Journal of Laws 2015, Item 1994

25 September 2015

Act on the Profession of Physiotherapy

Chapter 1

General Provisions

Art. 1. 1. The Act sets out the principles governing:

1) physiotherapy code of practice;
2) physiotherapy licence;
3) professional education of physiotherapists;
4) post-graduate education of physiotherapists;
5) professional accountability of physiotherapists.

2. The Act also sets out the organisation and tasks of the governing organisation of physiotherapists as well as the rights and duties of its membership.

Art. 2. The profession of physiotherapy is an independent health care profession.

Art. 3. 1. The governing organisation of physiotherapists (hereafter referred to as the “governing organisation”) represents physiotherapists and works to uphold proper standards of practice in interest public interest.

2. Membership of physiotherapists in the governing organisation is compulsory.

3. The governing organisation is pursuing its tasks in an autonomous manner and pursuant to provisions of this Act.

4. The Polish Chamber of Physiotherapists (hereafter referred to as “PChP) is a Warsaw-based organisational unit of the governing organisation granted legal personhood.

5. The governing organisation is overseen by the minister with health care portfolio in forms and scope set out in this Act.
Chapter 2

Physiotherapy Code of Practice

Art. 4. 1. In the course of practice a physiotherapist exercises a professional duty of care, follows the physiotherapy code of conduct, respects patients’ rights, complies with safety requirements, and adheres to the latest standards of excellence in health care.

2. Practising physiotherapy consists of delivery of health services, this to include in particular:

1) functional diagnostics of patients;
2) qualifying for, planning, and providing physical therapy;
3) qualifying for, planning, and providing kinetic therapy;
4) qualifying for, planning, and providing massage;
5) prescribing medical devices pursuant to provisions issued on the basis on art. 38 sec. 4 of the Act on Drug Reimbursement, Foodstuffs Intended for Particular Nutritional Uses and Medical Devices, dated 12 May 2011 (Journal of Laws 2015, item 345, 1830, and 1991);
6) selecting medical devices to match the particular needs of the patients;
7) training patients in the proper use of medical devices;
8) engaging in physiotherapeutic prevention through promotion of fit and healthy lifestyles among persons of all ages in an effort to protect the public against disability;
9) issuing opinions and assessments regarding functional condition of persons in physiotherapy as well as progress of physiotherapeutic treatment;
10) training patients in compensation mechanisms and their adaptation to the changed potential of bodily functions and abilities.

3. Practising physiotherapy also consists of:

1) teaching physiotherapy and advancing continuing development of physiotherapists;
2) pursuing scientific activity and conducting research in physiotherapy;
3) managing physiotherapy practitioners;
4) employing persons in administrative roles tasked with preparation, organisation, and oversight of health care services;

4. Health services specified in sec. 2 are delivered independently by physiotherapists holding the following degrees:
1) Master’s degree obtained in a manner specified in art. 13 sec. 3 pt. 1;

2) Master’s degree obtained in a manner specified in art. 13 sec. 3 pt. 2-7, and at least 3 years of physiotherapy practice;

3) Bachelor’s degree obtained in a manner specified in art. 13 sec. 3 pt. 2 or 3, and at least 6 years of physiotherapy practice;

4) Physiotherapy technician obtained in a manner specified in art. 13 sec. 3 pt. 8, and at least 6 years of physiotherapy practice.

5. A physiotherapist specified in sec. 4 pt. 3 and 4 shall not be able to qualify for physical therapy or kinetic therapy, nor provide health services specified in sec. 2 p. 5 and 9.

6. A physiotherapist pursuing practice in the form of business activity is a health care entity providing health services under Healthcare Activity Act, dated 15 April 2011 (Journal of Laws 2015, item 618, with subsequent changes).

7. Guided by the need to ensure safety of the public, the minister with healthcare portfolio shall introduce a regulation providing a detailed list of professional activities delivered under particular professional tasks as well as the corresponding levels of education required for these activities.

**Art. 5.** 1. A professional title “physiotherapist” is granted to persons holding a physiotherapy licence.

2. The title specified in sec. 1 is protected under the law.

3. “Physiotherapy Specialist” is a professional title granted either to a physiotherapist who completed speciality training and passed the State Physiotherapy Speciality Exam (hereafter referred to as the “SPSE”), or a physiotherapist whose title was recognised by a decision specified in art. 35.

**Art 6.** 1. A physiotherapy practitioner works collaboratively with other health care practitioners specified in art. 2 sec. 1 pt. 2 of Health Care Activity Act, dated 15 April 2011.

2. In case of reasonable doubts regarding physiotherapeutic treatment ordered by a physician, a physiotherapist shall be able to request said physician to provide a reasoning that supports the prescribed treatment as well as refuse to execute said treatment. A physiotherapist shall enter such refusal to medical records while accordingly notifying said physician about this circumstance.

**Art. 7.** A physiotherapist shall be entitled to access patient’s medical records and request health care entities to provide complete patient information - as defined in Patient Rights and Patient Ombudsman Act dated 6 November 2008 (Journal of Laws 2012, item 159,
with subsequent changes\(^2\) – including their health condition, diagnosis, proposed methods for diagnostics, treatment, and prevention, as well as foreseeable consequences of undertaken activities, within the necessary scope required for provision of health services in physiotherapy.

**Art. 8.** 1. A health care practitioner finding a person to be in breach of the physiotherapy code of practice shall immediately notify the person considered to be responsible for such breach.

2. Should action specified in sec. 1 prove ineffective, and continued breach of the physiotherapy code of practice may pose risk to life or health of the patient, a health care practitioner shall immediately notify both their immediate superior and Accountability Prosecutor (hereafter referred to as the “Prosecutor”).

**Art. 9.** A physiotherapist shall:

1) ensure that patients are properly informed about their rights provided in Patient Rights and Patient Ombudsman Act, dated 6 November 2008;

2) provide the required information to patients or their legal guardian or close person or de facto guardian, as defined in Patient Rights and Patient Ombudsman Act dated 6 November 2008;

3) maintain confidentiality of patient information collected in the course of practice, pursuant to provisions of Patient Rights and Patient Ombudsman Act, dated 6 November 2008;

4) keep and share medical records in accordance with the rules laid down in Patient Rights and Patient Ombudsman Act dated 6 November 2008.

**Art. 10.** 1. PChP shall be allowed to audit physiotherapists in order to evaluate their professional standards of practice.

2. The audit shall be carried out by physiotherapists properly authorised by the Polish Council of Physiotherapists.

3. Having demonstrated their authorisation, the auditors specified in sec. 2 shall be allowed to:

1) request medical records and information;

2) access premises of a health care entity providing health services;

3) take part in delivery of health services;

4) request verbal and written explanations;

4. Audit activities shall be concluded with a post-audit report containing:
1) first name, last name, and residential address, or name and company address of the audited person or entity;

2) location where health services are provided;

3) date audit activities were started and concluded;

4) first names and last names of the auditors;

5) description of the facts of the matter;

6) description of irregularities;

7) conclusions reached by auditors;

8) date and place of the post-audit report.

5. Should a post-audit report reveal a breach of the physiotherapy code of conduct or a culpable breach of the physiotherapy code of practice, Prosecutor shall be notified about this circumstance by the Polish Council of Physiotherapists.

Art. 11. 1. A physiotherapist who intends to take up practice, but within the last 6 years was not engaged in practice for a total period of less than 5 years, shall be required to notify the Polish Council of Physiotherapists and complete re-entry training lasting no longer than 6 months either under a physiotherapist with a Master's degree having 5 years of experience, or under a physiotherapy specialist (hereafter referred to as “Mentor”). A mentor shall be appointed by the manager of a health care entity hosting re-entry training.

2. The Polish Council of Physiotherapists shall determine location, duration and programme for re-entry training specified in sec. 1.

3. Subject to conditions provided in sec. 1, it shall be possible for re-entry training to be arranged at the premises of the employer who employs or intends to employ a physiotherapist specified in sec. 1.

4. Taking into account duration of their absence and the need to ensure that on their return to practice physiotherapists possess proper knowledge and practical skills, the Polish Council of Physiotherapists shall adopt a resolution determining requirements for the framework programme as well as rules and procedures for completion of re-entry training.

Art. 12. 1. Should there arise reasonable doubt that health condition makes a physiotherapist partially or wholly unable to practise, the Polish Council of Physiotherapists shall appoint a Medical Committee (hereafter referred to as the “Committee”) composed of specialists possessing medical expertise in disciplines relevant to the particular case.

2. The Committee shall issue a ruling determining whether a physiotherapist is able to practise.

3. A physiotherapist in question will be required to stand before the Committee.
4. Basing on the ruling issued by the Committee, the Polish Council of Physiotherapists shall adopt a resolution which either suspends licence of a physiotherapist or restricts some of their professional activities, for as long as they remain unable to practise.

5. A physiotherapist in question shall be allowed to take part in and speak during the meeting of the Polish Council of Physiotherapists that investigates their case.

6. Should a physiotherapist refuse to be examined by the Committee or should the Polish Council of Physiotherapists conclude from its findings that owing to health condition of a physiotherapist it is impossible for them to engage in further practice or carry out particular professional activities, the Polish Council of Physiotherapists shall adopt a resolution which either suspends licence of a physiotherapist or restricts some of their professional activities.

7. Within 14 days after receiving the resolution, a physiotherapist affected by the suspension of licence or restriction of some of their professional activities shall be allowed to challenge the resolution by lodging an appeal with the minister with health care portfolio.

8. Should causes of suspension or restriction cease to exist, a physiotherapist specified in sec. 7 shall be allowed to request the Polish Council of Physiotherapists to lift suspension of licence or restriction of some of their professional activities.

9. The proceedings specified in sec. 1-7 shall be confidential and ensure compliance with the provisions of Personal Data Protection Act, dated 29 August 1997 (Journal of Laws 2014, item 1182 and 1662, and 2015, item 1309).

10. Guided by an opinion of the Polish Council of Physiotherapists and the need to secure proper standards of practice and preserve the rights of persons involved in the proceedings, the minister with health care portfolio shall introduce a regulation detailing requirements to be met by persons sitting in the Committee, procedures to be followed while determining the ability to practise, as well as rules and procedures governing the relevant proceedings.

Chapter 3

Physiotherapy Licence

Art. 13. 1. A physiotherapy licence is granted to a person that jointly meets the following requirements:

1) possesses full legal capacity;

2) their health condition permitting physiotherapy practice is confirmed by a medical opinion or any other similar document required in a member state of the European Union other than the Republic of Poland or Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, issued by the competent authority of this state;

3) are able to engage in physiotherapy practice while communicating in Polish;
4) their previous behaviour ensures that in the course of their physiotherapy practice they shall conduct themselves in a manner befitting the profession, this to include in particular not being previously subjected to final judgment of conviction for an intentional crime against life and health, against sexual freedom and decency, and acts specified in art. 207 and art. 211 of Penal Code Act, dated 6 June 1997 (Journal of Laws No 88, item 553, with subsequent changes3);

5) hold a degree, certificate or other document (hereafter referred to as “diploma”):
   a) confirming qualifications specified in sec. 3, or
   b) confirming qualifications for physiotherapy practice obtained either in a member state of the European Union other than the Republic of Poland, or Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, issued by the competent authority of this state, or
   c) confirming qualifications for physiotherapy practice issued in other state than the state identified in letter b., recognised by the Republic of Poland as equivalent to a diploma obtained in the Republic of Poland.

2. In order to demonstrate that one meets the requirements specified in sec. 1 pt. 3 it shall be considered sufficient to produce documents that confirm graduation either from an academic course conducted in Polish, or from a public post-secondary school or a non-public post-secondary school granted rights of a public school which both have Polish as a language of instruction, or

1) in regard to persons specified in sec. 1 pt. 5 letter a and b – submission of the following statement: “This is to declare that my spoken and written Polish is sufficient to practise physiotherapy in Polish.”, with the statement also containing the clause: “I am aware of criminal liability resulting from submission of false statements”;

2) in regard to persons specified in sec. 1 pt. 5 letter c – passing a test organised by the Polish Council of Physiotherapists in order to demonstrate their ability to communicate in Polish.

3. A diploma confirming qualifications is a diploma awarded to a person who:

1) after 1 October 2017 started long-cycle studies (5 years) in physiotherapy offering at least 300 ECTS credits specified in art. 2 sec. 1 pt. 18d of Higher Education Act, dated 27 July 2005 (Journal of Laws 2012, item 572, with subsequent changes4) (hereafter referred to as the “ECTS credits”), this to include at least 160 ECTS credits in physiotherapy, completed 6-month long entry-level training, followed by a Master’s degree and passing of the State Physiotherapy Exam (hereafter referred to as the “SPE”), or

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2) after 30 September 2012 and prior to 1 October 2017 started studies in physiotherapy offering at least 180 ECTS credits, this to include at least 100 ECTS credits in physiotherapy, followed by a Bachelor’s degree, or additionally completed studies offering at least 120 ECTS credits, this to include at least 60 ECTS credits in physiotherapy, followed by a Master’s degree, or

3) after 31 December 1997 started studies in physiotherapy complying with educational standards laid down in separate provisions, followed by a Bachelor’s degree or a Master’s degree in this field, or

4) prior to 1 January 1998 started studies in physical rehabilitation or rehabilitation, followed by a Bachelor’s degree or a Master’s degree in this field, or

5) prior to 1 January 1998 started studies at the University of Physical Education, followed by Master’s degree, or completed 1st or 2nd degree speciality in physical rehabilitation, or

6) prior to 1 January 1980 started studies in physical education, followed by a Master’s degree in this field and completion, in the course of the study, of a 2-year long speciality training in therapeutic gymnastics or rehabilitation, with these credentials confirmed by a licence for therapeutic gymnastics or physical rehabilitation, or

7) prior to 1 January 1980 started studies in physical education, followed by a Master’s degree in this field and completion, in the course of study, of a 3-month long speciality course in rehabilitation as prescribed by Main Committee for Physical Culture and Sports, or

8) completed, prior to this Act coming into force, a post-secondary public school or non-public school granted rights of a public school, and obtained a professional title physiotherapy technician.

4. To organise the test specified in sec. 2 pt. 2, the Polish Council of Physiotherapists shall appoint a 6-person examination committee composed of physiotherapists and at least one person with a degree in Polish Philology. The examination committee shall select from among its members a chairperson and a secretary. The secretary of the examination committee shall be responsible for preparing an exam protocol signed by members and the chairperson.

5. A person taking the test shall pay a fee specified in sec. 2 pt. 2, proceeds from this source shall be added to the revenue of PChP.

6. Having received an opinion from the Polish Council of Physiotherapists, the minister with health care portfolio shall introduce a regulation determining:

1) the scope of spoken and written skills in Polish that need to be demonstrated by a physiotherapist prior to taking up practice in the Republic of Poland – while taking into account the scope of professional responsibilities of physiotherapists;
2) rules and procedures for the test specified in sec. 2 pt. 2, the fee paid for the test, and a template of a certificate confirming language skills – while taking into account the related costs and the need to ensure the proper course of the proceedings.

Art. 14. 1. Entry-level training specified in art. 13 sec. 3 pt. 1 shall be completed by a person who started studies in physiotherapy specified in art. 13 sec. 3 pt. 1, and passed their final test prescribed in their academic curriculum.

2. Entry-level training shall begin no later than on 1 October and shall last no longer 6 months if within that timeframe one shall be able to complete the entire entry-level training programme which includes 960 didactic hours, each lasting 45 minutes.

3. Following a request of a trainee, entry-level training shall be prolonged for the period of time when the trainee has been absent claiming benefits specified in art. 2 of Act on Social Insurance Benefits in Case of Illness or Maternity, dated 25 June 1999 (Journal of Laws 2014, item 159, with subsequent changes).

4. The duration of entry-level training can be shortened by no more than half of its original duration following a substantiated request of a trainee.

5. The request specified in sec. 3 and 4 shall be submitted by a trainee to a mentor specified in sec. 6. The mentor shall accordingly notify the head specified in sec. 10.

6. A trainee shall engage in professional activities set out in the entry-level training framework programme under direct supervision of the mentor.

7. A mentor is a physiotherapist with Master’s degree who practises in the entity specified in sec. 9 and has at least 5 years of experience.

8. A trainee keeps an entry-level training chart that includes the following information:

1) first and last name of the head specified in sec. 10;
2) first name and last name of the trainee;
3) PESEL number, or, should there be no PESEL number – details of an identity document: name and number of the document, and the country of issue;
4) date entry-level training begun;
5) first name and last name of the mentor;
6) list of practical activities in which the trainee has been engaging;
7) list of positively verified skills detailed in the entry-level training programme;
8) conclusion reached in regard to a request to shorten the duration of entry-level training, along with the relevant notification of the head specified in sec. 10, if applicable;

9) date entry-level training was concluded;


10. Persons specified in sec. 1 shall be completing their entry-level training on the basis of placement issued by a head of an organisational unit of a medical university offering courses in physiotherapy specified in art. 13 sec. 3 pt. 1. The head shall determine an up to 40 hour-a-week schedule for entry-level training while ensuring that it is completed in compliance with its framework programme.

