

Information Package for Endorsement for Scheduled Medicines

Introduction

This Information Package has been developed by the Podiatry Board of Australia (the Board) to support applications for endorsement of registration for scheduled medicines. The Board's *Endorsement for scheduled medicines registration standard* and *Guidelines for Endorsement for Scheduled Medicines* must be read in conjunction with this document.

An applicant for an endorsement for scheduled medicines is responsible for ensuring the Information Package is known to each health practitioner who is involved with the application for endorsement process, including those asked to write references, offer clinical experience and who undertake the role of Supervisor.

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Who can apply?

A podiatrist may apply for endorsement of his or her registration for scheduled medicines. An applicant must be able to demonstrate to the Board that he or she has the qualifications and clinical experience to be able to administer and prescribe scheduled medicines from the *List of Scheduled Medicines Approved by the Podiatry Board of Australia* (the National Podiatry Scheduled Medicines List).

Podiatrists with **general registration** who have successfully completed either Pathway 1 or Pathway 2 can apply for an endorsement for scheduled medicines.

An applicant after successfully completing an entry-level program of study may seek an endorsement for scheduled medicines after the successful application for general registration. An applicant will require evidence of successful completion of Pathway 2.

Podiatric surgeons who are seeking endorsement for scheduled medicines need to successfully meet the requirements of either Pathway 1 or Pathway 2.

Overseas qualified podiatrists who are seeking endorsement for scheduled medicines need to demonstrate equivalency of standards in education and/or training or have completed a course of study approved by the Board. These podiatrists will be expected to have completed education and training procedures equivalent to current Australian standards. Alternatively, the overseas qualified podiatrist needs to choose and successfully meet the requirements of either Pathway 1 or Pathway 2.

Pathways for Endorsement for Scheduled Medicines

The requirements for endorsement for scheduled medicines are set out in the Board's *Endorsement for scheduled medicines registration standard* with further explanation in the *Guidelines for Endorsement for Scheduled Medicines*.

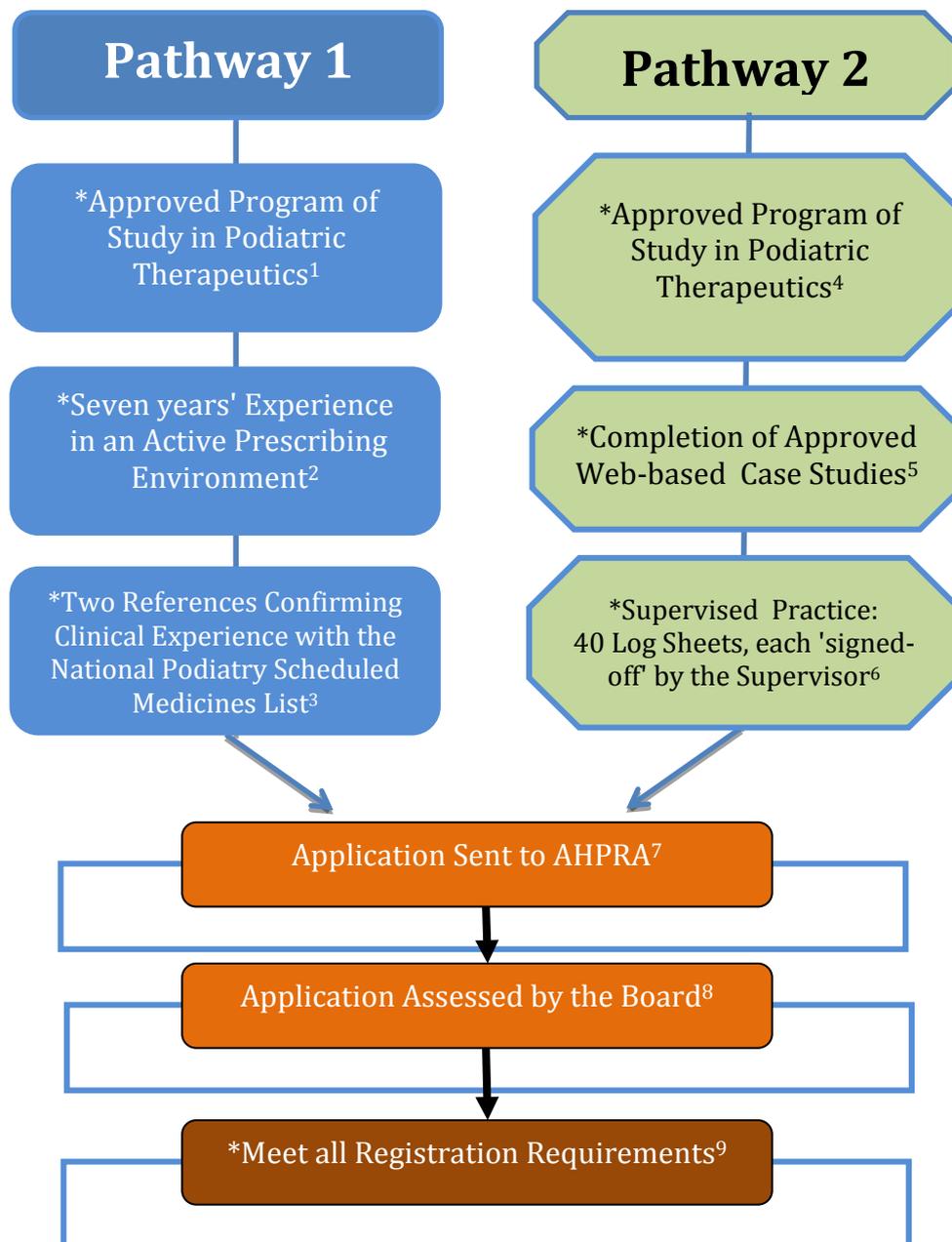
An applicant for a scheduled medicine endorsement must follow one of two pathways. The flow chart describes the pathways.

