paper sessions.

The prolonged meeting of the Council was concerned mainly with ethical rules, articles of association and finance. Debate centred particularly around referral and first contact practitioners and it was finally agreed that the ethical rule should require that the constitution, bye-laws and ethical code of a member organisation be according to the laws and regulations governing the profession in that country. Further ethical principles accepted stated that physiotherapists shall recognise not only the responsibilities but also the limitations of their professional functions; and that they shall carry out with loyalty and skill any physical treatment, in responsible consultation with registered medical or dental practitioners, such treatment being aimed at restoration, maintenance and improvement of mental and physical fitness of the patient.

A new Executive Committee was elected as follows:

Miss List (Germany) as President
Miss Odeen (Sweden) as First Vice-President
Mr. Teager (U.K.) as Second Vice-President
and Mr. Tironasak (Thailand) as Third Vice-President
Canada, Australia, Poland, Nigeria, Japan and America as general members.

The next World Congress was to be held in Bombay, India, but as India could not guarantee that visas would be issued to all member country delegates, it has been decided to change the venue.

MOTIONS/RESOLUTIONS

It was agreed to establish an Education Committee as a Standing Committee of the Society. The amendment to the Constitution to allow this was also agreed to. It was further agreed that future Congress organisers should advertise the Congress and call for papers in a Journal approximately 15 months prior to the Congress in order to enable physiotherapists engaged in research and clinical trials to read free papers. As part of long-term planning it was agreed that the venue of the following two meetings should be decided at each Council meeting in order to enable host branches to

plan well in advance. The N.E.C. or a subcommittee is to draw up an official guideline for the use of Branches hosting future Congresses or Council meetings. After long and involved discussion it was agreed that the Society should delineate its objectives for the next ten years with a view to long term planning. It was agreed that the Society requests the S.A.M.D.C. to provide details of the allocation of the registration fees paid by physiotherapists and also request the Professional Board to consider inspecting hospitals and other clinical facilities in addition to training centres. The *Scope of Physiotherapy*, a booklet on career information, is to be revised and a new format will be considered.

Under additional motions constitutional matters such as the abolition of temporary membership and clarification of the ethical rule governing the sale of goods to patients were carried. Consideration is to be given to the use of the P.P.K. fund to build up a library of teaching modules which would be available to members of the S.A.S.P. The National Hospital Group requested that the basic requirement for admission to training of physiotherapy assistants as well as the ratio of physiotherapists to physiotherapy assistants in rural areas be re-considered. The establishment of a remuneration committee is to be considered. The Professional Board for Physiotherapy will be requested to review Rule 8 (i) in their rules specifying the acts or omissions in respect of which disciplinary steps may be taken since confusion may arise with the use of the term assistant. It was agreed that the Society should examine its role in the health care system and delineate its objects for the future with a view to long term planning. The S.A.S.P. is to suggest to the Professional Board for Physiotherapy that it requests S.A.M.D.C. to change its name to read the South African Medical, Dental and Supplementary Health Professional Council.

ELECTIONS:

Honorary Appointments

Vice Presidents: Professor M. Boes (to be confirmed)
Professor J. N. de Klerk
Genl. N. J. Nieuwoud
Professor G. Pistorius
Professor P. V. Tobias
Groups - P.P.A. J. C. Jaakke
P. J. Kilbey
W. E. G. Vaughan
B. Winter

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The next Council meeting will be hosted by the Southern Transvaal Branch in 1985 and the one thereafter by the Western Province Branch in 1987.

J. A. C. GILDER