11. The minister with health care portfolio shall introduce a regulation determining:

1) entry-level training framework programme;

2) rules for delivery of entry-level training, including the rules for shortening, documentation, and successful completion of entry-level training;

3) template for the entry-level training chart;

- guided by the need to ensure that entry-level training is completed in a proper way.

Art. 15 1. The SPE is organised and conducted by the Centre for Medical Examination (hereafter referred to as “CME”).

2. The SPE can be taken by a person holding a Master’s degree obtained on graduation from studies specified in art 13 sec. 3 pt. 1.

3. A person intending to take the SPE (hereafter referred to as the “applicant”) shall request confirmation of their eligibility for the SPE. The request shall be generated by and downloaded from the CME website, printed and personally signed by the applicant, and submitted to the locally competent governor or, if said governor cannot be identified, to the governor of Mazowieckie Province.

4. Eligibility for the SPE shall be confirmed by the governor specified in sec. 3 within 30 days following the submission of the request specified in sec. 3. The governor shall immediately notify the applicant about their existing or non-existing eligibility for the SPE.

5. The applicant with confirmed eligibility for the SPE shall submit their SPE application to the director of CME in keeping with the following deadlines:

1) by 28 February – for exam dates in a given year falling between 1 April and 15 May;

2) by 31 August – for exam dates in a given year falling between 2 November and 15 December.
The deadlines specified in sec. 5 are not be governed by art. 58-60 of Administrative Procedure Code, dated 14 June 1960 (Journal of Laws 2013, item 267, with subsequent changes\(^6\)).

7. The application specified in sec. 5 shall include:

1) first name(s) and last name;

2) date of birth;

3) place of birth;

4) PESEL number, or, should there be no PESEL number – details of an identity document: name and number of the document, and the country of issue;

5) citizenship(s)

6) correspondence address, telephone number, and email address, should applicant have these;

7) name and address of the applicant’s higher education institution, number and date of a diploma specified in sec. 2;

8) details of a document confirming payment of the exam fee specified in sec. 8, bank transfer date, and identification of the SPE;

8. The applicant shall pay an exam fee that shall be collected as a budgetary revenue of the state. The fee shall not be greater than 10% of the average monthly wage (excluding profit-sharing bonuses) paid last year in the business enterprise sector, published by 15 January each year in a notice issued by the President of Central Statistical Office in Official Gazette of Republic of Poland “Monitor Polski.”

9. The exam fee specified in sec. 8 shall be collected by the director of CME.

10. Should the exam fee specified in sec. 8 be not paid at all or be not paid in full, the director of CME shall request the applicant to have this formal defect remedied. The provisions of art. 64 of Administrative Procedure Code, dated 14 June 1960, shall be applicable with the following reservation: should the deadline to remedy formal defects expire, the SPE application affected by such defect shall be treated as not having been submitted.

11. No later than 14 days before the SPE the director of CME shall notify the applicant about the location and date of the SPE as well as their assigned code number.

**Art. 16.** 1. The SPE is taken before Examination Committee.

2. Members of Examination Committee are appointed by the director of CME. Candidates for appointment to Examination Committee are nominated by:
1) director of CME;
2) national consultant in physiotherapy;
3) rectors of universities offering courses in physiotherapy;
4) governors.

3. One cannot be a member of Examination Committee in the event of being subject to final judgment of conviction for an intentional crime indictable by public prosecution or final judgment of conviction for an intentional tax offense.

4. Chairperson of Examination Committee and chairperson of Examination Panel are appointed by the director of CME.

5. Member of Examination Committee shall be dismissed by the director of CME in the event of:
   1) resignation;
   2) illness permanently preventing them from discharging their duties;
   3) non-performance or improper performance of their duties;
   4) final judgment of conviction for an intentional crime indictable by public prosecution or final judgment of conviction for an intentional tax offense;
   5) submission of statement specified in sec. 9 that was proven to be untrue.

6. In order to conduct the SPE on designated dates and in designated locations the director of CME shall appoint Examination Panels from among members of Examination Committee.

7. It is not allowed for a member of Examination Panel to sit in Examination Panel that presides over the SPE taken by an applicant in relation to whom one remains:
   1) a spouse;
   2) in a relationship of:
      a) consanguinity or affinity up to a second degree;
      b) adoption;
   3) in a relationship of cohabitation;
   4) in a professional relationship;

8. The reasons for recusal specified in sec. 7 pt. 1 and 2 letter b shall continue to apply despite termination of marriage or adoption.
9. Prior to the SPE, members of Examination Panel shall submit to the director of CME a written statement that relationships specified in sec. 7 do not occur between them and any applicant taking the SPE before said Examination Panel, also declaring that they have not been subjected to final judgment of conviction for an intentional crime indictable by public prosecution or final judgment of conviction for an intentional tax offense, while accepting criminal liability for the evidence being to the contrary.

10. The statement specified in sec. 9 is submitted under penalty of criminal liability for perjury. The statement shall include the following clause: “I am aware of criminal liability resulting from submission of false statements.” The clause serves as an equivalent of a note cautioning against criminal liability for perjury.

11. Members of Examination Panels specified in sec. 2 are entitled to:

1) remuneration for participation in Examination Panel in the amount that does not exceed PLN 500 for chairperson, and PLN 300 for a member;

2) reimbursement of travel expenses in the amount resulting from and in accordance with the rules laid down in provisions issued pursuant to art. 775 § 2 of Labour Code Act, dated 26 June 1974 (Journal of Laws 2014, item 1502, with subsequent changes);

3) leave of absence, without pay entitlement, granted for the day of the proceedings of Examination Panel, should the SPE take place on a working day.

12. The payment of remuneration specified in sec. 11 pt. 1 and the reimbursement for expenses specified in sec. 11 pt. 2 shall effectuate pursuant to the rules laid down in a directive issued by the director of CME.

Art. 17. 1. CME organises the SPE in collaboration with the national consultant in physiotherapy.

2. Test questions shall be covering physiotherapy knowledge detailed in provisions issued pursuant to art. 20 sec. 1 pt. 1.

3. The SPE shall take the form of a test exam composed of 100 questions, each with five available answers out of which only one answer shall be correct. Each correct answer shall be equivalent to 1 point. No points shall be awarded for a missing answer, incorrect answer, or multiple answers.

4. The test is prepared and conducted by CME in consultation with the national consultant in physiotherapy.

5. Tests and test questions shall be prepared, processed, distributed, and stored in a manner that prevents access of persons other than those involved in their preparation, processing, distribution, and storage, persons conducting SPE, and persons with supervisory roles.
6. The tests and test questions shall not be shared pursuant to rules laid down in Public Information Access Act, dated 6 September 2001 (Journal of Laws 2014, item 782 and 1662, and 2015, item 1240). Following the exam, the director of CME shall be able to share the tests and test questions with the person taking the SPE. The director of CME shall introduce a directive laying down the rules governing the sharing process and how it is documented.

7. The SPE shall be conducted in keeping with the SPE statute.

Art. 18. 1. Directly before the exam, the applicant shall present an identity document to the Examination Panel specified in art. 16 sec. 6. The applicant shall not be able to take the exam without first presenting said identity document.

2. The SPE proceedings can be recorded with audio-visual equipment, with the applicant informed about this circumstance in the exam notification or directly before the exam.

3. The test shall be filled by each examinee independently. While taking the SPE, the examinee shall not be allowed to consult scientific or didactic aids, nor use devices able to copy or send and receive information. In order find out whether the examinee is in possession of devices able to copy or send and receive information, one shall be allowed to use the appropriate detection equipment. Violation of this restriction shall constitute a reason for disqualification and thus a negative result of the exam.

4. Should it be found out in the course of the exam that restriction specified in sec. 3 is not observed or the test is not filled by the examinee independently, Chairperson of Examination Panel shall record this event in the exam protocol. In the event of disqualification, the reason for disqualification and the time the exam ended for the individual examinee shall be recorded in said exam protocol.

5. Should post-exam analysis of images recorded by audio-visual equipment specified in sec. 2 reveal that an examinee was not observing restrictions specified in sec. 3 or was not filling the test independently, said examinee shall be disqualified by the decision of Chairperson of Examination Panel. The event of and reason for disqualification shall be recorded in the exam protocol.

6. The director of CME shall send the disqualified person a written notification informing them about disqualification specified in sec. 5. Within 7 days after receiving the notification the disqualified person shall be allowed to request the director of CME to verify said disqualification.

7. The director of CME shall have 14 days to rule on the request to verify disqualification of a person. The ruling issued by director of CME is final.

8. Should the director of CME rule to uphold disqualification, the disqualified person shall be able to take the next SPE scheduled after the date of disqualification.

Art. 19. 1. The examinee taking the given SEP shall be allowed, in the course of the exam or immediately following its conclusion, but prior to leaving the examination room, raise objections questioning the substance of a particular test question used in the SEP. The objection shall be submitted to the director of CME on the form prepared by CME.
2. To examine objections specified in sec. 1, the director of CME shall appoint a Committee composed of persons with such knowledge, experience, and authority as to guarantee that such objections are given thorough consideration. Should one decide to acknowledge said objection, one shall annul the test question being the cause of objection. Following this decision the total amount of points to be scored on the test shall be reduced. One shall not award points for the annulled question.

3. The examinee with at least 56% of the total score secures a positive result of the SPE. The exam result shall not be understood as a decision within the meaning of Administrative Procedure Code, dated 14 June 1960.

4. A person that either did not take the SPE at the designated date, or took the SPE and received a negative result shall be allowed to take the SPE again at a later date.

5. Within 21 days following the exam date, a person that passed the SPE shall receive an SPE certificate issued by the director of CME. It shall be allowed for the signature of the director of CME to be replicated with mechanical means. The person holding the SPE certificate shall be allowed to request the director of CME to issue a duplicate of or introduce a correction to said SPE certificate. CME shall provide these services for a charge of 50 PLN. The charge shall not be collected should corrections be necessitated by mistakes on the part of CME.

6. CME keeps a registry of SPE certificates specified in sec. 5.

7. In the event of gross violation of procedure occurring in the course of the SPE or unforeseeable events interfering with the proper course of the SPE, the director of CME, following approval from the minister with health care portfolio, may issue a directive annulling the exam for individual examinees or the entire group of examinees.

8. In the event of the SPE being annulled, the exam fee shall not be collected from the applicants intending to take the next SPE in the wake of their previous SPE being annulled.

9. The SPE documentation shall be stored by the competent bodies pursuant to art. 5 and art. 6 of National Archival Resources and Archives Act, dated 14 July 1983 (Journal of Laws 2015, item 1446).

Art. 20. 1. Having received an opinion from the Polish Council of Physiotherapists, the minister with health care portfolio shall introduce a regulation determining:

1) scope of issues covered by test questions used in the SPE - taking into account the scope of knowledge and skills to be expected from the examinees,

2) procedure governing appointments to Examination Committee specified in art. 16 sec. 1 - taking into account conditions laid down in art. 16 sec. 2 and 3,

3) template for the statement specified in art. 16 sec. 9,
4) rules and procedures governing the SPE application process and SPE proceedings, including the time frames in which dates for the particular SPE are to be provided;

5) exam fee amount specified in art. 15 sec. 8, and rules for it to be collected;

6) detailed procedures for annulment of the SPE;

7) detailed rules for determination of SPE results;

8) template for the SPE certificate;

9) rules to be followed by the CME in handing over SPE results to competent entities;

- with an aim of preserving impartiality of Examination Panel and ensuring that the SPE proceeds in a proper way.

2. The SPE statute shall be introduced by the director of CME following approval by the minister with health care portfolio.

Art. 21. 1. An interested person can request the Polish Council of Physiotherapists to recognise their physiotherapy licence.

2. The Polish Council of Physiotherapists shall confirm the receipt within one month after receipt of the request. Should said request have any formal defects, the interested person shall be asked to have them remedied.

3. The Polish Council of Physiotherapists shall recognise a physiotherapy licence or refuse to recognise physiotherapy license in a resolution.

4. The recognition process shall be concluded without delay and take no more than 3 months after submission of all the necessary documents required under this Act.

5. Should there arise reasonable doubt in regard to authenticity of diplomas, certificates, or other documents issued by competent authorities or organisations of a member state of the European Union, Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, the Polish Council of Physiotherapists shall be allowed to request competent authorities or organisations of the concerned state to authenticate diplomas, certificates, or other documents issued by said state, as well as request said state to attest that a physiotherapist intending to practise in the Republic of Poland received proper education under rules laid down in the relevant legislation adopted in said state.

Art. 22. 1. The request to grant a physiotherapy licence shall include:

1) first name and last name;

2) family name;

3) sex;
4) date and place of birth;

5) PESEL number, serial number of an identification card or, should persons have no PESEL number, passport number or a number of other identification document;

6) citizenship;

7) residential address;

8) correspondence address and email address, should the person have one;

9) name and address of the school the person graduated from;

10) number and date of the diploma;

11) number and date of the SPE certificate;

12) professional title;

13) statement confirming full legal capacity;

2. The request shall be submitted with the following attachments:

1) persons specified in art. 13 sec. 3 shall additionally provide:

a) documents to confirm that the person meets the requirements specified in art. 13 sec. 3 – their original copies or notarised copies,

b) written statement to confirm full legal capacity,

b) up-to-date photo,

2) persons specified in art. 13 sec. 1 pt. 5 letter b and c shall additionally provide:

a) documents to confirm that the person meets the requirements specified in art. 13 sec. 1 pt. 5 letter b and c – translated into Polish by a certified translator, along with their original copies or notarised copies,

b) written statement to confirm full legal capacity,

c) statement declaring that one’s speaking and writing skills in Polish permit physiotherapy practice, specified in art. 13 sec. 2 pt. 1, or certificate of test specified in art. 13 sec. 2 pt. 2,

d) up-to-date photo,

e) copy of a document or other evidence to confirm the right of residence in the Republic of Poland, as prescribed in separate provisions.
3. The statement specified in sec. 2 pt. 1 letter b and pt. 2 letter b shall be submitted under penalty of criminal liability for perjury. The statement shall include the following clause: “I am aware of criminal liability resulting from submission of false statements.” The clause serves as an equivalent of a note cautioning against criminal liability for perjury.

4. Should recognition of physiotherapy licence be sought by a person referred for re-entry training specified in art. 11 sec. 1, the request shall additionally include a certificate confirming completion of the re-entry training in question.

**Art. 23.** 1. Physiotherapy licence is recognised for a charge. The charge shall not be greater than 10% of the average monthly wage (excluding profit-sharing bonuses) paid last year in the business enterprise sector, published by 15 January each year in the notice issued by the President of Central Statistical Office in the Official Gazette of Republic of Poland “Monitor Polski.”

2. The charge specified in sec. 1 is collected as the revenue of PChP.

3. Minister with health care portfolio shall introduce a regulation determining the amount of and manner in which the recognition charge is collected, taking into account the costs of the procedure in question.

**Art. 24.** 1. The Polish Council of Physiotherapists shall make an entry in the National Registry of Physiotherapists and issue a document titled “Physiotherapy Licence” on the basis of resolutions recognising or granting a physiotherapy licence.

2. Having obtained an opinion from the Polish Council of Physiotherapists, the minister with health care portfolio shall issue a regulation determining a template for a document titled “Physiotherapy Licence,” taking into account what is shall contain in terms of substance.

**Art. 25.** 1. Resolutions recognising or granting physiotherapy licence are accordingly governed by provisions on administrative decisions laid down in Administrative Procedure Code, dated 14 June 1960.

2. Final resolutions recognising or granting physiotherapy licence can be appealed to administrative court by the minister with health care portfolio.

3. Should the appeal against matters specified in sec. 1 be lodged with administrative court by other eligible entity, the minister with health care portfolio shall be allowed to take part in legal proceedings while exercising rights granted to a prosecutor. While hearing the appeal one shall accordingly apply art. 8 of the Administrative Courts Procedure Act, dated 30 August 2002 (Journal of Laws 2012, item 270, with subsequent changes).

**Art. 26.** A physiotherapy licence expires in the event of:

1) death;
2) physiotherapy licence being renounced;

3) physiotherapy licence being removed following a final ruling of disciplinary tribunal;

4) loss of full legal capacity.