Flow Chart 1:

*For explanatory details, you must see the Guidelines for Endorsement for Scheduled Medicines and the Information Package

Pathways to Endorsement for Scheduled Medicines

An applicant for endorsement must follow either Pathway 1 or Pathway 2 as illustrated below



Discussion Notes Relating to the Flow Chart

Pathway 1

1) Approved Program of Study in Podiatric Therapeutics

The qualification in podiatric therapeutics in the context of scheduled medicines endorsement is an approved program of study in the use of scheduled medicines that:

- transitioned on commencement day of the National Law as an 'approved program of study in podiatric therapeutics', or
- has been accredited for this purpose by the Australia and New Zealand Podiatry Accreditation Council (ANZPAC) and approved by the Board; or
- in the Board's opinion, the qualification was substantially equivalent to, or based on similar competencies to, an approved qualification.

Successful completion of an approved program of study in podiatric therapeutics is essential for all applicants seeking an endorsement for scheduled medicines. Additional qualifications in podiatric therapeutics will be added to the following list when an assessment of the program of study has been completed. An applicant whose podiatric therapeutic qualifications are not listed here may contact the Board for advice.

Podiatrists who successfully completed the following courses in the years indicated have been deemed to have met the qualification in podiatric therapeutics approved by the Board as an 'approved program of study in podiatric therapeutics'.

I. La Trobe University

Bachelor of Podiatry completed in 2003 or later
Graduate Diploma in Podiatry (Pharmacology Units)
Honours degree in Podiatry (Pharmacology Units)

Pharmacology Units

Certificate of successful completion of pharmacology units (as single subjects) equivalent to those offered in the Bachelor of Podiatry course at La Trobe University in 2000 or later

II. Charles Sturt University

Bachelor of Health Science (Podiatry) completed in 2004 or later

III. University of South Australia

Bachelor of Podiatry completed in 2012 or later
Certificate of successful completion of graduate course in Advanced Pharmacology for Podiatrists dated 2006 or later

IV. Queensland University of Technology

Bachelor of Health Science (Podiatry) completed in 2013 or later

V. Curtin University

Masters of Podiatry

2) Seven years' Experience in an Active Prescribing Environment

Clinical experience of seven (7) years, post-qualification as a podiatrist, in an appropriate setting where active prescribing is occurring, is required for this pathway.

The seven (7) years of clinical experience is defined as the equivalent to working seven years full time i.e. working 38 hours/week, 48 weeks/year, for seven years. The applicant has to provide sufficient detail in the reference report or provide additional information to validate the seven-year experience requirement.

The clinical setting of active prescribing refers to the podiatrist being involved in clinical decision making and participating in determining pharmacological management of patients with podiatric conditions. Specific clinical information is required from two clinical referees.

Applicants are advised to undertake Pathway 2 if unable to meet this requirement.

3) Two References Confirming Clinical Experience with the National Podiatry Scheduled Medicines List

A reference is required from each of two clinicians confirming the podiatrist has completed this clinical experience and has had adequate experience in observing and participating in the administration and prescription of a variety of classes of restricted medicines for various foot related conditions.

The clinicians providing the reference must be medical practitioners or podiatrists with an endorsement for scheduled medicines.

The Board has produced a guide to assist clinicians to provide the information required in the reference. This guide, *Guide for a Clinician making a Reference about an Applicant's Clinical Experience*, is included in the Appendix of this Information Package. The Board must receive the confirmatory references which include the details requested in the guide from both clinicians for the application of endorsement to be considered.

Pathway 2

4) Approved Program of Study in Podiatric Therapeutics

The information regarding the qualification in podiatric therapeutics approved by the Board is provided at point one in Pathway 1. All applications for endorsement for scheduled medicines are required to have successfully completed an approved qualification as listed at point one.

5) Completion of the Approved Web-based Case Studies

The Board has determined that 20 hours of Board approved web-based case studies as stated in the *Endorsement for scheduled medicines registration standard* equate to 15 Board approved web-based case studies. Providers of Board-approved web-based case studies are found in the Appendix of this Information Package.

Evidence of the successful completion of the web-based case studies is required for the application of the endorsement to be considered by the Board. Evidence will be a certificate provided by the education facility stating that an applicant has successfully completed the 15 Board approved web-based case studies.

6) Supervised Practice: 40 Log Sheets, each 'signed-off' by the Supervisor

The applicant must complete **supervised practice** (supervision by a medical practitioner or a registered podiatrist with an endorsement for scheduled medicines) in an appropriate setting and where active prescribing is occurring within a 12 month period.

The Board has decided that a podiatrist with an endorsement for scheduled medicines cannot be a supervisor if they have a condition on their endorsement, as the condition may limit their access to the full range of required medications and scope of practice, for example prescribing. This policy comes into effect on 1 October 2011 and from that date a podiatrist following Pathway 2 towards eligibility for an endorsement for schedule medicines must not enter into a supervisory agreement with a podiatrist whose endorsement is subject to a condition.

