

EDITORIAL

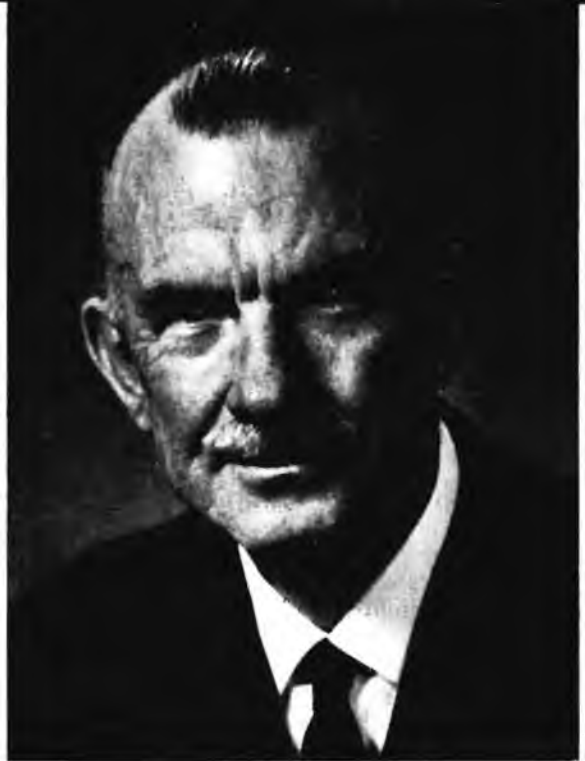
NEW CHALLENGES AND RESPONSIBILITIES

This subheading of an article "Physiotherapists as first-contact Practitioners" by Prue Galley (*Physiotherapy* 1977, 63, 246) reflects the spirit with which a revised code of ethics has been adopted by the Australian Physiotherapy Association. In all but one State, Australian physiotherapists may now accept patients on their own initiative or refer them to medical practitioners where indicated. A new referral system will evolve from this. Many physiotherapists will take some time to accept a new concept of ethics and some may wish not to accept the challenge and responsibility. It was felt that a well established tradition of service to the community and expertise in clinical assessment and diagnosis warrants this move. It will also foster closer contact with the public and be of particular value in community work, especially preventive and rehabilitative fields.

It places greater responsibility on the profession to be aware of legal and ethical responsibilities and to act in the best interest of the patient. Continuing education and awareness of competence and limitations will surely allow these physiotherapists to diagnose and treat patients within self-imposed constraints.

Physiotherapists have always had to accept responsibility for treatment and negligence. The greater freedom implicit in being first-contact practitioners, also implies greater responsibility and a very real challenge for our Australian colleagues. New attitudes and a new philosophy will have to be nurtured and accepted. Greater self confidence, self-evaluation and self-discipline will be essential and these will have to be established at the grass-roots. It will seem that the greatest responsibility will rest with those training future physiotherapists in Australia, ensuring that all the attributes necessary to deal with the new challenges and responsibilities are well established in students before entering the profession.

This is only the beginning of a new era. In this country both our code of ethics and legislation do not allow physiotherapists to practise as first-contact practitioners as yet. And the implications for example as regards membership of the World Confederation of Physical Therapy, reciprocity etc. are concerned, have not been assessed. The world of physiotherapy will keep a close watch on developments in Australia in order to assess the validity and success of such a courageous and far reaching step.



RETIREMENT — PROF. BROMILOW-DOWNING

It will be the end of an era when Professor Bromilow-Downing retires as Dean of the University of Cape Town's Faculty of Medicine. During his 20 years in this capacity he kept a fatherly eye on the establishment and growth of the Department of Physiotherapy, and took a personal interest in staff and students alike. His service to the profession was not limited to U.C.T. only; in his capacity as Chairman of the Supplementary Health Professions Committee of the S.A.M.D.C. his guidance and advice were invaluable, and he played a leading role in establishing Professional Boards for the Supplementary Health Professions. The Professional Board for Physiotherapy was the first to be established in 1973, and he was a founder member. From 1968 to 1975 he was President of the South African Society of Physiotherapy and often represented the Society in this capacity. At the 11th National Council Meeting held in Johannesburg immediately after the Jubilee Congress, he was unanimously elected Honorary Life President of the S.A.S.P. We all wish Brom and Nan a long and happy retirement and successful rose growing.

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