Art. 27. 1. A physiotherapist holding a citizenship of a member state of the European Union or Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, who obtained a physiotherapy licence in a member state of the European Union other than the Republic of Poland or Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, shall be allowed to engage in temporary or occasional practice provided they submit to the Polish Council of Physiotherapists:

1) written statement expressing an intent to engage in temporary or occasional practice in the Republic of Poland;

2) document confirming citizenship;

3) certificate issued by the competent bodies of a member state of the European Union or Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, confirming that they lawfully engage in practice in said state and are not banned from practice, however temporary the ban might be;

4) certificate confirming that they have been engaging in practice for at least one year in the last 10 years, or a document confirming regulated training - if physiotherapy is not regulated in the state where the service provider has their seat;

5) documents confirming qualifications required for physiotherapy licence.

2. The statement specified in sec. 1 pt. 1 shall be originally submitted prior to any practice on in the Republic of Poland, and renewed each year in which the physiotherapist intends to engage in temporary or occasional practice in the Republic of Poland.

3. The documents specified in sec. 1 pt. 2-5 shall be originally submitted by the physiotherapist specified in sec. 1 to the Polish Council of Physiotherapists prior to any practice in the Republic of Poland, and subsequently each time in the event of a substantial change of information contained in these documents.

4. Having submitted the documents specified in sec. 1, the physiotherapist specified in sec. 1 shall be granted an entry in the registry of persons licensed for temporary or occasional practice in the Republic of Poland.

5. The registry specified in sec. 4 shall be designed as an ICT system specified in art. 3 pt. 3 of Act on Digitalisation of Processes Run by Entities Carrying Out Public Tasks, dated 17 February 2005 (Journal of Laws 2014, item 1114). The registry shall be kept by the Polish Council of Physiotherapists and contain:
1) first name(s) and last name;
2) citizenship;
3) date and place of birth;
4) name and number of the identity document and its country of issue;
5) name and number of the document confirming physiotherapy licence in a member state of the European Union other than the Republic of Poland or Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area;
6) location, duration, form and scope of health services provided during temporary or occasional practice in the Republic of Poland, should such determination be possible to make;
7) date of the certificate issued by the Polish Council of Physiotherapists confirming submission of the statement and documents specified in sec. 1;
8) correspondence address;

6. The Polish Council of Physiotherapists makes an entry in the registry specified in sec. 4 and issues a certificate confirming submission of the statement and documents specified in sec. 1. The entry to the registry and the certificate are free of charge and shall not in any way delay or hinder temporary or occasional practice.

7. The registry specified in sec. 4 is owned and administrated by the Polish Council of Physiotherapists.

8. The Polish Council of Physiotherapists shall share data stored in the registry specified in sec. 4 with the health protection information system specified in Health Protection Information System Act, dated 28 April 2011 (Journal of Laws 2015, item 636, with subsequent changes).

9. In matters unregulated in sec. 1-8, engaging in temporary or occasional practice in the Republic of Poland shall be governed by the rules for cross-border services laid down in provisions on recognition of professional qualifications in the European Union.

Art. 28. 1. Prior to engaging in any professional activities under employment contract or civil law contract, a physiotherapist shall submit a document confirming their physiotherapy licence to the entity on behalf of which these activities are to be performed.

2. Prior to signing the employment contract or civil law contract with the physiotherapist, the entity on behalf of which the physiotherapist is to engage in professional activities shall request a document confirming their physiotherapy licence.
Chapter 4

The National Registry of Physiotherapists and Certificates

Art. 29. 1. The National Registry of Physiotherapists is kept by the Polish Council of Physiotherapists.

2. The National Registry of Physiotherapists shall be designed as an ICT system specified in art. 3 pt. 3 of Act on Digitalisation of Processes Run by Entities Carrying Out Public Tasks, dated 17 February 2005.

3. The National Registry of Physiotherapists shall collect details of physiotherapists holding physiotherapy licence.

4. Details of physiotherapists whose physiotherapy licence expired shall be deleted from the National Registry of Physiotherapists no sooner than 15 years after the date of expiry.

5. The National Registry of Physiotherapists is owned and administrated by the Polish Council of Physiotherapists.

Art. 30. 1. The National Registry of Physiotherapists contains:

1) first name(s) and last name;
2) family name;
3) first names of the parents;
4) date and place of birth;
5) PESEL number, or, should there be no PESEL number – details of an identity document: name and number of the document, and the country of issue;
6) citizenship;
7) residential address;
8) number of the certificate confirming physiotherapy licence and numbers of previous certificates confirming physiotherapy licence, along with the date(s) of issue and the name of the body issuing the certificate;
9) details regarding physiotherapy licence held outside the Republic of Poland;
10) details regarding restrictions imposed on physiotherapy licence;
11) name of the education institution, number of the diploma, date of issue, and year of graduation;
12) date the practice was started;
13) date and type of completed post-graduate education, name of the provider of education issuing the certificate and, in case of speciality training – number of the diploma and date of issue;

14) academic degree, date it was obtained, and name of the body awarding the degree;

15) academic title, date it was obtained, and name of the body awarding the title;

16) name of the employer, date of employment, and positions held by a physiotherapist dating back to the date the practice was started;

17) details regarding retirement from practice;

18) details regarding suspension of physiotherapy licence;

19) details regarding expiry of physiotherapy licence;

20) details regarding the removal from National Registry of Physiotherapist.

2. Publicly available data of the National Registry of Physiotherapists include:

1) first name and last name, academic degree and academic title;

2) employer’s name.

Art. 31. 1. When requested by the registrant, the Polish Council of Physiotherapists shall issue a transcript of the relevant entry without delay and free of charge.

2. When requested by the competent authorities or organisations of a member state of the European Union, Swiss Confederation, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, the Polish Council of Physiotherapists shall release the requested information from the National Registry of Physiotherapists when said information is needed for recognition of qualifications and may be vital to undertaking or engaging in practice in said state.

3. When requested by the authorised bodies, the data collected by the National Registry of Physiotherapists shall be shared for statistical purposes.

4. The Polish Council of Physiotherapists shall share the data collected in the National Registry of Physiotherapists with the health protection information system specified in Health Protection Information System Act, dated 28 April 2011.

Art. 32. The registrant shall notify the Polish Council of Physiotherapists about any changes of information specified in art. 30 sec. within 14 days from the occurrence of circumstances necessitating such change.

Art. 33. 1. By 15 January each year, the Polish Council of Physiotherapists shall provide the minister with health care portfolio with information on the number and employment structure of physiotherapists practising in individual provinces, with said information reflecting facts of the matter as they stand on 31 December of the previous year.
2. The minister with health care portfolio shall be also able to request the Polish Council of Physiotherapists to share information specified in sec. 1.

**Art. 34.** 1. A physiotherapist shall be able to request the Polish Council of Physiotherapists to issue:

1) certificate confirming their qualifications obtained pursuant to requirements in the Republic of Poland;

2) other certificates prescribed by the laws of the European Union, required by the competent authorities or organisations of the member states of the European Union.

2. The Polish Council of Physiotherapists shall adopt a resolution providing a template for the certificate specified in sec. 1 pt. 1.

**Chapter 5**

**Post-graduate Education of Physiotherapists**

**Art. 35.** 1. A physiotherapist is awarded the title of specialist on completion of speciality training and passing the SPSE.

2. The fee for speciality training and the SPSE fee shall be paid by a physiotherapist undergoing speciality training.

3. The fee for speciality training shall be determined by a manager of the training unit specified in art. 36 sec. 1. The fee cannot be greater than planned costs of speciality training. The fee shall be collected as a revenue of the training unit hosting speciality training.

4. The minister with health care portfolio shall be able to use budgetary resources in his disposal to provide additional funding to cover costs of speciality training of physiotherapists.

5. Following a request of a physiotherapist, the title of specialist in physiotherapy obtained abroad is recognised by PChP as equivalent to the title of specialist in the Republic of Poland provided the physiotherapist in question meets the following requirements:

1) duration of their speciality training completed abroad does not differ from duration determined in the speciality programme delivered in the Republic of Poland;

2) scope of theoretical knowledge and practical skills set out in the speciality programme corresponds in its substantial parts with the speciality programme delivered in the Republic of Poland;

6. A person whose title of specialist specified in sec. 1 was obtained abroad shall submit to PChP a request, attaching the following documents along with their Polish translation:

1) original document conferring the title of specialist;
2) document detailing the location, duration, and programme of speciality training;

3) detailed rules and procedures governing the final exam or other form used to test knowledge and practical skills in physiotherapy;

4) document certifying the location, duration, and type of professional activities in which the physiotherapist has been engaging since obtaining the title of specialist.

7. Basing on the opinion received from director of the Centre of Postgraduate Medical Education (hereafter referred to as “CPME”), PChP issues a decision which recognises or refuses to recognise the title of specialist in physiotherapy.

8. The opinion specified in sec. 7 shall be delivered by an expert team specified in art. 38 sec. 3 appointed to produce a substantive assessment of the request and, basing on its conclusions, recommend to:

1) recognise the title of specialist without any additional conditions;

2) recognise the title of specialist provided a physiotherapist completes transitional residency in a training unit, with the scope and programme of transitional residency determined by the expert team individually for each physiotherapist seeking recognition;

3) recognise the title of specialist provided a physiotherapist passes the SPSE;

4) refuse to recognise the title of specialist obtained abroad.

9. CPME shall provide organisational and financial support for the expert team specified in art. 38 sec. 3.

10. The training unit specified in art. 36 sec. and the physiotherapist shall conclude an agreement for transitional residency specified in sec. 8 pt. 2, detailing, among others, rules to be followed in the course of transitional residency.

11. PChP shall issue a decision to recognise or refuse to recognise the title of specialist obtained in the member states of the European Union, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, or Swiss Confederation. Said decision shall be governed by the rules laid down in provisions on recognition of professional qualifications obtained in a member state of the European Union other than the Republic of Poland, or a member state of the European Free Trade Association (EFTA) – party to the Agreement on the European Economic Area, or Swiss Confederation.

12. The decision shall contain:

1) decision number;

2) decision date;

3) first name(s) and last name of the concerned person;
4) citizenship(s);
5) the state in which the title of specialist was obtained;
6) subject matter under consideration;
7) conclusion reached;
8) name of the body issuing the decision.

Art. 36. 1. Speciality training as part post-graduate education is delivered by entities (hereafter referred to as the “training units”) which hold accreditation granted by the director of CPME.

2. The accreditation shall be granted to entities which:

1) appointed a speciality training team, this to include contracts for positions of speciality supervisors either with persons holding the title of specialist in physiotherapy or with persons entrusted with the responsibilities of specialist in physiotherapy following a decision granted by the minister with health care portfolio pursuant to provisions issued on the basis of art. 10 sec. 5 of Health Care Institutions Act, dated 30 August 1991 (Journal of Laws 2007, No 14, item 89, with subsequent changes);

2) meet educational standards laid down in the speciality programme;

3) pursue activity that matches speciality training profile and have partnered with other entities offering focused residency or speciality courses included in the speciality programme if these are not offered by the training unit;

4) developed rules and regulations for speciality training.

3. Rules and regulations for speciality training specified in sec. 2 pt. 4 shall determine in particular:

1) total number of persons that can be accepted for speciality training;

2) organisation of speciality training including timelines for particular activities and focused residency;

3) detailed scope of duties assigned to speciality training supervisors, focused residency mentors, lecturers, and other persons in leadership roles;

4) methods used to test knowledge and skills;

5) methods used to enable the participants rate organisation and delivery of speciality training.
4. The entity intending to deliver speciality training shall apply to the director of CPME for accreditation. The application shall include:

1) name of the entity seeking accreditation;
2) headcount and qualifications of the staff teaching theory and practical skills on the speciality course (the required speciality, academic degree, or academic title);
3) description of teaching facilities and settings required for speciality training;
4) speciality programme delivery plan;
5) statement confirming capabilities required for delivery of the plan specified in pt. 4.

5. The application specified in sec. 4 shall be submitted with the following attachments:

1) documents confirming that the entity has the proper legal status;
2) details on its activity to date;
3) documents confirming that the entity meets the requirements specified in sec. 2 pt. 1-3.

6. The application specified in sec. 4 shall be submitted by the training unit at least 4 months prior to the planned beginning of speciality training.

7. The director of CPME shall provide formal assessment of the documents specified in sec. 5. Should it reveal any formal defects, the director of CPME shall request the entity submitting the application to remedy them within 7 days after the receipt of said request. Should this deadline expire without formal defects being remedied, the application shall not be processed any further.

8. In order to determine whether the entity meets the requirements specified in sec. 2, the director of CPME shall seek an opinion from an expert team composed of:

1) representative of a national association of specialists in physiotherapy;
2) two physiotherapy experts appointed by the national consultant in physiotherapy or, should this position be vacant, by the national consultant in a corresponding field;
3) representative of the Polish Council of Physiotherapists (hereafter referred to as “PCP representative”).

9. The expert team specified in sec. 8 shall provide opinions on applications when required, but at least once in a quarter, forwarding them to the director of CPME within 7 days after their preparation. The opinions can be prepared by circulation using the available telecommunication systems or communication systems.

10. The director of CPME:
1) following a positive opinion issued by the expert team specified in sec. 8 - registers the applying entity on the list of accredited units kept by the director of CPME, along with a total number of trainee positions available for a given speciality, with the registration valid for a period of 5 years;

2) following a negative opinion issued by the expert team specified in sec. 8 - refuses to register the applying entity on the list of training units kept by the director of CPME, immediately notifying the applicant about the outcome.

11. In order to ensure that the training unit has continued capabilities for delivery of speciality training, 6 months before the period specified in sec. 10 pt. 1 is bound to expire the director of CPME shall request the training unit registered on the list specified in sec. 10 to renew its accreditation. Provisions of sec. 1-10 shall be applied accordingly.

12. An up-to-date list of training units is published by the director of CPME on its website.

13. Should the training unit no longer meet accreditation requirements, it shall immediately notify the governor and the director of CPME about that circumstance.

14. The training unit which is not delivering the detailed speciality programme, or not observing educational standards specified in sec. 2 pt. 2, or no longer meets accreditation requirements, shall be removed by the director of CPME from the list specified in sec. 10. One shall be able to request reconsideration of this decision.

15. Focused residency and speciality courses included in the speciality programme shall be provided by the entities specified in sec. 1 or sec. 2 pt. 3. CPME shall coordinate focused residency and speciality courses in accordance with the requirements of speciality training and regional presence of physiotherapists undergoing speciality training.

16. The director of CPME publishes on its website a list of focused residencies and a list of speciality courses which include the following details:

1) name and seat of the entity specified in sec. 1 or sec. 2 pt. 3, or first name, last name, and address of a natural person delivering speciality course;

2) date, location, and the number of positions available in a given focused residency or speciality course;

17. The entities specified in sec. 1 shall keep CPME updated with information required for delivery of focused residency or speciality courses.

18. The entity which delivered a given residency or a speciality course specified in sec. 15 shall submit to CPME a list of physiotherapists who completed focused residency or speciality course, with the list containing first name, last name, and PESEL number of a physiotherapist or, should they have no PESEL number - details of an identity document: name and number of the document, and the country of issue.

**Art. 37.** 1. The minister with health care portfolio exercises oversight of speciality training by acting through the director of CPME.
2. While exercising its oversight role specified in sec. 1, the director of CPME shall be able to:

1) audit the training unit;
2) request the relevant documentation and explanations;
3) issue guidance to remedy any identified irregularities.

3. The director of CPME shall appoint an audit team to audit delivery of speciality training. The audit team shall be composed of CPME employees possibly joined by:

1) national consultant in physiotherapy or, should this position be vacant, the national consultant in a corresponding field;
2) representative of a national association of specialists in physiotherapy, holding the title of specialist in physiotherapy or holding a decision recognising their professional experience and scientific achievement as equivalent to successful completion of speciality programme issued by the minister with health care portfolio pursuant to previously existing provisions;
3) persons holding the title of specialist in physiotherapy or persons with scientific and professional achievement in this field, nominated by the national consultant in physiotherapy or, should this position be vacant, the national consultant in a corresponding field;
4) representative of a locally competent governor;
5) PCP representative holding the title of specialist in physiotherapy or in a corresponding field.

4. Having demonstrated their authorisation, an audit team composed of at least three members shall be able to carry out the following audit activities:

1) access teaching facilities;
2) take part in the activities as non-participating observers;
3) access documentation of speciality training kept by the training unit;
4) request the training unit manager to provide verbal and written explanations;
5) survey opinion of the participants and the staff engaging in speciality training.

5. The audit activities shall be concluded with a report containing:

1) name and address of the training unit;
2) location of speciality training;
3) date audit activities were started and concluded;

4) first names and last names of auditors;

5) description of the facts of the matter;

6) discovered irregularities or a note that no reservations were identified;

7) conclusions reached by auditors;

8) date and place of the report;

9) note on refusal should the manager of the training unit refuse to sign the report.