If a podiatrist following Pathway 2 has a supervisory agreement in place before 1 October 2011 with a registered podiatrist whose endorsement for scheduled medicines is subject to a condition, the existing agreement may continue with that supervisor until the 12 month period of supervision is completed. However, the Board recommends that the podiatrist enter into a new supervisory agreement with a medical practitioner or a registered podiatrist with an unconditional endorsement for scheduled medicines for the remainder of the period of supervised practice to ensure that their supervisor has knowledge of the full range of medications required for an endorsement and the full scope of practice relating to the endorsement.

Prior to the commencement of supervised practice, the applicant must ensure that there is a signed **Supervisor Agreement** with the Supervisor. The period of supervised practice is to be completed within 12 months of the date of the Supervisor Agreement. 40 log sheets are required to be completed during this period of supervised practice.

In the Appendix of this Information Package, the following documents relevant for supervised practice are located:

- Supervisor Agreement
- Log Sheet Instructions

- Log Sheet format
- Prescription Pad template
- Certification of Completion of Supervised Practice

These documents assist the Board to assess each application for endorsement for scheduled medicines. **These documents must be used by the podiatrist when submitting the application to the Board.**

The Board's **Log Sheet Instructions** provide the details of the information required. The Supervisor Agreement and the 40 Log Sheets will need to be produced (certified copies with de-identification of patients) at the time of an application for endorsement for scheduled medicines.

7) Application sent to AHPRA

If you consider you have met all criteria in either Pathway 1 or Pathway 2, an application for endorsement of registration for scheduled medicines may be submitted to the Board.

The required application form [AESM – 70] is on the Board's website at www.podiatryboard.gov.au or from the State or Territory offices of the Australian Health Practitioner Regulation Agency (AHPRA). Details of AHPRA office locations are available at www.ahpra.gov.au. The application form and the required additional documentation may be lodged by mail or in person to the AHPRA office. The appropriate fees are to be paid at the time of application.

Note:

- Applicants must have general registration granted by the Board before applying for endorsement for scheduled medicines
- All additional documents required are to be certified copies – do not provide originals
- Complete the official AESM -70 application form
- Submit the application with applicable fees
- Use the Information Package documents and formats when providing the additional information
- De-identify patient / client information

8) Application Assessed by the Board

The Board will assess each application on the information presented with the application. Applicants must provide sufficient information to demonstrate that they are qualified for the endorsement and competent to practise podiatry in accordance with an endorsement for scheduled medicines, which includes:

- knowledge and clinical skills to administer, obtain, possess, prescribe, sell, supply or use the scheduled medicines from each of the classes of drugs in the National Podiatry Scheduled Medicines List
- understanding of the differentiation within the National Podiatry Scheduled Medicines List between general podiatrists with an endorsement for scheduled medicines and Podiatric Surgeons with an endorsement for scheduled medicines
- experience in a variety of podiatric conditions and foot pathology
- experience in a variety of clinical settings

The Board may refuse to endorse the applicant's registration for scheduled medicines if the Board considers that the applicant has not provided sufficient information to demonstrate that they are competent to practice podiatry in accordance with an endorsement for scheduled medicines.

9) Meet all other Registration Requirements

Applicants must also satisfy all other relevant Registration Standards and particularly:

- Podiatry Recency of Practice Registration Standard
- Podiatry Continuing Professional Development Registration Standard
- Podiatry Professional Indemnity Insurance Registration Standard

Podiatrists with an endorsement for scheduled medicines must continue to meet other relevant Registration Standards and requirements, including:

- I. the additional **continuing professional development** requirements for endorsement for scheduled medicines, and
- II. adequate **professional indemnity insurance** for his or her practice

As published in the Board's *Guideline for Endorsement for Scheduled Medicines*, the podiatrist with an endorsement for scheduled medicines must have knowledge and understanding of the Board's **Clinical Practice Guidelines**. The podiatrist must ensure that they have the resources, expertise and skills necessary to fulfill their professional responsibilities safely and effectively. The podiatrist must know the drugs and poisons legislation in the jurisdiction(s) in which they practise and if required participate in the Board's random annual audit of podiatrists with endorsement for scheduled medicines.

10) Therapeutics Update Course (Pathway 1 and Pathway 2)

Before deciding to endorse a podiatrist's registration for scheduled medicines the Board must be satisfied that the podiatrist is competent to practise podiatry in accordance with an endorsement for scheduled medicines.

Under the National Law, the Board may endorse a podiatrist's registration for scheduled medicines, and impose any conditions that it considers necessary or desirable in the circumstances.

If the Board does not consider that the podiatrist has adequate recent experience in relation to administering, using or prescribing the medications on the National Podiatry Scheduled Medicines List the Board may endorse the podiatrist's registration for scheduled medicines and impose a condition that a **therapeutics update course** approved by the Board be successfully completed before commencing activities under their endorsement for the first time.

The Board recommends that podiatrists complete a **therapeutics update course** before submitting their application for endorsement.

The aim, specific objectives and details of approved **therapeutics update courses** and the education providers are included in the Appendix to the Information Package.

Appendix

The following information is to assist the applicant provide the relevant details with an application for an endorsement of scheduled medicines with the Podiatry Board of Australia.

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Additional information can be provided by contacting the Chair, email: chair@podiatryboard.gov.au

Guide for a Clinician making a Reference about an Applicant's Clinical Experience (Pathway 1)

A podiatrist may have his/her registration endorsed to permit him/her to administer, obtain, possess, prescribe, sell, supply or use Schedule 2, 3, 4 or 8 medicines for the short-term treatment of podiatric conditions, from a *List of Scheduled Medicines Approved by the Podiatry Board of Australia* (the National Podiatry Scheduled Medicines List).

Background information

To become endorsed via Pathway 1, the podiatrist must be able to provide documentation to demonstrate:

- 1) A qualification in podiatric therapeutics approved by the Board, and
- 2) The equivalence of seven (7) years' experience working in an appropriate setting where active prescribing is occurring (where seven years' experience is defined as the equivalent to working seven years full time i.e. working 38 hours/week, 48 weeks/year, for seven years), and
- 3) Knowledge and skills from extensive experience observing and working with clients/patients who have podiatric conditions requiring treatment using restricted drugs.

A reference is required from each of two clinicians confirming the podiatrist has completed seven years of clinical experience and has had adequate experience in observing and participating in the administration and prescription of a variety of classes of restricted medicines for various foot related conditions. The two clinicians providing the reference must be medical practitioners or podiatrists with endorsement for scheduled medicines.

Clinicians who are asked to provide a written reference (a statement) for a podiatrist seeking endorsement for scheduled medicines are asked to consider the following documents on the Board's website at www.podiatryboard.gov.au:

- Podiatry Endorsement for Scheduled Medicines Registration Standard
- Podiatry Guidelines for Endorsement for Scheduled Medicines, including
 - Practice Clinical Guidelines; and
 - The National Podiatry Scheduled Medicines List
- Information Package: Endorsement for Scheduled Medicines

A podiatrist without this clinical experience can apply for the endorsement by completing Pathway 2, which includes the completion of 15 Board-approved web-based case studies and documentation of 40 Log Sheets from a period of supervised clinical experience.

The Reference confirming clinical experience (Pathway 1)

The clinicians providing a reference are asked to include the following information and comment:

- 1) Their name, postal address, email address and telephone number
- 2) Their qualifications and clinical position
- 3) The name of the podiatrist for whom the statement is made and the podiatrist's current position

- 4) The nature of the working relationship with the applicant (podiatrist)
- 5) The duration of time that the clinician has known the applicant
- 6) The length of time that the applicant has worked at the facility/ies
- 7) The clinicians are required to confirm and comment:
 - that the applicant has achieved an appropriate level of clinical expertise from working with patients/clients who have been treated with or prescribed Schedule 2, 3, 4 or 8 medicines for podiatric conditions
 - that the applicant has demonstrated broad knowledge and skills relating to the safe and appropriate administration, obtainment, possession, prescription, sale, supply or use of medicines in the National Podiatry Scheduled Medicines List as described in the Board's *Guidelines for Endorsement for Scheduled Medicines* and the *Clinical Practice Guidelines*
 - that the applicant is able to write prescriptions and is aware of the legal, commercial and ethical decisions relating to the prescription of scheduled medicines
 - that the clinician is confident that the applicant is 'work ready' to administer, obtain, possess, prescribe, sell, supply or use scheduled medicines from the National Podiatry Scheduled Medicines List as described in the Board's *Guidelines for Endorsement for Scheduled Medicines*.

To assist the clinician in making these statements on behalf of the applicant, the applicant will provide detailed Log Sheets as per the format illustrated in this Appendix. The Board acknowledges that there will be no supervisor as is required for the podiatrist following Pathway 2.

The Log Sheets will offer the applicant the opportunity to demonstrate his/her experience with the **National Podiatry Scheduled Medicines List**. Each Log Sheet will relate to the management of a podiatric condition and include a sample prescription. The range of agents will be illustrated, including: anti-mycotics; antibacterials; anti-inflammatories; pain management; specific purpose (miscellaneous); local anaesthesia; emergency (anaphylactic reactions); and anti-anxiety. The Board understands if emergency drugs are not part of the Log Sheets. A copy of the Log Sheets and the sample prescription will be provided to the clinicians providing the reference.

Each clinician providing the reference will acknowledge the Log Sheets provided by the podiatrist by signing each Log Sheet. A certified and de-identified copy of the Log Sheets, the sample prescriptions and the reference are required when the application for endorsement is made.

The reference must include sufficient information to satisfy the Board that the applicant has achieved the appropriate level of clinical expertise to administer, obtain, possess, prescribe, sell, supply or use restricted medicines on the National Podiatry Scheduled Medicines List.

The Board may refuse to endorse an applicant's registration for scheduled medicines if the Board considers that the clinician's reference does not provide sufficient information to demonstrate that the applicant is competent to practise podiatry in accordance with an endorsement for scheduled medicines by having the knowledge and skills required to safely administer, obtain, possess, prescribe, sell, supply or use the scheduled medicines listed in the Board's *Guidelines for Scheduled Medicines*.

Alternative Pathway (Pathway 2)

If the applicant meets the academic requirements but not the clinical experience to safely administer and prescribe scheduled medicines, then the applicant is able to refresh and develop this experience through an alternative pathway, Pathway 2. The Board requires the applicant to successfully complete 15 approved web-based case studies and 40 Log Sheets as part of a clinical experience in association with a Supervisor.

Web-based Case Studies (Pathway 2)

The Board has determined that 20 hours of Board-approved, web-based case studies, as stated in the Registration Standard for Endorsement for Scheduled Medicines equates to 15 Board approved web-based case studies.

Evidence of successful completion of the Board-approved, web-based case studies are required for the application of the endorsement to be considered. The education provider will provide a certificate to the podiatrist on the successful completion of the 15 web-based case studies. A certified copy of the certificate is required when applying for the endorsement.