6. The report shall be signed by the auditors and the manger of the training unit. The auditors shall be able to sign the report regardless of the manger of the training unit refusing to sign the report.

7. The report shall be prepared in two copies, with one copy handed over to the manger of the training unit.

8. Within 7 days after receiving the report, the manager of the training unit shall be allowed to submit a letter with objections questioning the facts recorded in the report, as well as the manner in which audit activities were carried out. The auditors shall ensure that these facts receive additional scrutiny while accordingly updating the report within 14 days after submission of such objections.

9. Should the objections specified in sec. 8 be rejected in part or in entirety, the audit team shall provide the manager of the training unit with a letter detailing reasoning that support their conclusions.

10. The director of CPME provides the manager of the training unit with post-audit recommendations detailing irregularities discovered in the course of the audit while requesting to remedy these irregularities within a prescribed deadline. A copy of the post-audit recommendations shall be forwarded to the national consultant in physiotherapy or, should this position be vacant, national consultant in a corresponding field, as well as the provincial consultant in physiotherapy or, should this position be vacant, to the provincial consultant in a corresponding field.

11. Should one fail to implement post-audit recommendations within the prescribed deadline, the director of CPME shall issue a decision removing the unit from the list of training units. The unit loses its accreditation with the date of the removal from the list.

12. The auditors shall be entitled to:

1) remuneration for audit activities, in the amount not exceeding PLN 300;

2) reimbursement of travel expenses in the amount resulting from and in accordance with the rules laid down in provisions issued pursuant to art. 775 § 2 of Labour Code Act, dated 26 June 1974;
3) leave of absence, without pay entitlement.

**Art. 38.** 1. Speciality programme shall include:

1) general programme which outlines:
   a) training goals;
   b) learning outcomes;
   c) training organisation.

2) duration of speciality training including the number of basic residency hours;

3) detailed scope of theory and practical skills to be acquired in speciality training;

4) speciality training modules along with educational forms and methods applied within modules, including:
   a) courses with a detailed scope of theory and practical skills to be provided during courses (hereafter referred to as “courses”), along with the number of course hours that include a course in medical law,
   b) focused residency with a scope of practical skills to be provided during focused residency, along with the location, number of residency hours, and rules for completion of a given focused residency;

5) forms and methods of professional self-development, including theoretical studies, review articles, or research papers covering the scope of knowledge delivered throughout speciality programme;

6) methods for assessment of theory and practical skills, including:
   a) test covering theory provided in the given module,
   b) exam covering the scope of knowledge detailed in the course programme,
   c) test covering theory and practical exam assessing practical skills provided in the focused residency programme,
   d) grading system for theoretical studies, review articles, or research papers submitted by physiotherapists undergoing speciality training.

2. Speciality programme shall also detail educational standards for speciality training, determined while taking into account:

1) headcount and qualifications of staff involved in delivery of speciality training;

2) teaching facilities required for delivery of course and focused residency programmes;
3) rules for delivery of speciality programme, including rules for assessment of knowledge and practical skills;

4) internal system to assess training quality.

3. Speciality programme and complementary speciality programme shall be designed by an expert team appointed by the director of CPME.

4. The expert team specified in sec. 3 is composed of:

1) national consultant in physiotherapy, or, should this position be vacant, national consultant in a corresponding field;

2) representative of a national association of specialists in physiotherapy who holds the title of specialist in physiotherapy or in a corresponding field;

3) PCP representative holding the title of specialist in physiotherapy or in a corresponding field;

4) two persons either holding the title of specialist in physiotherapy or possessing scientific and professional achievement in this field, nominated by the national consultant in physiotherapy or, should this position be vacant, the national consultant in a corresponding field.

5. Prior to their approval by the minister with health portfolio, the programmes specified in sec. 3 shall be designed by the expert team specified in sec. 4 and edited by CPME.

6. Following their approval by the minister with health portfolio, the programmes specified in sec. 3 shall be published by CPME on its website.

7. The expert team specified in sec. 3 shall revise the programmes specified in sec. 3 to ensure that they reflect the latest standards of excellence in health care. The programmes are edited by CPME and approved by the minister with health portfolio.

8. A physiotherapist with 1st degree speciality obtained under previously existing provisions shall be allowed to undergo speciality training by completing complementary speciality programme which shall be designed to meet the requirements specified in sec. 1 and 2 while taking into consideration the scope of theory and skills prescribed in 1st degree speciality programme.

Art. 39. 1. At least 2 months prior to the application process, training units shall present the governor with the costs of speciality training.

2. At least one month prior to the application process, the governor shall provide and publish on his website a list of positions that are available for persons seeking training in physiotherapy.

Art. 40. 1. Speciality training shall be available to a physiotherapist who jointly meets the following conditions:
1) submitted application for speciality training in physiotherapy (hereafter referred to as the “application”);

2) holds physiotherapy licence;

4) holds Master’s degree specified in art. 13 sec. 3 and meets the requirements laid down in this provision;

5) was accepted for speciality training following the application process.

2. A physiotherapist specified in sec. 1 shall submit the application to the governor holding jurisdiction over the location of speciality training.

3. The application specified in sec. 1 shall contain:

1) first name(s) and last name of the applicant;

2) family name;

3) date and place of birth;

4) sex;

5) PESEL number, or, should there be no PESEL number – details of an identity document: name and number of the document, and the country of issue;

6) number of the document “Physiotherapy Licence”;

7) citizenship(s);

8) correspondence address and telephone number, as well as email address, should the applicant have one;

9) type and details of a document that provides a non-European Union national with the right of residence in the Republic of Poland;

10) academic degree or academic title;

11) years of professional experience;

12) list of publications.

4. The application shall additionally include the following attachments:

1) copy of a diploma issued by a higher education institution;

2) document confirming a doctoral degree – in case specified in art. 41 sec. 3 pt. 2 letter b;

3) document confirming years of professional experience;
4) statement detailing types of publications.

5. The statement specified in sec. 4 pt. 4 shall be submitted under penalty of criminal liability for perjury. The statement shall include the following clause: “I am aware of criminal liability resulting from submission of false statements.” The clause serves as an equivalent of a note cautioning against criminal liability for perjury.

6. Each year the application process shall be opened for submissions within the following deadlines: from 15 November to 15 December, for application process occurring between 16 December and 15 January, and from 30 April to 31 May, for application process occurring between 1 June and 30 June.

7. Deadlines specified in sec. 5 are not governed by art. 58-60 of the Administrative Procedure Code, dated 14 June 1960.

8. Physiotherapists seeking speciality training can be accepted for application process only in one province at a time.

**Art. 41.** 1. The application process for physiotherapists seeking speciality training consists of formal assessment of the application and selection procedure.

2. The application process shall take place twice a year: between 16 December and 15 January, and between 1 June and 30 June.

3. The selection procedure shall take place if the number of candidates for speciality training who meet the requirements specified in sec. 1 is greater than the number of available trainee positions. Points in selection procedure are awarded for:

1) in case of physiotherapists who started their education with this Act already in force: their result secured in the SPE – no more than 50 points;

2) in case of physiotherapists who obtained their qualifications under previously existing provisions:
   a) years of experience - 2 points for each year - but no more than 6 points in total,
   b) doctoral degree – 18 points,
   c) publishing activity as an author or co-author:
      - academic textbook in physiotherapy: 2 points each - no more than 6 points in total,
      - article in physiotherapy published in a scientific peer-reviewed journal: 1 point each - no more than 10 points in total,
   d) post-graduate training in physiotherapy where 100 training hours equals 2 points - no more than 10 points in total;
3) should it occur that at least two candidates seeking speciality training secured the same result, their score in the selection procedure shall also include their final grade obtained on the diploma;

4) should it occur that at least two candidates seeking speciality training obtained the same final grade on the diploma, their score in the selection procedure shall also include academic grade average, calculated down to two decimal points, based on a grade scale used at the given university;

5) in the event specified in pt. 4, the governor shall immediately request the candidates to provide a document confirming their academic grade average, calculated down to two decimal points.

4. The result of the selection procedure is calculated as a percentage of total points scored in the SPE or points specified in sec. 3 pt. 2.

5. Within 20 days after the list of physiotherapists accepted and not accepted for speciality training is published by the body responsible for the application process on its website, a physiotherapist can request said body to verify the application process.

6. The list of physiotherapists who were not accepted for entry is provided with a note on the verification procedure specified in sec. 5.

7. The number of physiotherapists accepted for speciality training is equal to the number of trainee positions available in a given application process conducted in a given province, with the accepted physiotherapists ranked according to their score secured in the selection procedure.

8. The applicant shall be notified by the governor about the outcome of the application process.

9. Within 7 days after receiving the notification specified in sec. 8, the applicant who was not accepted for speciality training shall be allowed to request the governor to verify the application process. The governor shall notify the applicant about the ensuing decision within 7 days after receiving the request.

10. Following the outcome of the application process, the governor shall provide the applicant accepted for speciality training with a placement in a training unit with available trainee positions, specifying the timelines for speciality training to be completed.

11. The competent governor shall provide the person accepted for specialty training with a trainee chart (hereafter referred to as the “TC”) marked with a date specifying the beginning of speciality training.

12. The TC filled with the required entries shall constitute evidence that speciality training was completed in keeping with the speciality programme.

13. Physiotherapists shall be allowed to participate only in one speciality training at a time. Speciality training shall be completed in a single stage.
Art. 42. Physiotherapists accepted for speciality training shall begin their training within 3 months after the date marked in the TC. Speciality supervisor shall confirm in the TC the date when speciality training actually begun.

Art. 43. 1. The registry of physiotherapists in speciality training shall be designed as an ICT system kept by the director of CPME.

2. The registry specified in sec. 1 shall contain:

1) entry number composed of series of symbols: PESEL number, or, should there be no PESEL number – details of an identity document: name and number of the document, and the country of issue;

2) first name(s) and last name;

3) citizenship(s);

4) number and date of issue of diploma obtained on graduation from higher education institution;

5) name of speciality training;

6) name and address of the training unit hosting speciality training;

7) first name and last name of the speciality supervisor;

8) date of the application process;

9) date speciality training was started and concluded;

10) date of removal from the registry;

11) date speciality training was prolonged or shortened;

12) date of issue and number of the TC;

13) date on which the title of specialist was obtained.

3. The TC shall be kept by the speciality supervisor.

Art. 44. 1. A physiotherapist accepted for specialty training shall be allowed to enter speciality training under:

1) indefinite employment contract or fixed-term employment contract concluded for the duration of specialty training with an entity holding the relevant accreditation, and paid training leave granted under separate provisions or unpaid leave granted for the duration of courses and focused residency under conditions laid down in the agreement specified in sec. 2, or
2) indefinite employment contract or fixed-term employment contract concluded for the duration of training with a different entity than specified in pt. 1, and paid training leave granted under separate provisions for the duration of basic residency, courses, and focused residency under conditions laid down in the agreement specified in sec. 2, or

3) agreement concluded for the duration of speciality training with an entity specified in pt. 1, or

4) curriculum of full-time doctoral studies expanded to include speciality training programme in a manner consistent with their field of study.

2. A physiotherapist specified in sec. 1 pt. 1 and 2 shall conclude with their employer an agreement to determine mutual rights and responsibilities of the parties.

3. A physiotherapist undergoing speciality training works full-time as an employee of a health care entity or any other unit competent in physiotherapy.

4. In the event of a physiotherapist working fewer hours, the duration of speciality training shall be proportionally prolonged.

**Art. 45.** 1. The duration of speciality training determined in the speciality programme shall be prolonged for the time of absence:

1) in which a physiotherapist has been claiming benefits specified in art. 2 of Act on Social Insurance Benefits in Case of Illness or Maternity, dated 25 June 1999;

2) in which a physiotherapist has been on unpaid leave of absence lasting no more than 3 months, with said leave of absence granted by the employer hosting speciality training;

3) in the event of circumstances specified in art. 92, art. 176-179, art. 182, art. 185, art. 187, and art. 188 of Labour Code Act, dated 26 June 1974;

4) in which a physiotherapist has been transitioning to another training unit, with their training being put on hold for no more than 14 days;

5) in which a physiotherapist had their training put on hold for no more than 12 months, with the interval resulting from a physiotherapist engaging in speciality training as part of curriculum of full-time doctoral studies expanded to include speciality training programme in a manner consistent with their field of study.

2. The duration of speciality training shall be also prolonged for the period of parental leave granted to a physiotherapist under separate provisions.

3. Should a person in speciality training expect their absence to last more than 3 months and be caused by reasons specified in sec. 1 and 2, they shall notify the governor about said circumstance.
4. Following a substantiated request of a person undergoing speciality training, the governor can have it approved for additional prolongation.

5. The request specified in sec. 4 is submitted by the person in speciality training to the locally competent governor having first received an opinion from their speciality supervisor.

6. The governor shall decide whether to prolong speciality training having first received an opinion from the provincial consultant in physiotherapy or, should this position be vacant, by the provincial consultant in a corresponding field.

7. Details regarding the prolongation of speciality training specified in sec. 1, 2 and 4 shall be recorded in the TC.

8. Having received a notification about the absence specified in sec. 3, the governor shall be able to, for the duration of absence from a training unit, provide other person accepted for speciality training with placement in said training unit, taking into account both their ability for partial or full completion of the speciality program and the number of available positions.

**Art. 46.** 1. The duration of speciality training determined in the speciality programme can be shortened by no more than half of its original duration following a substantiated request of a person undergoing speciality training and under condition of full completion of the speciality programme.

2. The director of CPME shall decide whether to shorten speciality training on the basis of opinion issued by a team appointed by the director of CPME. The ensuing decision shall contain:

1) date of the decision;
2) first name(s) and last name of the person filing the request;
3) subject matter under consideration;
4) conclusion reached;
5) name of the body issuing the decision;

3. The team specified in sec. 2 shall be composed of:

1) provincial consultant in physiotherapy or, should this position be vacant, provincial consultant in a corresponding field;
2) speciality supervisor;
3) representative of a national association of specialists in physiotherapy;
4) representative of PChP holding the title of specialist in physiotherapy or in a corresponding field.
4. The request to shorten the duration of speciality training shall be submitted to the director of CPME by a person undergoing speciality training.

5. The decision which refuses to shorten the duration of speciality training can be appealed to the minister with health care portfolio.

6. A note on the shortening of speciality training shall be included in the TC.

Art. 47. 1. Speciality training shall be supervised by a speciality supervisor who shall be tasked with preparation of a detailed conditions and structure of speciality training in order to ensure proper delivery of the speciality programme.

2. Speciality supervisor shall be appointed and dismissed by the manager of the training unit.

3. To qualify for the role of speciality supervisor a person must hold the title of specialist in physiotherapy; or, should one consider it to be reasonable, hold the title of specialist in a corresponding field; or be a person entrusted with the responsibilities of specialist in physiotherapy following a decision granted by the minister with health care portfolio pursuant to provisions issued on the basis of art. 10 sec. 5 of the Health Care Institutions Act, dated 30 August 1991.

4. Speciality supervisor shall be allowed to supervise up to 3 persons. Should one consider it to be reasonable and secure approval from the national consultant in physiotherapy or, should this position be vacant, from the national consultant in a corresponding field, speciality supervisor shall be allowed to supervise as many as 4 persons.

5. Speciality supervisor shall be dismissed in the event of:

   1) their failure to perform responsibilities specified in sec. 6;
   2) substantiated request submitted by speciality supervisor;
   3) substantiated request submitted by a supervised person;

6. Speciality supervisor shall have the following responsibilities:

   1) helps prepare a detailed conditions and structure of speciality training in order to ensure effective communication of knowledge and skills prescribed in the speciality programme;
   2) helps prepare a detailed plan of activities prescribed in the speciality programme and supervises subsequent delivery of this plan;
   3) ensures that the detailed plan of activities prescribed in the speciality programme is recorded in the TC;
   4) suggests the necessary literature and other sources advancing professional self-development of physiotherapists;
5) evaluates speciality training in keeping with the speciality programme;

6) issues opinions assessing the progress, learning outcomes, and interactions with co-workers and patients, recording them in the TC of a person undergoing speciality training;

7) makes a note in the TC to confirm timely completion of individual parts of a detailed plan of activities prescribed by the speciality programme;

8) makes an annual note in the TC to confirm completion of the activities prescribed by the speciality programme for a given year;

9) make a note in the TC to confirm that speciality training was completed in keeping with the speciality programme;

10) notifies the governor that a physiotherapist interrupted speciality training when they are not making progress towards completion or are unable to complete the speciality programme;

7. Speciality supervisor shall issue confirmation notes specified in sec. 6 pt. 8 and 9 within 14 days after the end of a given year or final completion of speciality training.

8. The contract specified in art. 36 sec. 2 pt. 1 may include additional responsibilities of speciality supervisor.

9. Speciality supervisor shall be allowed to:

1) take part in oral or practical part of the SPSE as an observer;

2) appoint a person to be a mentor for focused residency provided they meet the requirements specified in sec. 10 and consent to take up this role.