Course Providers

Currently, **La Trobe University** is the only course provider. La Trobe University provides the web-based case studies and the Therapeutics Update Course as one resource.

The web-based case studies can be accessed and completed at your own pace.

Course information:

Web-based case studies and Therapeutics Update Course for Podiatrists
The Institute of Advanced Study, La Trobe University (or alternate location)

If there are any questions about the course, please contact:

Margot Hatty
Administrative Officer
Department of Podiatry
La Trobe University, VIC 3086.
Tel: (03) 9479 5422
Email: m.hatty@latrobe.edu.au

Supervisory Agreement (Pathway 2)

I _____ (*the Supervisor*) agree to supervise
_____ (*the Podiatrist*) who will work towards
achieving the clinical experience required for application for an endorsement for scheduled medicines with
the Podiatry Board of Australia.

Signature: _____ [Supervisor] Date: _____

I _____ (*the Podiatrist*) accept the Supervisor
Agreement. I will abide by the notes accompanying the Supervisory Agreement, the intention of the
protocol of this document and the content of the Information Package.

Signature: _____ [Podiatrist] Date: _____

Note: The period of supervised practice is within a 12 month period as stated in the *Endorsement for scheduled medicines registration standard*. The date of the signed Supervisor Agreement confirms the beginning of the 12 month period of supervised practice

The Podiatry Board of Australia (Board) may refuse to endorse the Podiatrist's registration for scheduled medicines if the Board considers that the Podiatrist has not completed the Log Sheets with sufficient information or demonstrated a diversity of clinical experiences such that the Podiatrist does not meet the Board's *Endorsement for Scheduled Medicines Registration Standard*.

Notes accompanying the Supervisory Agreement

Podiatrist

The Podiatrist referred to in the Supervisory Agreement is a podiatrist with general registration with the Podiatry Board of Australia (Board) seeking an endorsement for scheduled medicines.

Supervisor

The Supervisor is a suitably qualified registered health practitioner and must be a medical practitioner or a podiatrist endorsed for scheduled medicines. This agreement must be signed and dated by the Podiatrist and Supervisor. Not all sessions are required to be directly monitored by the Supervisor but must be monitored by a suitably qualified health practitioner.

It is expected that one Supervisor will be involved during the period of clinical experience for the Podiatrist. However, where circumstances necessitate, more than one Supervisor may be involved. There must be a signed Supervisory Agreement with each Supervisor. The commencement date of the 12 month period of supervised practice is the date of the first signed Supervisory Agreement.

Outline

Supervision by the suitably qualified registered health practitioner within a setting where active prescribing is occurring is one component of the formal requirements for podiatrists who apply for endorsement for scheduled medicines.

Within a twelve month period, 40 Log sheets (a recommended format of which is contained in the Appendix of this Information Package) are to be completed by the Podiatrist and signed by the Supervisor as soon as practicable after the Podiatrist has completed each Log Sheet. The signed Log Sheets are to be submitted to the Board as part of the application for the endorsement. The form 'Certification of Completion of Supervised Practice' is to be completed by the Supervisor, provided to the Podiatrist and included with the Log Sheets as part of the application to the Board for the endorsement for scheduled medicines.

The Supervisor must be familiar with and understand their Board's Code of Conduct, *Podiatry Endorsement for scheduled medicines registration standard*, the *Podiatry Guidelines for Endorsement for Scheduled Medicines* and this Information Package, prior to the commencement of the supervision. These documents are available on the Board's website at www.podiatryboard.gov.au.

The Podiatry Board of Australia's *Code of conduct for registered health practitioners* includes section 10.3 which states:

Assessing colleagues is an important part of making sure that the highest standards or practices are achieved. Good practice involves:

- a). being honest, objective and constructive when assessing the performance of colleagues, including students; patients or clients will be put at risk of harm if an assessment describes as competent someone who is not
- b). when giving references or writing reports about colleagues, providing accurate and justifiable information promptly and including all relevant information.

Protocol

Attendance and participation by the Podiatrist for a period of clinical experience, within a 12-month period, in a facility where active prescribing is occurring is required. More than one facility may be used and is encouraged and multiple appropriately qualified clinicians may assist with the applicant's experience. The Podiatrist is required to share Log Sheets with all participating clinicians and the Supervisor to ensure a mix of clinical experiences and learning objectives is achieved.

Exposure to a variety of settings is essential for a mix of clinical experiences. The Podiatrist should have an opportunity to review and work with clients/patients across the continuum of care. Log Sheets should reflect this variety of placements such as: high risk foot clinics, teaching clinics, emergency departments, the operating room, rheumatology clinics, endocrinology clinics, general medical practice and aged care facilities.

Clinical Experience

As soon as practicable after completing each Log Sheet, the Podiatrist must discuss the content with the Supervisor. The Podiatrist and Supervisor must then sign and date the Log Sheet.

When the Podiatrist has completed the required 40 Log Sheets, the Supervisor is required to 'sign-off' on the suite of Log Sheets prepared by the Podiatrist by completing the *Certification of Completion of Supervised Practice*. The Supervisor should ensure that the suite of Log Sheets reflects:

- a diversity of clients/patients
- a diversity of clinical settings
- a diversity of medical conditions
- a diversity of prescribing of scheduled medicines from each of the classes of drugs in the National Podiatry Scheduled Medicines List
- observance of Quality Use of Medicine principles
- that the podiatrist has experienced and understood the ethical, legal and commercial decisions necessary for independent prescribing for the treatment of podiatric conditions.