10. Focused residency programs completed as part of the speciality programme shall be supervised either by a person holding the title of specialist in physiotherapy or by a person who had their professional experience and scientific achievement recognised as equivalent to completion of the speciality programme by a decision of the minister with health care portfolio issued on the basis of previously existing provisions (hereafter referred to as “focused residency mentor”). A person specified in sec. 9 pt. 2 shall be able to exercise direct supervision over no more than 3 persons completing their focused residency.

**Art. 48.** 1. In the event of the training unit being dissolved, ceasing to offer speciality training for other reasons, or losing its accreditation, the governor shall issue a placement detailing the location of and date for speciality training to be resumed after having first consulted with speciality supervisor and the manager of the training unit that is to take over speciality training from the training unit where it was discontinued.

2. Should one find it particularly reasonable, the governor shall be allowed to accept a request of a physiotherapist undergoing speciality training and order their re-placement to another training unit provided it has the proper accreditation and available positions.
3. Should the training unit specified in sec. 1 and 2 be based in a different province, the transition to another training unit follows after approvals from the locally competent governor and the locally competent provincial consultant.

4. In the event specified in sec. 3, the governor shall issue for a physiotherapist a re-placement while recording this fact in the TC basing on documents submitted by the governor holding jurisdiction over the province where a physiotherapist was undergoing speciality training previously.

5. A physiotherapist undergoing speciality training in a given province shall be removed from the registry by the governor:

1) if a physiotherapist failed to undertake speciality training within 3 months after the date specified in the TC, or if a physiotherapist did not complete their speciality training within the prescribed timeline;

2) if a physiotherapist undergoing speciality training is not making progress towards completion or is unable to complete the speciality programme - following a notification from speciality supervisor and an opinion issued by the provincial consultant in physiotherapy or, should this position be vacant, by the provincial consultant in a corresponding field;

3) following a request of a physiotherapist undergoing speciality training;

4) if within 3 months after the last entry in the TC a physiotherapist neglected to obtain notes specified in art. 47 sec. 6 pt. 8 and 9.

Art 49. 1. A physiotherapist who completed speciality training can be accepted for the SPSE.

2. When accepted for speciality training following the application process, a physiotherapist with a post-doctoral degree and proper professional achievement can request the director of CPME to recognise their scientific and professional achievement as equivalent to partial or full completion of the speciality programme.

3. Basing on an opinion provided by a team appointed by the director of CPME, the director of CPME shall be allowed to recognise scientific and professional achievement of the physiotherapist specified in sec. 2 as equivalent to partial or full completion of the detailed speciality programme. Should scientific and professional achievement of said physiotherapist be recognised as equivalent to full completion of the detailed speciality programme, the director of CPME shall be allowed to accept said physiotherapist for the SPSE.

4. The team specified in sec. 3 shall be composed of:

1) national consultant in physiotherapy;

2) speciality supervisor;

3) PCP representative.
5. A physiotherapist intending to take the SPSE submits the SPSE application to the competent governor.

6. The request specified in sec. 5 shall contain:

1) first name(s) and last name;
2) date and place of birth;
3) PESEL number, or, should there be no PESEL number – details of an identity document: name and number of the document, and the country of issue;
4) citizenship(s);
5) correspondence address, telephone number, and email address, should the person have one;
6) name and address of the training unit hosting speciality training;
7) academic degree or title, first name and last name of the speciality supervisor;
8) details regarding the shortening or prolongation of speciality training;
10) decision specified in sec. 3 or art. 149, if applicable;

7. An electronically generated form for the application specified in sec. 5 shall be downloadable from the CME website. CME shall electronically confirm the submission. The applicant shall fill out the form, print it, and submit personally signed application to the competent governor.

8. The application and documents specified in sec. 5 shall be submitted by 15 July each year - for the autumn session, and by 15 January each year - for the spring session. These deadlines are not governed by provisions of art. 58-60 of Administrative Procedure Code, dated 14 June 1960.

9. The governor shall provide formal assessment of the application and the attached documents. Should it reveal any formal defects, the governor shall request the applicant to remedy them within 7 days after receiving said request. Provisions of art. 58-60 of Administrative Procedure Code, dated 14 June 1960, shall be applicable.

10. Within 14 days after receiving the complete application and the documents specified in sec. 5, the governor shall hand them over to the competent national consultant along with a request for verification whether the applicant completed speciality training in keeping with the speciality programme. Within 14 days after receiving the application and the documents, the national consultant shall notify the competent governor about the verification outcome, handing them back to the governor who shall store them pursuant to art. 5 and art. 6 of National Archival Resources and Archives Act, dated 14 July 1983.
11. Should it occur that the applicant did not complete the speciality programme, the competent national consultant shall identify which components of the speciality programme were not completed by the applicant.

12. Having received the requested information from the national consultant, the governor shall immediately:

1) confirm that speciality training was completed;

2) in the event specified in sec. 11 – provide a physiotherapist with placement to allow completion of the uncompleted component of the speciality programme while prolonging speciality training for the period required for its completion.

13. The governor shall notify the applicant about the verification outcome specified in sec. 12.

14. In the event specified in sec. 12 pt. 2, following completion of a heretofore uncompleted component of the speciality programme and having it confirmed in the TC by speciality supervisor, the applicant shall be eligible for submission of the application specified in sec. 5 pursuant to provisions of sec. 6-13 and sec. 15-17.

15. Having confirmed completion of speciality training, the governor shall issue a decision to accept the applicant for the SPSE.

16. The governor prepares a list of persons accepted for the SPSE, handing it over to CME by means of electronic communication.

17. CME shall determine a list of physiotherapists taking the SPSE at a given date in a given location, and, no later than 21 days before the SPSE, notify these persons via electronic mail about the date and location of the exam, as well as the assigned code number, sending these details to the email address provided in the application specified in sec. 5, or, should it be not provided, to the correspondence address provided in this application.

Art. 50. 1. The applicant pays the exam fee which shall not be greater than 25% of the average monthly wage (excluding profit-sharing bonuses) paid last year in the business enterprise sector, published by 15 January each year in the notice issued by the President of Central Statistical Office in the Official Gazette of Republic of Poland “Monitor Polski.”

2. The exam fee specified in sec. 1 is a revenue of the state budget.

3. Should the exam fee specified in sec. 1 be not paid at all or be not paid in full, the director of CME shall request the applicant via electronic mail to have this formal defect remedied, sending the request to the email address given in the application specified in sec. 5, or, should it not be given, to the correspondence address provided in said application. Provisions of art. 64 of Administrative Procedure Code, dated 14 June 1960, shall be applicable with the following reservation: should the deadline to remedy formal defects expire, the SPSE application affected by such defect shall be treated as not having been submitted.
**Art. 51.** 1. The SPSE is organised by CME.

2. The SPSE is conducted by State Examination Committee (hereafter referred to as “SEC”).

3. The director of CME shall appoint SEC and Examination Panel as well as their respective Chairpersons.

4. Persons eligible for the roles of SEC Chairperson and SEC members must hold the title of specialist in physiotherapy or in a corresponding field, or be entrusted with the responsibilities of specialist in physiotherapy following a decision granted by the minister with health care portfolio pursuant to provisions issued on the basis of art. 10 sec. 5 of Health Care Institutions Act, dated 30 August 1991.

5. SEC member cannot be subject to final judgment of conviction for an intentional crime indictable by public prosecution or final judgment of conviction for an intentional tax offense.


7. The candidates for SEC can be nominated by:

   1) national consultant in physiotherapy or, should this position be vacant, by the national consultant in a corresponding field;
   2) PChP;
   3) national association of specialists in physiotherapy;

8. The nomination specified in sec. 7 shall contain:

   1) first name and last name of the candidate;
   2) PESEL number, or, should there be no PESEL number – details of an identity document: name and number of the document, and the country of issue;
   3) candidate’s speciality;
   4) identification of the field in which the candidate stands to be appointed to SEC;
   5) candidate’s correspondence address.

9. The nomination specified in sec. 7 shall include a certified copy of a specialist diploma or a certified copy of the decision specified in sec. 4.

10. A copy of a specialist diploma shall not be required in the event of said diploma being issued by the director of CME. In this circumstance it shall be sufficient to provide specialist diploma’s number and date of issue.
11. Persons appointed to SEC shall be provided with a deed of appointment.

12. The director of CME shall appoint the national consultant in physiotherapy or, should this position be vacant, the national consultant in a corresponding field, as SEC Chairperson.


14. The director of CME shall dismiss SEC member in the event of:
   1) resignation;
   2) illness permanently preventing them from discharging their duties;
   3) non-performance or improper performance of their duties;
   4) final judgment of conviction for an intentional crime indictable by public prosecution or final judgment of conviction for an intentional tax offense;
   5) submission of the statement specified in art. 52 sec. 4 that was proven to be untrue.

15. The director of CME can dismiss SEC member in the event of them being subject to criminal investigation for an intentional crime indictable by public prosecution or for an intentional tax offense.

16. Expiry of SEC membership or dismissal of SEC member occurring in the course of examination session shall not delay SEC in its proceedings.

Art. 52. 1. In order to conduct the SPSE on designated dates and in designated locations the director of CME shall appoint Examination Panels from among SEC members. Examination Panel shall be composed of at least 3 SEC members representing entities listed in art. 51 sec. 7.

2. It shall not allowed for the member of Examination Panel to sit in Examination Panel that presides over the SPSE taken by a candidate in relation to whom they remain:
   1) a spouse;
   2) a person in a relationship of:
      a) consanguinity or affinity up to the second degree;
      b) adoption;
   3) in a relationship of cohabitation;
   4) in a professional relationship;

3. Reasons for recusal specified in sec. 2 pt. 1 and 2 letter b continue to apply regardless of termination of marriage or adoption.
4. Prior to the SPSE, members of Examination Panel shall submit to the director of CME a written statement that relationships specified in sec. 2 do not occur between them and any candidate taking the SPSE before said Examination Panel, also declaring that they have not been subject to final judgment of conviction for an intentional crime indicable by public prosecution or final judgment of conviction for an intentional tax offense while accepting criminal liability for the evidence being to the contrary. The statement shall include the following clause: “I am aware of criminal liability resulting from submission of false statements.” The clause serves as an equivalent of a note cautioning against criminal liability for perjury.

5. Members of Examination Panel shall be entitled to:

1) remuneration for participation in the proceedings of Examination Panel in the amount not exceeding PLN 500 for Chairperson and PLN 300 for the member;

2) reimbursement of travel expenses in the amount resulting from and in accordance with the rules laid down in provisions issued pursuant to art. 77 § 2 of Labour Code Act, dated 26 June 1974;

3) leave of absence, without pay entitlement, granted for the day on which Examination Panel conducts its proceedings.

6. Payment of remuneration specified in sec. 5 pt. 1, and reimbursement for expenses specified in sec. 5 pt. 2 shall effectuate under the rules laid down in a directive issued by the director of CME.

**Art. 53.** 1. Examination Panel conducting the SPSE:

1) shall conduct the SPSE in keeping with the SPSE statute specified in art. 54 sec. 8;

2) shall hand over to CME answer sheets in a manner that prevents any changes to their contents - immediately following the test;

3) shall hand over to CME the grades awarded in oral and practical exams, as well as the SPSE documentation - within 14 days after conclusion of the SPSE.

**Art. 54.** 1. The scope of the SPSE shall be consistent with the speciality programme.

2. The SPSE shall be conducted twice a year: in a spring session - between 2 May and 15 June, and in an autumn session - between 2 November and 15 December.

3. The SPSE shall be structured into two parts including a theoretical exam and a practical exam. Before progressing to the practical part of the SPSE one shall be first required to secure a positive result of the theoretical exam.

4. A theoretical exam shall be conducted in the following form:

1) test - if at least 30 persons were accepted for a given examination session;

2) oral exam.
5. The test shall be conducted simultaneously and nationwide on a date designated by the director of CME. The test exam shall be composed of 120 questions, each with five available answers out of which only one answer shall be correct. Each correct answer shall be equivalent to 1 point. No points shall be awarded for a missing answer, incorrect answer, or multiple answers. A positive result of the test exam shall be secured by an examinee receiving at least 60% of the total score.

6. In the course of the exam or immediately following its conclusion, but prior to leaving the examination room, the examinee shall be allowed to raise objections questioning the substance of a particular question. The objection shall be examined immediately after the exam and prior to determination of its results. Should said objection be acknowledged, the problem in question shall not be included in the final result determined for all examinees taking the SPSE, thus reducing the total amount of points to be scored on the test. One shall not award points for the annulled problem.

7. Locations and dates for practical and oral tests shall be determined by the director of CME in consultation with SEC Chairperson.

8. The SPSE shall be conducted in keeping with the SPSE statute drawn up by the director of CME and approved by the minister with health care portfolio.

Art. 55. 1. In order to prepare particular exam problems the director of CME shall designate persons possessing expertise and experience in physiotherapy or in corresponding fields. A new test shall be prepared for each session.

2. The director of CME shall designate reviewers to verify exam problems in consultation with the competent national consultant.

3. Preparation of test problems and the SPSE proceedings are funded by CME.

4. Tests and test questions as well as problems presented in oral and practical exams shall be prepared, processed, distributed, and stored in a manner that prevents access of persons other than those involved in their preparation, processing, distribution, and storage, persons conducting the SPSE, and persons with supervisory roles.

5. Tests and test questions as well as problems for oral and practical exams shall not be shared pursuant to rules laid down in Public Information Access Act, dated 6 September 2001.

6. The director of CME shall be allowed to share the tests and test questions exclusively with persons taking the SPSE. The director of CME shall introduce a directive laying down the rules governing the sharing process and how it is documented.

Art. 56. 1. The SPSE shall be conducted in the presence of at least three SEC members.

2. In the event of the examinee not showing up for the SPSE for whatever reason it shall be understood that said examinee decided to withdraw from the SPSE.

3. A physiotherapist shall be allowed to take the exam having presented an identity document.
4. The test shall be filled by each examinee independently. While taking the SPSE, the examinee shall not be allowed to consult scientific or didactic aids, nor use devices able to copy or send and receive information. Finding the examinee in breach of this restriction shall constitute a reason for disqualification and thus a negative result of the exam.

5. The SPSE can be recorded with audio-visual equipment. The examinee shall be disqualified should a post-exam analysis of the evidence provided by audio-visual equipment reveal that the examinee had been using scientific or didactic aids, or devices able to copy or send and receive information, or had not been filling the test independently. The examinee shall be disqualified by the decision of SEC Chairperson following a request of the Examination Panel. This event shall be recorded in the exam protocol.

6. The director of CME shall notify the President of the Polish Council of Physiotherapists (hereafter referred to as the “President”) about the event of disqualification.

7. The SPSE proceedings shall be recorded in the exam protocol signed by the members of Examination Panel conducting the exam.

8. Chairperson of Examination Panel shall send the exam protocol to the director of CME within 14 days after conclusion of the exam.

Art. 57. 1. CME shall determine the SPSE results and publish them on its website. The SPSE result shall not be understood as a decision within the meaning of Administrative Procedure Code, dated 14 June 1960.

2. A physiotherapist that either did not take the SPSE at the designated date or took the SPE and received a negative result shall be allowed to re-take the SPSE in the upcoming session.

3. In the event specified in sec. 2, a physiotherapist shall submit their application to the director of CME. Provisions of art. 49 shall be applicable.

4. A physiotherapist specified in sec. 3 shall be added by the director of CME to the list of persons taking the SPSE in a given session.

5. In order to successfully pass the SPSE one shall be required to secure positive results in both parts of the SPSE specified in art. 54 sec. 3.

6. A positive result secured in the part of the SPSE shall be recognised in six consecutive sessions that follow after the session in which said result was secured. Should a physiotherapist fail to secure a positive result in the practical exam or fail to take the practical exam at a designated date, they shall be allowed to take this particular part of the SPSE during another session.

7. The final SPSE grade is an arithmetic average of the results secured in theoretical and practical exams.

8. The SPSE results shall be sent to governors, the director of CME, and the relevant training units by means of electronic communication.
Art. 58. 1. The director of CME shall issue a diploma to certify that the SPSE was passed successfully.

2. The director of CME shall issue a diploma specified in sec. 1 within 30 days after receiving the complete SPSE documentation.

3. CEM shall keep a registry of diplomas specified in sec. 1, and store their electronic copies.

4. The registry shall be designed as an ICT system using data format specified by the director of CME.

5. The registry specified in sec. 4 shall contain the following data of persons who obtained the diploma:

1) first name(s), last name;

2) PESEL number, or, should there be no PESEL number – name and number of the an identity document;

3) number and date of issue of the diploma;

4) first name and last name of speciality supervisor including their academic degree or title;

5) name and address of the training unit where a physiotherapist completed their speciality training;

6) result secured in the SPSE;

7) specialist title obtained after passing the SPSE.

6. The SPSE documentation shall be stored by CEM pursuant to art. 5 and art. 6 of National Archival Resources and Archives Act, dated 14 July 1983.

7. A physiotherapist who successfully passed the SPSE shall be allowed to request the director of CME to introduce a correction to or issue a duplicate or certified copy of the SPSE diploma. CME shall provide these services for a charge of 50 PLN. The charge shall not be collected should corrections be necessitated by mistakes on the part of CME.

8. In the wake of each SPSE session, CME shall use means of electronic communication to provide PChP with details of persons who obtained the title of specialist in physiotherapy.

Art. 59. 1. In the event of gross violation of procedure occurring in the course of the SPSE or unforeseeable events interfering with the proper course of the SPSE, the director of CME shall be allowed to annul the exam either for individual examinees or for the entire group of examinees.
2. The procedure shall be initiated on request of the member of Examination Panel conducting the SPSE, an examinee taking the SPSE, or ex officio.

3. Should the SPSE be annulled in entirety or in part, the entire SPSE or part of the SPSE shall be considered not to have taken place. The annulled exam shall be repeated within 3 months after the date on which the decision to annul the SPSE became final.

4. The decision to annul the SPSE shall be taken by the director of CME within 14 days after learning about circumstances providing grounds for the annulment of the SPSE in its entirety or in part.

5. The decision to annul the SPSE in entirety or in part shall be published on the CME website. Physiotherapists who took such SPSE shall be notified about the decision via electronic mail sent to email address provided in the application specified in art. 49 sec. 5, or, should it be not provided, to the correspondence address provided in this application. The director of CME shall use the means of electronic communication to notify PChP about the SPSE being annulled in entirety or in part.

6. The decision to annul the exam can be appealed to the minister with health portfolio.

7. The exam fee shall not be collected in the event of the physiotherapist re-taking the entire SPSE or part of the SPSE as a result of them being annulled.

**Art. 60.** The minister with health portfolio shall introduce a regulation determining:

1) template of the TC,

2) physiotherapy speciality code

- taking into account the need to provide full information required for delivery of speciality training;

3) template for a specialist diploma, taking into account the need to present the contents of the document in a clear and transparent way,

4) remuneration for audit activities specified in art. 37 sec. 12 pt. 1, taking into account efforts that are required to carry out audit activities,

5) detailed procedures governing SEC activities, this to include remuneration for SEC Chairperson and SEC members,

6) template of the statement specified in art. 52 sec. 4,

7) detailed rules and procedures for the SPSE and determination of SPSE results

- taking into account efforts contributed by SEC Chairperson and SEC members, as well as the need to preserve impartiality of SEC and the need to ensure that the SPSE proceeds in a proper and effective way;
8) procedures followed by the director of CME in issuing a duplicate or certified copy of the SPSE diploma, and the rules for payment for a duplicate or certified copy of the SPSE diploma,

9) procedures followed by the director of CME in introducing corrections to the SPSE diploma, and the rules of payment for corrections to the SPSE diploma

- taking into account the need to ensure proper and effective way in which the document confirming the title of specialist is issued;

10) SPSE fee, taking into account costs resulting from the SPSE proceedings and diplomas confirming the title of specialist.

Chapter 6

Professional Governance

Art. 61. PChP is composed of physiotherapists registered with the National Registry of Physiotherapists.

Art. 62. 1. The tasks of the governing organisation include in particular:

1) upholding professional standards of excellence in physiotherapy practice;

2) representing physiotherapists;

3) working toward continuous improvement of professional qualifications offered by physiotherapists;

4) introducing and revising standards and guidelines in physiotherapy;

5) health education and health promotion;

6) introducing and upholding a physiotherapy code of conduct;

7) preserving dignity of the profession;

2. The governing organisation is pursuing its tasks in particular through:

1) recognising and granting physiotherapy licence;

2) keeping registries specified in provisions of this Act;

3) issuing opinions and recommendations in matters relating to physiotherapy practice;

4) issuing opinions and recommendations in matters relating to professional education;

5) issuing opinions in relation to draft laws and regulations shaping regulatory framework governing health protection and organisation of health care;
issuing opinions in matters relating to professional education programmes;

issuing rulings in matters relating to professional accountability;

pursuing educational, scientific and research activity;

sharing information on the recognition of professional qualifications, health protection regulations, social insurance, and the physiotherapy code of conduct, within the scope required for physiotherapy practice;

working with national associations of specialists in physiotherapy, higher education institutions, and research and development units, both in Poland and abroad;

working with public administration, local government, and foreign physiotherapy organisations, as well as domestic organisations governing other health care professions;

setting up and managing self-help institutions and other forms of material assistance for physiotherapists;

managing the property of the governing organisation;

recognising qualifications of physiotherapists intending to practise in the Republic of Poland;

recognising the title of specialist obtained by a physiotherapist outside the Republic of Poland;

**Art. 63.** 1. Members of the governing organisation have the right to:

1) elect and be elected to PChP bodies, subject to art. 65 sec. 2-4 and art. 66;

2) be provided with PChP support in improvement of their professional qualifications and securing proper conditions of physiotherapy practice;

3) be provided with and be protected by legal counsel of PChP;

4) be provided with other PChP services and assistance through self-help initiatives;

2. Members of the governing organisation are to obliged to:

1) observe the physiotherapy code of conduct and the physiotherapy code of practice, as well as uphold values of the profession;

2) engage in conscientious delivery of professional responsibilities;

3) observe resolutions adopted by PChP bodies;

4) regularly pay membership fee;
update their information revealed in the National Registry of Physiotherapists.

**Art. 64.** 1. PChP is governed by the following bodies:

1) General Meeting;
2) Polish Council of Physiotherapists;
3) Audit Committee;
4) Higher Disciplinary Tribunal;
5) Disciplinary Tribunal;
6) Prosecutor.

2. Membership in bodies of the governing organisation is reserved exclusively for physiotherapists registered with the National Registry of Physiotherapists.

3. Bodies of the governing organisation are appointed for a 4-year term, but continue discharging their duties until newly appointed bodies take over.

4. One shall be able to serve on a body of the governing organisation for no more than 2 consecutive terms. Serving on a given body for more than 24 months shall be considered as fulfilment of a full term.

**Art. 65.** 1. The votes during elections to PChP bodies are cast in a secret ballot.

2. The right to participate in elections during the General Meeting shall be reserved exclusively for delegates attending said General Meeting.

3. Candidates running for the position of Prosecutor, Deputy Prosecutor, member of Disciplinary Tribunal, and member of Higher Disciplinary Tribunal, shall be required to demonstrate at least 10 years of uninterrupted physiotherapy practice.

4. Members of Disciplinary Tribunal, Higher Disciplinary Tribunal, and Audit Committee, as well as Prosecutor, and Deputy Prosecutors, cannot be appointed to any other body of the governing organisation except for the General Meeting.

5. Should mandate of Prosecutor expire before the end of the term or should Prosecutor be unable to discharge their duties, Higher Disciplinary Tribunal shall appoint one of Deputy Prosecutors to discharge Prosecutor’s duties until newly appointed Prosecutor takes over.

6. One cannot serve as Deputy Prosecutor in the event of circumstances specified in art. 67 sec. 1 pt. 1-4 and 6-8.

7. Deputy Prosecutor shall be suspended in their position in the event of being subject to accountability proceedings or criminal investigation for an intentional crime indictable by public prosecution.
**Art. 66.** 1. PChP members can exercise their voting rights with the exception of members:

1) who were banned from electable positions in bodies of the governing organisation on the basis of art. 108 sec. 1 pt. 5 or were suspended on the basis of art. 108 sec. 1 pt. 7 or

2) who were subject by the final ruling of the court to penal measure consisting of deprivation of public rights, or penal measure or protective measure consisting of removal of licence, or were subject to court or prosecutor order that applies a protective measure consisting of suspension of licence.

2. PChP members have the right to run for positions with the exception of members:

1) who had their licence suspended on the basis of art. 12 sec. 4 or

2) who were subject by the final ruling of the court to penal measure consisting of deprivation of public rights, or penal measure or protective measure consisting of removal of licence, or were subject to court or prosecutor order that applies a protective measure consisting of suspension of licence, or

3) were subjected to final judgment of conviction for an intentional crime indictable by public prosecution, or

4) were subjected to one of the penalties specified in art. 108 sec. 1 pt. 2-8 - until the penalty is expunged or the protective measure expires.

3. PChP members who within the last five years preceding the elections did not pay at least one annual membership fee shall not have the right to run for positions in PChP bodies unless they pay the outstanding fee.

**Art. 67.** 1. Mandate in PChP bodies expires prior to serving the full term in the event of:

1) removal from the National Registry of Physiotherapists;

2) dismissal by the electing body;

3) one of the penalties specified in art. 108 sec. 1 pt. 2-8;

4) suspension of licence;

5) collective dismissal of all members serving at a given time on a given body;

6) being subject by the final ruling of the court to penal measure consisting of deprivation of public rights, or penal measure or protective measure consisting of removal of licence, or being subject to court or prosecutor order that applies a protective measure consisting of suspension of licence;
7) final judgment of conviction for an intentional crime indictable by public prosecution;
8) failure to pay an annual membership fee;
9) resignation;
10) death.

2. Mandate in PChP bodies is suspended in the event of:
1) criminal investigation for an intentional crime indictable by public prosecution or accountability proceedings instituted against a person serving on a PChP body;
2) avoiding duties for a period of time longer than 3 months.

3. Mandate of Prosecutor and members of Disciplinary Tribunal and Higher Disciplinary Tribunal shall be suspended also in the event of accountability proceedings instituted against persons serving in these positions.

4. Suspension specified in sec. 2 pt. 2 as well as its duration is decided by the Polish Council of Physiotherapists.

5. The Polish Council of Physiotherapists can appoint a person to take over responsibilities of a person whose mandate was suspended, with the reservation being that such replacement mandate shall last no longer than 12 months.

Art. 68. 1. Members serving in PChP bodies discharge their duties gratuitously.

2. The General Meeting shall draw up a list of positions in PChP bodies that are eligible for remuneration, laying down the rules for and the amount of remuneration received by persons elected for positions specified in a resolution passed by the General Meeting.

Art. 69. 1. In the event of an employee serving in a PChP body or working on behalf of PChP, the Polish Council of Physiotherapists or President can request the employer to provide said employee with a leave of absence, without pay entitlement.

2. Taking into account provisions issued on the basis of art. 775 § 2 of Labour Code Act, dated 26 June 1974, the Polish Council of Physiotherapists shall determine rules and procedures for providing compensation related to the leave of absence specified in sec. 1, as well as procedures followed in reimbursement of travel expenses and other reasonable expenses incurred by members while discharging their duties on behalf of PChP.

Art. 70. 1. Collective bodies of PChP adopt resolutions. Having adopted a resolution, PChP bodies shall immediately lay down their language in writing.

2. The resolutions specified in sec. 1 are passed by a simple majority in the presence of at least half of the members sitting in a given body.
**Art. 71.** 1. Within 21 days after passing the resolution, collective bodies of PChP shall provide the minister with health care portfolio with resolutions adopted in the following matters:

1) rules governing elections to PChP bodies;
2) bylaws of PChP bodies;
3) election of persons to PChP bodies;
4) persons elected to PChP bodies who are authorised to represent PChP.

2. Within 3 months after receiving a resolution passed by a PChP body, the minister with health care portfolio can question the legality of the resolution by lodging an appeal with the Supreme Court. The appeal shall be heard while following the rules governing non-litigious proceedings provided in Civil Procedure Code, dated 17 November 1964 (Journal of Laws 2014, item 101, with subsequent changes).

3. The Supreme Court shall rule to uphold or overrule the appealed resolution, referring it back for reconsideration to the competent PChP body while providing instruction to remedy its deficiencies.

4. To exercise the power specified in sec. 2 or to obtain the resolution specified in sec. 1, the minister with health care portfolio can request a PChP body to provide said resolution within 14 days after it was adopted. A PChP body provides said resolution within 14 days after it was adopted.

5. The minister with health care portfolio can request the General Meeting or the Polish Council of Physiotherapists to adopt a resolution in matters falling under the competence of the governing organisation.

6. The request specified in sec. 5 shall be considered either by the upcoming General Meeting or by the Polish Council of Physiotherapists at the upcoming sitting, but in any case not later than within 3 months after it was received.

7. The provisions of sec. 1-6 shall not be applied to resolutions:

1) which relate to professional accountability of physiotherapists;
2) governed by provisions on administrative decisions provided in Administrative Procedure Code, dated 14 June 1960.

**Art. 72.** Until 31 May of each year, the Polish Council of Physiotherapists provides the minister with health care portfolio with a summary of activities pursued by the governing organisation in the preceding year.

**Art. 73.** The General Meeting is the supreme body of the governing organisation.
Art. 74. 1. The General Meeting is attended by delegates appointed by provincial assemblies of physiotherapists (hereafter referred to as “provincial assemblies”) as well as non-delegated and outgoing members serving on the bodies of the governing organisation who shall join the General Meeting in advisory roles.

2. Provincial assemblies shall be composed of physiotherapists residing in particular provinces.

3. Should the number of physiotherapists in a given province exceed 300, delegates for the General Meeting shall be appointed by district meetings of provincial assemblies.

4. In the event specified in sec. 3, the Polish Council of Physiotherapists shall divide a given province into districts.

5. The Polish Council of Physiotherapists shall provide the rules for appointment of delegates for the General Meeting, determine the number of delegates coming from individual provinces, as well as provide the rules governing elections to the Polish Council of Physiotherapists.

6. The General Meeting is convened by the Polish Council of Physiotherapists every 4 years.

Art. 75. The General Meeting:

1) elects the President;

2) elects the Polish Council of Physiotherapists, Audit Committee, Disciplinary Tribunal and Higher Disciplinary Tribunal, Prosecutor, and Deputy Prosecutors;

3) sets out guidelines for the governing organisation and its bodies;

4) lays down the rules that govern elections to bodies of the governing organisation, determines the number of members serving in these bodies and rules for their dismissal, as well as rules followed in adopting resolutions;

5) examines and approves reports submitted by the Polish Council of Physiotherapists, Audit Committee, Disciplinary Tribunal and Higher Disciplinary Tribunal, and Prosecutor;

6) introduces a physiotherapy code of conduct;

7) sets out the principles for financial management of the governing organisation.

Art. 76. 1. The Extraordinary General Meeting shall be convened by the Polish Council of Physiotherapists:

1) acting on its own initiative;

2) on request of the Executive Committee of the Polish Council of Physiotherapists;
3) on request of the Audit Committee;

4) on request of at least 1/10 of PChP membership.

2. The Extraordinary General Meeting shall be convened not later than within 3 months after receiving the relevant request and shall consider matters detailed in such request.

3. Should the Polish Council of Physiotherapists fail to convene the Extraordinary General Meeting within the deadline specified in sec. 2, the Extraordinary General Meeting shall be convened by the minister with health care portfolio.

**Art. 77.** The Polish Council of Physiotherapists:

1) represents the governing organisation before state authorities, local authorities, courts, National Health Fund, institutions and organisations;

2) executes resolutions adopted by the General Meeting;

3) issues opinions and recommendations in relation to draft laws and regulations shaping regulatory framework governing health protection;

4) provides opinions on academic education programmes and speciality programmes in physiotherapy;

5) passes the budget of the Polish Council of Physiotherapists and approves reports of its implementation as well as considers motions submitted by Audit Committee;

6) elects President and Prosecutor should their mandate expire in the intervening period between General Meetings;

7) coordinates continuing professional development of physiotherapists;

8) lays down principles for financial management of the governing organisation;

9) determines membership fee along with rules for its allocation, as well as handling charges;

10) embarks on other tasks specified elsewhere in this Act.

**Art. 78.** Audit Committee audits financial and economic activities of the Polish Council of Physiotherapists.

**Art. 79.** Disciplinary Tribunal hears disciplinary cases brought by the Prosecutor.

**Art. 80.** Higher Disciplinary Tribunal:

1) adopts bylaws governing proceedings of Disciplinary Tribunal and Higher Disciplinary Tribunal;
2) hears appeals to rulings issued by Disciplinary Tribunal.

Art. 81. Prosecutor:

1) prepares disciplinary proceedings and acts as prosecution before Disciplinary Tribunal and Higher Disciplinary Tribunal;

2) enacts policies to prevent professional misdemeanor and misconduct.

Art. 82. The governing organisation can engage in economic activity.

Art. 83. The governing organisation funds its activities through:

1) membership fees;

2) other sources, this to include in particular grants, subsidies, donations, and bequests;

3) economic activity.