The Supervisor should ensure the Podiatrist:

- is exposed to a range of therapeutic uses of scheduled medicines
- observes the pharmacological decision-making and management
- observes and reflects on the Quality Use of Medicine principles relating to prescribing
- explains the communication between the client/patient and the health professionals who contribute to his or her health management
- is exposed to and involved with prescription writing
- considers the ethical and legal decisions and the commercial obligations regarding the prescribing of scheduled medicines for the client
- completes the 40 Log Sheets in line with the Log Sheet Instructions (included in this Information Package)

Podiatrists with Endorsement for Scheduled Medicines and Podiatric Surgeons with Endorsement for Scheduled Medicines

The Supervisor must ensure that the Podiatrist understands that certain scheduled medicines (or routes of administration) will be restricted to those podiatrists with an endorsement for scheduled medicines who have a demonstrated clinical need, such as Podiatric Surgeons. The National Podiatry Scheduled Medicines List details these restrictions in the column headed *Endorsement*.

This should be reflected in the relevant Log Sheets.

Log Sheet Instructions (Pathway 2)

Log Sheet – to demonstrate clinical experience and learning objectives

1. A suite of 40 Log Sheets from a diverse range of case studies and clinical settings involving scheduled medicines with the management of podiatric conditions are required as part of the application for the endorsement for scheduled medicines.
2. The Podiatrist is required to present sufficient information in each Log Sheet to satisfy the Supervisor and the Board that the objectives of the education sessions are being met (as per Certification of Completion of Supervised Practice).
3. Log Sheets are to be numbered consecutively from 1 to 40.
4. All fields are to be completed for each numbered Log Sheet.

Date of Observation for this case study : _____

Podiatrist's Name: _____

Clinician's Name: _____

Place name of clinical setting: _____

[eg St David's Hospital, ED]

The '**date of observation for this case study**' is the actual date of the consultation that is the basis of the case study.

The '**Podiatrist's name**' is the name of the Podiatrist completing the Log Sheet.

The '**Clinician's name**' is the name of the person who is attending and/or responsible for the management of the client/patient. The clinician may be the Podiatrist's Supervisor or another health practitioner. The name of the clinician is provided so that the Supervisor can discuss issues of the case with the clinician (if required) when the Log Sheet is discussed.

The '**place name of clinical setting**' must adequately describe the setting for this clinical experience.

5. A **Session Description** will be provided. The basis of the session should be structured around a medication, client/patient or procedure class.

An example of a Session Description follows:

In this session, prescription of pain medications was explored in relation to multi-modal pain control after an acute injury. The complex interactions between the various pain medications and other drugs were explored. A sample prescription was written and discussed with the Supervisor.

6. Each Log Sheet must contain one individual case study involving a de-identified client/patient. The client/patient consultation will have been observed or conducted by the Podiatrist. The Podiatrist will

have been involved in a discussion with the clinician regarding the management of a podiatric condition and the prescription or administration of a scheduled medicine.

7. Each Log Sheet must reflect a case study and the decisions relating to the use of scheduled medicines observed during the consultation, including those scheduled medicines from the National Podiatry Scheduled Medicines List. Issues of consideration: medical history, medication history, drug/s prescribed, dosage, duration of prescription, contra-indications, drug interactions, information for client/patient, ethical and legal obligations, commercial implications, communication with other health providers, shared care protocols and knowledge of the National Podiatry Scheduled Medicines List.
8. The Podiatrist will use the Log Sheet format provided by the Board. A Microsoft Word® document of the Log Sheet will be provided if requested.
9. A sample prescription for a scheduled medicine on the National Podiatry Scheduled Medicines List will be written for the client/patient by the Podiatrist. The sample prescription is to be attached to each Log Sheet. A template of a sample prescription is provided on the Board's website and is also provided in this Information Package.
10. Log Sheets must demonstrate that the choice of pharmacological agent has been made in consideration of various schedules which contain the same agent/s in differing presentations and the cost considerations in respect to pharmacy dispensing fees.

In this context, prescription writing for S2 and S3 agents is encouraged. This will demonstrate an element of evidence that ethical, legal and commercial implications have been considered.

For example: prescriptions in respect to podiatric prescribing may be annotated with notes such as 'Over the Counter' to encourage the pharmacist to consider a reduction to or waiving of the dispensing fee given that currently there is no PBS rebate for podiatric prescriptions.

11. The Log Sheet must be discussed with the Supervisor to enable the Supervisor to be confident that the clinical experience relates to a podiatric intervention and contributes to the diverse scenarios required for the Board to favourably consider the application for endorsement of scheduled medicines.
12. The Board requires 40 Log Sheets to ensure the Podiatrist can demonstrate knowledge and skill to administer, obtain, possess, prescribe, sell, supply or use the scheduled medicines on the National Podiatry Scheduled Medicines List. The Board's expectation is that the Podiatrist will cover each of the classes of drugs from the National Podiatry Scheduled Medicines List and that this will be reflected in the case studies documented in the Log Sheets. Where appropriate, the Board will expect to see a variety of scheduled medicines from each of the classes of drugs incorporated in the Log Sheets.
13. The range of scheduled medicines includes: anti-mycotics, anti-bacterials, anti-inflammatories, pain management, local anaesthesia, specific purpose (miscellaneous), emergency (anaphylactic reactions) and anti-anxiety agents.
14. Whilst not all clinical experience must involve foot pathology, **all of the Log Sheets must involve podiatric pathology**. At least 50% of the Log Sheets are to include more than one class of drugs from the National Podiatry Scheduled Medicines List involved in the log sheet case study.