Art. 84. Unpaid but due membership fees and procedural costs incurred in disciplinary proceedings shall be collected pursuant to provisions of Administrative Enforcement Proceedings Act, dated 17 June 1996 (Journal of Laws 2014, item 1619, with subsequent changes\textsuperscript{12}).
Chapter 7

Professional Accountability

Art. 85. 1. Members of the governing organisation are subject to professional accountability for breaching the physiotherapy code of conduct or the physiotherapy code of practice (hereafter referred to as “misconduct/malpractice”).

2. Professional accountability specified in sec. 1 arises also in regard to citizens of member states of the European Union engaging in temporary or occasional practice in the Republic of Poland.

3. Whenever the phrase “disciplinary tribunal” appears in this chapter without specific meaning it shall refer to Disciplinary Tribunal or Higher Disciplinary Tribunal.

Art. 86. Accountability proceedings run their course independently from criminal or misdemeanour proceeding as well as disciplinary proceedings of a given organisational unit should they be provided for in specific provisions of such unit. Accountability proceedings can be stayed until criminal or misdemeanour proceedings are concluded.

Art. 87. 1. Accountability proceedings include:

1) preliminary inquiry;
2) investigative proceedings;
3) disciplinary proceedings;
4) enforcement proceedings.

2. A preliminary inquiry is opened to look into the matter in question in order to establish whether there are grounds to open investigative proceedings. A preliminary inquiry does not involve expert evidence, nor other activities recorded in the protocol, except for witness testimony taken from a person lodging a complaint.

3. Investigative proceedings are opened to investigate the matter and to establish whether the occurrence constitutes a misconduct/malpractice. Should it occur that the matter under investigation constitutes a misconduct/malpractice, one shall determine the person culpable of a misconduct/malpractice, as well as collect, secure, and preserve the evidence to the extent one should deem it necessary.

4. Disciplinary proceedings are initiated to ensure accountability of a person culpable of a misconduct/malpractice, identify circumstances conducive to such misconduct/malpractice, as well as prevent these circumstances from happening in the future while upholding the rule of law and societal values.

5. Enforcement proceedings are initiated to enforce rulings issued by disciplinary tribunal.
**Art. 88.** 1. Accountability proceedings are conducted between the aggrieved party and the accused party.

2. Disciplinary proceedings are also joined by Prosecutor or Deputy Prosecutor.

3. Deputy Prosecutor takes part in accountability proceedings with the rights and duties of Prosecutor.

**Art. 89.** 1. The aggrieved party is a natural person, legal person or organisational unit without legal personhood whose legal rights have been directly violated or compromised by a misconduct/malpractice.

2. The aggrieved party can appoint no more than two proxies.

3. In the event of death of the aggrieved party, their rights in accountability proceedings, including the right to access medical information and medical records, can be exercised by their spouse, descendant, ascendant, siblings, person in the same line and degree of affinity, adopted person and their spouse, as well as person with whom the deceased heretofore remained in a relation of cohabitation.

**Art. 90.** 1. The accused party is a physiotherapist against whom or in relation to whom, in the course of investigative proceedings, Prosecutor brought charges or requested a penalty.

2. The accused party can appoint no more than two defence counsels.

3. Following a substantiated request submitted by the accused party in the course of accountability proceedings, disciplinary tribunal shall appoint a physiotherapist or a lawyer as a defence counsel for the accused party.

4. Disciplinary tribunal shall appoint a physiotherapist or a lawyer as defence counsel for the accused party should there arise reasonable doubt as to sanity of the accused party facing disciplinary tribunal without a defence counsel. Following a request submitted by Prosecutor in the course of investigative proceedings, disciplinary tribunal shall appoint a defence counsel for the accused party.

5. Disciplinary tribunal shall appoint a physiotherapist or a lawyer as defence counsel for the accused party in the event of circumstances that may be harmful for the defence of the accused party facing disciplinary tribunal without a defence counsel.

**Art. 91.** 1. The body conducting accountability proceedings shall consider the evidence presented either by parties or ex officio.

2. Should one deem it necessary to seek insight into circumstances considered to be highly consequential for the outcome of the proceedings, one shall consult an expert or specialist.

3. Should one deem it necessary to obtain an opinion on mental health of the accused party, one shall consult two psychiatrists.
4. It shall not be considered a breach of professional secrecy for a physiotherapist to share testimonies or explanations in the course of accountability proceedings.

Art. 92. 1. Should a witness, expert or specialist provide no excuse for non-appearance at a hearing despite being summoned by Prosecutor, or groundlessly refuse to provide testimony, Prosecutor or disciplinary tribunal can request the locally competent district court to:

1) impose a fine for an unexcused non-appearance or refusal to provide testimony;
2) order a compulsory appearance of a witness, expert or specialist.

2. Should one fail to provide an advance notice cautioning against implications of a non-appearance or refusal to provide testimony, a witness, expert or specialist shall not be subject to penalty specified in sec. 1 pt. 1.

3. Should a witness, expert or specialist be not able to appear due to an insurmountable cause, disciplinary tribunal shall order their testimony to be obtained by a member of the panel of judges. The parties shall be entitled to take part in this procedure.

Art. 93. 1. The accused party cannot be held accountable until a misconduct/malpractice is proven and sealed by a final ruling issued by disciplinary tribunal.

2. Any doubts that could not be satisfactorily settled in the course of accountability proceedings shall be considered as speaking in favour of the accused.

3. The bodies conducting accountability proceedings shall weigh the entirety of presented evidence while being guided by the rules of reason, their knowledge, and life experience.

Art. 94. 1. Accountability proceedings shall not be opened if:

1) no act was perpetrated or the evidence collected to build the case is not sufficient;
2) the act does not constitute a misconduct/malpractice or statutory provisions provide that the perpetrator did not commit a misconduct/malpractice;
3) the accused party died;
4) the act is no longer considered culpable;
5) accountability proceedings with respect to the same accused party and the same act were either concluded with a final ruling or have been already opened;
6) the act caused minor harm to the public.

2. Accountability proceedings shall be discontinued on the grounds specified in sec. 1.
3. In the event of the accused party dying prior to conclusion of accountability proceedings, such accountability proceedings shall be nevertheless continued following a request submitted within 2 months after the date of death by their spouse, descendant, ascendant, siblings, person in the same line and degree of affinity, adopted person and their spouse, as well as person with whom the deceased heretofore remained in a relation of cohabitation.

Art. 95. 1. Accountability proceedings shall not be opened in the event of the act being committed more then 3 years ago.

2. The lapse period shall be interrupted each time Prosecutor decides to pursue any action in relation to the act committed by a physiotherapist.

3. Punishability of a misconduct/malpractice expires after 5 years.

4. Should the act specified in sec. 1 be also a crime, punishability of such misconduct/malpractice shall expire no sooner than punishability of the crime.

Art. 96. 1. Immediately after learning about the likelihood of a misconduct/malpractice Prosecutor issues a ruling which either opens or refuses to open investigative proceedings. The ruling is delivered to both parties.

2. Should one deem it necessary, one shall be able to either pursue a further inquiry into the likelihood specified in sec. 1 or subject facts of the matter to closer scrutiny. Should one decide to pursue such course of action, the ruling which opens or refuses to open investigative proceedings shall be issued within a month after Prosecutor learned about the likelihood of a misconduct/malpractice.

3. The aggrieved party can appeal the refusal to open investigative proceedings.

4. The parties can appeal discontinuation of investigative proceedings.

5. Persons granted the right of appeal shall be able to access files of the investigation.

6. The appeal is lodged with Disciplinary Tribunal through Prosecutor within 14 days after the date a copy of the ruling was received by the appealing party.

7. The appeal lodged with Disciplinary Tribunal is heard by a three-judge panel.

8. While overruling discontinuation of or refusal to open investigative proceedings, Disciplinary Tribunal shall provides the parties with the reasoning supporting its decision and, should one deem it necessary, identify circumstances to be clarified or activities to be undertaken. Prosecutor shall be accordingly bound by these instructions.

Art. 97. Prosecutor shall investigate the matter in an exhaustive manner. In order to fulfil this obligation, Prosecutor shall obtain testimonies from the aggrieved party and the summoned witnesses, experts and specialists, as well as present other evidence. In urgent cases and prior to bringing charges, most notably when it would lead to the loss of traces or evidence of a misconduct/malpractice, Prosecutor shall be allowed to obtain
testimony from the physiotherapist as if they were the accused party, provided there are prior grounds for bringing charges.

Art. 98. 1. Prosecutor shall bring charges against a physiotherapist should the evidence accumulated in the course of investigative proceedings suggest the occurrence of a misconduct/malpractice.

Art. 99. 1. Should the evidence accumulated in the course of investigative proceedings do not provide grounds for seeking penalty, Prosecutor shall issue a ruling to discontinue investigative proceedings without first providing the accused party with investigation materials nor issuing a ruling to close the proceedings.

2. The ruling on discontinuation of investigative proceedings shall include a reasoning that supports the ruling.

3. Should discontinuation occur once the charges have been already brought, the ruling on discontinuation shall include also the first name and the last name of the accused party as well as the description of the alleged act.

Art. 100. 1. Should there be grounds for seeking penalty, Prosecutor shall notify the accused party or their defence counsels about their right to review the investigation files while specifying the deadline for it to be done.

2. Within 14 days after reviewing the investigation materials the accused party can issue a request to have new material considered in the course of the investigation.

3. The deadline shall be determined in such a way as to ensure that after receiving the deadline notification the accused party or their defence counsels have at least 14 days to review investigation materials.

4. Unexcused non-appearance of the accused party or their defence counsel shall not impede the course of the proceedings.

5. Prosecutor shall close investigative proceedings should there be no need to have new material considered in the course of investigation.

6. Within 14 days after closure of investigative proceedings, Prosecutor shall request Disciplinary Tribunal to impose a penalty.

Art. 101. 1. Investigative proceedings conducted by Prosecutor shall be concluded within 6 months after Prosecutor learned about the likelihood of misconduct/malpractice specified in art. 96 sec. 1.

2. Should one deem it necessary, Disciplinary Tribunal shall be allowed to prolong investigative proceedings for a definite period of time lasting no longer than 6 months.

3. Should one fail to close investigative proceedings within 12 months, files of the case shall be handed over to Higher Disciplinary Tribunal which shall be allowed to prolong such proceedings for indefinite time. The ruling of on prolongation is issued by a three-judge panel.
Art. 102. 1. Should the evidence collected during investigative proceedings or presented before disciplinary tribunal make a compelling case that the accused party committed a misconduct/malpractice, and the nature of such misconduct/malpractice suggests that continued practice of the accused party compromises safety of patients or may lead to commitment of further misconduct/malpractice, disciplinary tribunal shall be allowed to impose a temporary suspension of licence lasting no more than 12 months.

2. Temporary suspension of licence is issued by disciplinary tribunal ex officio or when requested by Prosecutor.

3. President shall be immediately notified by disciplinary tribunal about such temporary suspension of licence.

4. Should temporary suspension of licence expire prior to final ruling being issued by disciplinary tribunal, said tribunal shall exercise its ex officio right to probe whether there are grounds to uphold temporary suspension of licence further into the future.

5. Within 14 days after it has been received, the accused party can appeal the ruling specified in sec. 1. The appeal shall be lodged with Higher Disciplinary Tribunal through Disciplinary Tribunal. Immediate enforceability of the ruling shall not be halted by the appeal.

6. The appeal lodged with Higher Disciplinary Tribunal is heard by a three-judge panel.

Art. 103. 1. Accountability cases are heard by Disciplinary Tribunal and Higher Disciplinary Tribunal.

2. Disciplinary Tribunal hears cases as a court of first instance.

Art. 104. 1. Accountability proceedings are heard during an open session.

2. Disciplinary tribunal shall hear cases in a closed session where an open session may:

1) compromise professional secrecy;
2) cause disturbance of peace or order;
3) offend morals;
4) reveal circumstances that should remain in secrecy for reasons vital to state interest;
5) cause infringement of vital private interest.

3. Disciplinary tribunal shall hear cases in a closed session also following a request of the aggrieved party.

Art. 105. 1. Cases before Disciplinary Tribunal are heard by a three-judge panel.
2. Cases before Higher Disciplinary Tribunal are heard by a five-judge panel unless this Act provides otherwise.

3. The panel of judges in a disciplinary tribunal can be joined by another judge of the tribunal who shall act as a reserve judge without the right to vote.

Art. 106. Judges in disciplinary tribunals shall be bound by and follow generally applicable laws.

Art. 107. 1. Disciplinary tribunal shall discontinue the proceedings in the event of:

1) circumstances specified in art. 94 sec. 1 pt. 3-6 occurring in the course of proceedings;
2) the accused party committing a misconduct/malpractice while in the state of insanity.

2. The accused party is acquitted by disciplinary tribunal in the event of circumstances specified in art. 94 sec. 1 pt. 1 and 2.

Art. 108. 1. Disciplinary tribunal can impose the following penalties:

1) admonition;
2) serious reprimand;
3) fine;
4) ban from managerial positions in health care entities in the period of 1 to 5 years;
5) ban from electable positions in the governing organisation in the period of 1 to 5 years;
6) restriction of the scope of practice in the period of 6 months to 2 years;
7) suspension of licence in the period of 1 to 5 years;
8) removal of licence.

2. While imposing penalties specified in sec. 1 pt. 6 or 7, disciplinary tribunal can additionally impose a penalty specified in sec. 1 pt. 4.

Art. 109. 1. While imposing penalties specified in art. 108 sec. 1 pt. 4-8, disciplinary tribunal can order the ruling to be published.

2. With respect to citizens of member states of the European Union engaging in temporary or occasional practice in the Republic of Poland, disciplinary tribunal shall impose penalties specified in art. 108 sec. 1 pt. 1-3.

Art. 110. 1. The fine ranging from PLN 1,000 to PLN 10,000 shall be donated to a health protection cause.
2. The fine is imposed as a standalone measure or additional measure to other penalties specified in art. 108 sec. 1 pt. 4-7.

**Art. 111.** While imposing restrictions on the scope of practice, disciplinary tribunal shall provide a detailed list of activities a physiotherapist is not allowed to undertake.

**Art. 112.**
1. Suspension of licence is determined in months and years.
2. The duration of imposed penalty starts running from the date the relevant ruling takes effect.
3. The duration of temporary suspension of licence shall be included in the total duration of suspension of licence.
4. Removal of licence shall result in a removal from the National Register of Physiotherapists.
5. A physiotherapist whose licence was removed shall be allowed to re-apply for a licence no sooner than 10 years after the relevant ruling took effect.

**Art. 113.**
1. Disciplinary tribunal announces its rulings in an open session.
2. Following the announcement, chair presiding over the panel of judges provides a verbal summary of the ruling followed by discussion of its key arguments.
3. In the event of circumstances specified in art. 104 sec. 2, chair presiding over the panel of judges can order that key arguments of the ruling be discussed in a closed session.

**Art. 114.**
1. The ruling of disciplinary tribunal contains:
   1) name of disciplinary tribunal issuing the ruling, names of judges, Prosecutor, and court reporter;
   2) date and location of the hearing and ruling;
   3) first name, last name, and licence number of the accused party;
   4) description and legal classification of the alleged act;
   5) ruling with respect to the subject matter under consideration;
   6) decision with respect to the costs of proceedings;
   7) ruling with respect to the penalty, and, should one deem it necessary – with respect to the duration of temporary suspension of licence, if disciplinary tribunal issued a ruling of conviction.

2. Reasons for ruling shall contain:
1) conclusion which facts of the case were deemed proven and which were not, based on what evidence, and why not the evidence to the contrary;

2) legal basis of the claim;

3) circumstances taken under consideration by disciplinary tribunal while imposing a penalty.

3. Within 30 days after the announcement and subject to art. 119, sec. 2, the ruling issued by Disciplinary Tribunal shall be delivered to parties along with the reasons for ruling put down in writing.

**Art. 115.** 1. Should disciplinary tribunal decide to impose a penalty, the costs of proceedings shall be settled by the accused party unless disciplinary tribunal rules otherwise.

2. Should disciplinary tribunal decide to acquit the accused party or discontinue the proceedings, the costs of proceedings shall be settled by PChP.

3. Within 14 days after it has been received, the decision with respect to the costs of proceedings can be appealed by the accused party.

4. The appeal is lodged with disciplinary tribunal which issued the decision in question.

**Art. 116.** 1. Within 14 days after it has been delivered, the ruling issued by Disciplinary Tribunal can be appealed by the parties to Higher Disciplinary Tribunal.