15. More than one log sheet can be completed on one day if diverse conditions and medicines requirements are observed.
16. State and territory drugs and poisons legislation authorizes podiatrists with general registration to use a specific range of local anaesthetic (LA) agents in each jurisdiction. Podiatrists must check the specific range of LA medicines by reviewing the drugs and poisons legislation in their State or Territory.

For the purpose of this document, these LA medicines will be called 'first line' LA agents.

If the attainment of an endorsement for scheduled medicines will broaden the range of LA agents the podiatrist can access; the use of these agents may be demonstrated as a Log Sheet case study as an administered scheduled agent from the National Podiatry Scheduled Medicines List. The sample prescription would reflect the LA of choice and the Log Sheet must include the clinical reasoning for choosing the specific LA agent.

However, a Log Sheet where the case study included the combination of a 'first line' LA agent with another class of medicines from the National Podiatry Scheduled Medicines List in the management of a podiatric condition, for example, an injection of a steroid with a LA agent, would be considered favourably. This example would be an example of a Log Sheet that included more than one scheduled medicine from the National Podiatry Scheduled Medicines List.

17. Each Log Sheet must be **signed and dated** by the Supervisor and the Podiatrist (both of whom have signed a Supervisory Agreement prior to the commencement of the clinical experience). The Clinician's name is to be included with the Log Sheet.

In the case of S2 and S3 medicines, The Supervisor or Clinician does not necessarily need to witness the clinical experience relating to the Log Sheet.

However, the Podiatrist must ensure that he or she is able to discuss with the Supervisor the medical aspects of the clinical experience and the considerations and decisions relating to prescription or administration of these S2 and S3 medicines.

All Log Sheets involving an S4 or S8 medicine **MUST** involve direct supervision with a Clinician. Legally, the only person able to sign the prescription is the Clinician.

18. All log sheet case studies must be related to a podiatric condition, intervention or management. The Supervisor can contact the relevant Clinician should he/she require clarification of the details of the Log Sheet.
19. The *Clinical Practice Guidelines*, which are at Appendix A to the *Guidelines for Endorsement for Scheduled Medicines*, provide guidance to the ethical, legal, financial and communication issues. There is currently no Commonwealth funding for podiatric prescriptions and drug costs vary significantly. It is important that Log Sheets and prescriptions demonstrate an understanding of this and where appropriate, choice of agents should reflect this understanding. For example, in the case of S2 and S3 prescriptions a notation such as 'Over the Counter' on the prescription provides clarification to the dispensing pharmacist.

20. The Podiatry Board of Australia may refuse to endorse the applicant's registration for scheduled medicines if it considers that the completed Log Sheets do not provide sufficient information to demonstrate the knowledge and skills required to safely administer and prescribe the scheduled medicines in the National Podiatry Scheduled Medicines List. The documentation of the suite of 40 Log Sheets must be the Podiatrist's own work and each Log Sheet is to be his/her original work. 'Cut and paste' or repeated 'copied' text will not be accepted.
21. The Podiatrist is responsible for submitting certified copies of the completed suite of 40 Log Sheets with the application for endorsement for scheduled medicines.

The Log Sheet template is available as a Microsoft Word[®] document; request a copy by emailing: chair@podiatryboard.gov.au

Attach your
sample
prescription
here

Log Sheet

Complete this document with reference to the Board's 'Log Sheet Instructions'

Log Sheet no: _____ **Date of Observation for this Case Study:** _____

Podiatrist's Name: _____

Clinician's Name: _____

Place name of clinical setting: _____
[eg St David's hospital, ED]

Session Description: <enter your text here>

Case Study This de-identified case study relates to a client/patient who was treated by the clinician on the day and place as stated on this Sheet.

Subjective: <enter your text here>
Objective:
Assessment:
Plan:
Education:
Review:

Supervisor's signature:
Date:

Podiatrist's signature:
Date:

Request a Microsoft Word® document of the Log Sheet by emailing: chair@podiatryboard.gov.au.

Podiatry Board of Australia – standard prescription pad template.

PRESCRIPTION

Full Name
Podiatrist Endorsed for Scheduled Medicines

Address: Insert
Address: Insert
Phone: 12 3456 7890
Fax: 12 3456 7890

Podiatry Board of Australia - **Registration No: xxx**

Patient details:

Date:

Name

.....

DOB

Address

.....

.....

R_x

Prescriber's signature

Podiatry Board of Australia – standard prescription pad template

PRESCRIPTION

Full Name
Podiatric Surgeon Endorsed for Scheduled Medicines

Address: Insert
Address: Insert
Phone: 12 3456 7890
Fax: 12 3456 7890

Podiatry Board of Australia - **Registration No: xxx**

Patient details:

Date:

Name

.....

DOB

Address

.....

.....

R_x

Prescriber's signature

Certification of Completion of Supervised Practice (Pathway 2)

This feedback form is to be completed after the supervision period has been completed by the Podiatrist seeking endorsement for scheduled medicines with the Podiatry Board of Australia. Each Supervisor who has previously signed a Supervisor Agreement with the Podiatrist must complete one of these forms for the period of supervision provided. The Podiatrist will provide the completed form together with each signed Supervisor Agreement to the Board with a certified copy of each of the 40 completed Log Sheets when applying for an endorsement for scheduled medicines. Additional explanatory notes can be attached if required.

Podiatrist [print name]: _____

Supervisor [print name]: _____

	Always	Mostly	Sometimes	Never
General peer support				
The Podiatrist and the Supervisor reviewed matters of pharmacological management and decision making regularly?				
The Podiatrist and Supervisor discussed the content of each of the Log Sheets?				
By the end of the supervised clinical practice period, was appropriate understanding shown by the Podiatrist, in the following areas:				
1) Medical history				
2) Medication history				
3) Drug prescribed				
4) Dosage				
5) Duration of prescription				
6) Contra-indications				
7) Drug interactions				
8) Information provided for client/patient				
9) Writing of prescriptions				
10) Ethical and legal obligations				
11) Commercial implications				
12) Communication with other health providers				
13) Shared care protocols				
14) Knowledge of the National Podiatry Scheduled Medicines List				

.....
Supervisor's signature

Date

.....
Podiatrist's signature

Date

Scheduled Medicine Summary and Clinical Setting Summary are continued on the next pages.

Scheduled Medicine Summary (Certificate of Completion of Supervised Practice)

This page is to be completed by the Podiatrist and checked by the Supervisor. This summary links the scheduled medicines from the sample prescriptions to the National Podiatry Scheduled Medicine List. On completion of the supervised practice period, the 40 log sheets will cover the National Podiatry Scheduled Medicine List. It is understandable if emergency drugs are not part of the Log Sheets.

Medication Class	Medication	Log Sheet Reference
<i>Example:</i> Anti-mycotics	<i>Miconazole powder</i> <i>Terbinafine gel</i> <i>Terbinafine oral</i>	5 21 35, 38
Anti-mycotics		
Anti-bacterials		
Anti-inflammatories		
Anti-histamines		
Pain management		
Local anaesthesia		
Specific purpose (miscellaneous)		
Emergency [anaphylactic reactions]		
Anti-anxiety agents		

.....

Supervisor's signature

Date

.....

Podiatrist's signature

Date

Clinical Settings Summary (Certificate of Completion of Supervised Practice)

This page is to be completed by the Podiatrist and checked by the Supervisor. This summary links the clinical experience to the variety of clinical settings where active prescribing was observed.

Place Name of the Clinical Setting	Description of the Setting	Log Sheet Reference
<i>Example: St David's Hospital Smith Street Clinic St Vincent Hospital</i>	<i>Private Hospital – Day Hospital GP practice High Risk Foot Clinic</i>	<i>2, 15, 16, 21,22 5, 35, 38 28 - 34</i>

.....

Supervisor's signature

Date

.....

Podiatrist's signature

Date

Therapeutics Update Course (Pathway 1 and Pathway 2)

The aim of the update course

The main aim of the update course is to provide practising podiatrists who are in the process of fulfilling the Board's requirements enough information to be able to effectively and legally prescribe designated medicines with knowledge, confidence, efficacy and safety.

It is important that the participants are aware that they will have the ability to administer, obtain, possess, prescribe, sell, supply or use a relatively small range of medicines, but that these medicines may be very potent and possibly toxic. Therefore, it is vital that a *full* medical and medication history be obtained before considering prescribing any medication.

Specific objectives

At the conclusion of this series of lectures, attending podiatrists should be able to:

1. List which medications they will be able to administer, obtain, possess, prescribe, sell, supply or use
2. Understand the legal requirements for each of the scheduled medicines
3. Adhere to the requirements of the relevant State and Territory drugs and poisons legislation and the National Law as they pertain to a registered podiatrist endorsed for scheduled medicines
4. Identify the major sources of evidence-based information about scheduled medicines
5. Detail the role of antibiotics in podiatric therapy and the potential problems associated with anti-microbial use and have an understanding of the modes of actions of anti-microbials; the problems of resistance; and the consequences of inappropriate prescribing
6. Demonstrate the action to take if a client/patient develops anaphylaxis
7. Know the mode of action, indications, contraindications, precautions, main adverse effects, important drug interactions, dose forms and doses of:
 - a) anti-bacterial agents
 - b) oral anti-fungal agents
 - c) topical anti-fungal agents
 - d) opioid analgesic agents
 - e) anti-histaminic agents
 - f) benzodiazepines
 - g) topical corticosteroids and
 - h) systemic corticosteroids
8. Define the concept of drug to drug interactions, both pharmacological and pharmacokinetic and know where to find information about the clinical relevance of such interactions
9. Identify possible adverse drug reactions, and be able to predict and/or prevent such adverse reactions
10. Identify the signs of addiction and addictive behaviours in patients and know what to do if it is suspected that a patient is attempting to obtain a prescription to feed an addiction
11. Know how to take a medical and medication history
12. Know how to write a legal prescription
13. Know when to refer a patient.

The Therapeutics Update Course will include an assessment. The education provider(s) will provide a certificate to those who successfully complete the assessment.

Course Providers

Currently, **La Trobe University** is the only course provider for a Therapeutic Update Course.

Course information:

Therapeutics Update Course for Podiatrists, The Institute of Advanced Study, La Trobe University (or alternate location)

15-hour course (2.5 days) and includes: course notes, catering and the instruction (update course and web-based case studies).

If there are any questions about the course, please contact:

Margot Hatty

Administrative Officer

Department of Podiatry

La Trobe University, VIC 3086.

Tel: (03) 9479 5422

Email: m.hatty@latrobe.edu.au