2. The appeal specified in sec. 1. is lodged through Disciplinary Tribunal.

3. Should the appealing party withdraw appeal before the appeal was heard, Higher Disciplinary Tribunal shall dismiss the appeal unless there are circumstances provided in art. 439 § 1 pt. 1, 2, and 5-10 of Penal Procedure Act, dated 6 June 1997 (Journal of Laws No 89, item 555, with subsequent changes\(^\text{13}\)).

**Art. 117.** 1. The appeal challenging guilt is considered to be an appeal against the entire ruling.

2. The appeal challenging the penalty is considered to be an appeal against the part of the ruling where it concerns the penalty.

**Art. 118.** Higher Disciplinary Tribunal upholds, overrules, or changes the ruling issued by Disciplinary Tribunal.

**Art. 119.** 1. Higher Disciplinary Tribunal concludes accountability proceedings with a final ruling that takes immediate effect.

2. The ruling issued by Higher Disciplinary Tribunal along with reasons for ruling put down in writing shall be delivered to the parties within 2 months after its announcement.

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Art. 120. 1. Within 2 months after it has been delivered to the parties, the final ruling concluding accountability proceedings issued by Higher Disciplinary Tribunal can be appealed to the Supreme Court by the parties, minister with health care portfolio, and President. The parties, minister with health care portfolio, and President lodge the appeal to the Supreme Court through Higher Disciplinary Tribunal.

2. The appeal to the Supreme Court can be lodged on the grounds of violation specified in art. 439 § 1 of Penal Procedure Act, dated 6 June 1997, or any other gross breach of laws and regulations. The appeal can be also lodged on the grounds of disproportionate penalty.

3. The appeal to the Supreme Court with respect to the particular accused and the particular ruling can be lodged by the eligible parties only once.

4. One shall not be able to lodge an appeal to the Supreme Court against the accused if the ruling has been final for more than 6 months.

5. The appealing party shall be required to describe the violation pleaded in the appeal to the Supreme Court.

6. The appeal to the Supreme Court shall be prepared and signed by a lawyer acting as a defence counsel or a proxy.

Art. 121. Accountability proceedings concluded by a final ruling issued by disciplinary tribunal shall be reopened in the event of:

1) crime committed in relation to the proceedings, should there be reasons to believe that it could have affected the ruling it its substance;

2) previously unknown facts and evidence discovered following conclusion of the

   a) the accused party did not commit the act, or the act did not constitute a misconduct/malpractice, or the act was not subject to penalty,

   b) tribunal discontinued the proceedings mistakenly assuming that the accused party committed the alleged act.

Art. 122. Accountability proceedings concluded by a final ruling issued by disciplinary tribunal can be reopened in the event of overruling or substantial change of the ruling which discontinued the proceedings on the grounds of art. 107 sec. 1.

Art. 123. The act specified in art. 121 pt. 1 must be established in a final judgment of conviction unless such judgment could not have been issued for reasons specified in art. 17 § 1 pt. 3-11, or art. 22 of Penal Procedure Act, dated 6 June 1997.

Art. 124. 1. The proceedings can be reopened following a request of the party or ex officio.

2. In the event of death of the accused party, a request to reopen the proceedings for the benefit of the accused party can be submitted by a person specified in art. 89 sec. 3.
3. The proceedings can be reopened ex officio exclusively on the grounds of a violation specified in art. 439 § 1 of Penal Procedure Act.

4. The proceedings shall not be reopened on the grounds of sec. 3 if they are already pleaded in the appeal to the Supreme Court.

5. The proceedings cannot be reopened against the accused party ex officio if the ruling has been final for more than 6 months.

**Art. 125.** 1. The ruling to reopen the proceedings is issued by a panel of judges that is different than the panel of judges that issued the final ruling concluding accountability proceedings.

2. Disciplinary tribunal considers whether to reopen the proceedings in a session closed to the parties unless tribunal president or tribunal decides otherwise.

**Art. 126.** A request to reopen the proceedings shall be prepared and signed by a lawyer. The request shall be submitted with the appropriate number of copies for the parties to the proceedings.

**Art. 127.** 1. Should disciplinary tribunal decide not to reopen the proceedings or not to hear the request, one shall be able to appeal said decision to Higher Disciplinary Tribunal within 14 days after delivery of such decision, with a reservation that Higher Disciplinary Tribunal shall appoint a different panel of judges to hear the appeal in question.

2. While ruling to reopen the proceedings, Disciplinary Tribunal overrules the appealed ruling and appoints a different panel of judges to reconsider the matter, whereas Higher Disciplinary Tribunal Disciplinary overrules the appealed ruling and refers the matter to Disciplinary Tribunal for reconsideration. There shall be no appeal against the ruling to reopen the proceedings.

3. While overruling the appealed ruling, Higher Disciplinary Tribunal can either discontinue the proceedings or acquit the accused party if new facts and evidence suggest that the ruling could have adversely affected the principle of fairness.

**Art. 128.** 1. Should the physiotherapist be acquitted following the reopening of the accountability proceedings or following the appeal to the Supreme Court, they shall be able to claim compensation for damages and grievances suffered in the course of partial or complete enforcement of penalty that was converted or cancelled as a result of the reopening of the proceedings or the appeal to the Supreme Court.

2. The claims specified in sec. 1 shall be brought against PChP.

3. The claims specified in sec. 1 shall be brought before common courts.

4. The limitation period for the claims specified in sec. 1 shall expire after one year after the ruling resulting from the reopened proceedings or appeal to the Supreme Court becomes final.
Art. 129. The final ruling issued by disciplinary tribunal as well as reasons for ruling shall be delivered to the parties, the minister with health care portfolio, and President.

Art. 130. The final ruling imposing penalties specified art. 108 sec. 1 pt. 7 and 8 shall serve as grounds for culpable termination of the employment contract without notice, or dissolution of the civil law contract.

Art. 131. Following a request of the accused party, the final ruling of acquittal issued in accountability proceedings shall be published.

Art. 132. 1. The Polish Council of Physiotherapists keeps a registry of penalised physiotherapists. The registry shall be open to persons who are able to demonstrate their proper legal standing.

2. The entry in the registry shall contain:
   1) ordinal number;
   2) date of entry;
   3) first names and last name;
   4) date and place of birth;
   5) first name of the father;
   6) first name of the mother;
   7) licence number;
   8) number in the National Registry of Physiotherapists;
   9) ruling number;
   10) date of the ruling;
   11) tribunal name;
   12) the penalty imposed;
   13) date the ruling takes effect;
   14) date the penalty was enforced;
   15) date the penalty becomes expunged;
   16) notes on the rulings issued on the basis of art. 102.
Art. 133. 1. A penalty is expunged ex officio:

1) one year after the final ruling imposing a penalty specified in art. 108 sec. 1 pt. 1 took effect;
2) 3 years after the final ruling imposing a penalty specified in art. 108 sec. 1 pt. 2 took effect;
3) 3 years after penalties specified in art. 108 sec. 1 pt. 3-6 were enforced;
4) 5 years after penalties specified in art. 108 sec. 1 pt. 7 were enforced;
5) 15 years year after the final ruling imposing a penalty specified in art. 108 sec. 1 pt. 8 took effect
- if in the course of that time a physiotherapist was not subject to another penalty or accountability proceedings.

2. A penalty is expunged by removal of a penalty entry from the registry of penalised physiotherapists.

Art. 134. Following consultation with the Minister of Justice, and having received an opinion from the Polish Council of Physiotherapists, the minister with health care portfolio shall introduce a regulation determining:

1) rules and procedures governing the registry of penalised physiotherapists,
2) rules and procedures for enforcement of final rulings issued by disciplinary tribunals
- guided by the nature and complexity of accountability proceedings as well as the need to preserve the rights of the participating parties.

Art. 135. Matters relating to accountability proceedings which are not regulated in this Act shall be accordingly governed by:

1) Penal Procedure Act, dated 6 June 1997, with the exclusion of provisions governing private prosecution, civil society representative, preliminary proceedings, and means of coercion, except when they relate to fine;

Chapter 8

Penal Provisions

Art. 136. Whoever provides services in physiotherapy without a licence shall be liable to a fine.

Art. 137. Should the perpetrator of an act specified in art. 136 seek material profit, they shall be liable to a fine or be subject to restriction of liberty.
Art. 138. Whoever uses the title of physiotherapist without a licence shall be liable to a fine.

Art. 139. Whoever allows a person to provide services in physiotherapy without a licence shall be liable to a fine or be subject to restriction of liberty.

Art. 140. The proceedings with respect to acts specified in art. 138 and art. 139 shall be governed by provisions of Misdemeanour Procedure Act, dated 24 August 2001 (Journal of Laws 2013, item 395, with subsequent changes).

Chapter 9

Binding, Transitional, and Final Provisions

Art. 141. Publicly Funded Health Care Services Act, dated 27 August 2004 (Journal of Laws 2015, item 581, with subsequent changes), is amended in the following way:

1) art. 40 shall be followed by art. 40a phrased:

“Art. 40a. Medical devices shall be available to service users through an order issued by physiotherapists specified in provisions governing the profession of physiotherapy and pursuant to the rules specified in Reimbursement Act.”;

2) art. 100 sec. 9 is rephrased as follows:

“9. President chairing National Health Fund Council invites to its meetings observer representatives of: Supreme Medical Council, Supreme Council of Nurses and Midwives, Supreme Pharmaceutical Council, National Laboratory Diagnosticians Council, and Polish Council of Physiotherapists.”;

3) art. 106 sec. 4 is rephrased as follows:

“4. President chairing provincial council of the Fund invites to its meetings observer representatives of district medical council, district council of nurses and midwives, district pharmaceutical council, the National Laboratory Diagnosticians Council, and Polish Council of Physiotherapists.”;

Art. 142. Art 3. sec. 3 of Health Protection Information System Act, dated 28 April 2011 (Journal of Laws 2015, item 636, with subsequent changes), is amended in the following way:

1) pt. 4 shall be followed by pt. 4a phrased:

“4a) Data collected in the National Registry of Physiotherapists and registry of persons licenced for temporary or occasional practice in the Republic of Poland are processed by the Polish Council of Physiotherapists pursuant
to provisions of Act on the Profession of Physiotherapy, dated 25 September 2015 (Journal of Laws item 1994);”;

2) pt. 9 is rephrased as follows:

“9) Centre of Postgraduate Medical Education, pursuant to provisions governing the profession of physicist and dentist, profession of physiotherapy, profession of nurse and midwife, laboratory diagnostics, State Emergency Medical Services and provisions of Pharmaceutics Act, with respect to data specified in these provisions;”.

**Art. 143.** 1. A person that jointly meets the requirements specified in art. 13 sec. 1 pt. 1-5 shall be considered a properly licenced physiotherapist within the meaning of this Act.

2. Persons specified in sec. 1 are entered to the National Registry of Physiotherapists following a request submitted within 2 years that follow after this Act taking effect.

3. Persons specified in sec. 1 shall have their physiotherapy licence removed unless they apply for an entry in the registry of health care entities within 30 months that follow after this Act taking effect.

4. Persons specified in sec. 1 shall be allowed to practise physiotherapy without an entry in the National Registry of Physiotherapists for no longer than 2 years that follow after this Act taking effect.

**Art. 144.** 1. Units holding licence for delivery of speciality training at the time of this Act taking effect shall be allowed to deliver speciality training to persons who started their speciality training under previously existing provisions.

2. The list of units holding licence for delivery of speciality training shall be kept as prescribed by previously existing provisions up until complete delivery of speciality training specified in sec. 1.

3. Members of expert teams assessing the credentials of units licenced for delivery of speciality training heretofore operating under previously existing provisions shall become members of expert teams specified in art. 36 sec. 8 as soon as this Act takes effect.

4. Speciality programmes in physiotherapy issued under previously existing provisions shall remain valid until replaced by new speciality programmes.

5. Members of expert teams preparing speciality programmes heretofore operating under previously existing provisions shall become members of expert teams specified in art. 36 sec. 3 as soon as this Act takes effect.

**Art. 145.** 1. Physiotherapists who started their speciality training under previously existing programmes shall be allowed to complete their speciality training in keeping with these programmes.

2. The registry of physiotherapists undergoing speciality training kept under previously existing provisions shall become a registry specified in art. 43 of this Act. Data
from the registry kept under previously existing provisions shall be handed over by the competent governors to CPME within 30 days that follow after this Act taking effect.

3. Until provisions issued on the basis of art. 60 pt. 3 take effect, diplomas specified in art. 58 sec. 1 can be issued using a previously approved template.

Art. 146. Persons who previously obtained 1st degree speciality shall be able to upgrade their qualifications by completing a complementary speciality programme and obtaining the title of specialist in accordance with the procedures laid down in this Act.

Art. 147. A person previously entrusted with the responsibilities of specialist in physiotherapy following a decision granted by the minister with health care portfolio pursuant to provisions issued on the basis of art. 10 sec. 5 of Health Care Institutions Act, dated 30 August 1991, shall be allowed to:

1) be appointed to expert teams specified in art. 36 sec. 8;
2) work as speciality supervisors in a given health protection field;
3) be appointed to audit teams specified in art. 37 sec. 4;
4) be appointed to expert teams specified in art. 38 sec. 3;
5) take the SPSE.

Art. 148. 1. The incumbent SEC Chairperson and SEC members appointed to conduct an exam specified in provisions issued pursuant to art. 10 sec. 5 of Health Care Institutions Act, dated 30 August 1991, (hereafter referred to as the “SSE”), shall become respectively SEC Chairperson and SEC members specified in this Act.

2. The previously prepared SSE tests, questions, and problems are considered to have been prepared under the rules prescribed by this Act and shall be shared under the rules prescribed by this Act.

3. The existing SSE statute shall remain in force until a new SPSE statute is put in its place.

4. Directives laying down the rules for the organisation and proceedings of the SSE that were previously introduced by the director of CME shall remain in force until new directives are put in their place.

Art. 149. A person entrusted with the responsibilities of specialist in physiotherapy following a decision granted by the minister with health care portfolio pursuant to provisions issued on the basis of art. 10 sec. 5 of the Health Care Institutions Act, dated 30 August 1991, who previously did not take the SSE or took the SSE and did not secure a positive outcome in its part or its entirety shall be allowed to take the SPSE as prescribed by art. 49 of this Act.

Art. 150. The incumbent SEC Chairperson and SEC members appointed to conduct the SSE shall become, respectively, SEC Chairperson and SEC members specified in art. 51 of this Act.
Art. 151. The SPSE specified in this Act can be taken both by a physiotherapist who started their speciality training under previously existing provisions, but did not have its completion confirmed by the governor specified in art. 49 sec. 12 pt. 1 of this Act, and by a physiotherapist who completed their speciality training and was not accepted for the SSE.

Art. 152. Provisions of art. 49 sec. 5-9, 16 and 17 of this Act shall accordingly apply to physiotherapists who were previously accepted for the SSE but did not take the SSE, or took the SSE and did not secure a positive outcome in its part or its entirety.

Art. 153. 1. The minister with health care portfolio shall appoint Founding Committee for Governing Organisation of Physiotherapists (hereafter referred to as the “Committee”).

2. The Committee shall be composed of representatives appointed by the competent bodies of national physiotherapy associations active for at least 3 years preceding this Act coming into force.

3. The Committee shall:

1) process registry requests and make entries in the National Registry of Physiotherapists;

2) organise and convene initial provincial assemblies, and, in the event of circumstances specified in art. 74 sec. 3, divide provinces into districts and organise and convene initial district meetings of provincial assemblies;

3) draft rules and procedures governing elections of delegates attending the initial General Meeting, and prepare bylaws for the initial General Meeting;

4. Provincial assemblies and district meetings of provincial assemblies are convened no later than 6 months that follow after this Act taking effect.

5. The assemblies and meetings specified in sec. 4 shall be attended by physiotherapists who have been registered with the National Registry of Physiotherapists for at least 7 days before a provincial assembly or a district meeting of provincial assembly is scheduled to take place.

6. The Committee shall receive organisational support from the office of the minister with health care portfolio.

7. The activities of the Committee shall be supported from budgetary resources remaining in disposal of the minister with health care portfolio.

8. The Committee shall be dissolved on the date specified in art. 154 sec. 2.

Art. 154. 1. The minister with health care portfolio shall convene the initial General Meeting within 60 days that follow after conclusion of the last provincial assembly or district meeting of provincial assembly.

2. As soon as the initial General Meeting becomes properly convened, the bodies of the governing organisation assume their statutory competences granted under this Act.
Art. 155. Regulations issued pursuant to art. 38 sec. 4 of Act on Drug Reimbursement, Foodstuffs Intended for Particular Nutritional Uses and Medical Devices, dated 12 May 2011, shall remain in force until superseded by new regulations issued pursuant to said pursuant to art. 38 sec. 4, but in any case no longer than 12 months that follow after this Act taking effect.

Art. 156. This Act enters into force 6 months after promulgation.

President of the Republic of Poland: A. Duda