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Board of Australia's website regularly in the next six months and take the opportunity to provide input into each of these important documents as they are released.

All podiatrists with email addresses should by now have received email notification of the 30 November 2012 renewal date. Renewal is a great time to reflect on our responsibilities as health care providers. When completing your documentation please check that the contact details you have provided to AHPRA are current.

The renewal period is also a great time to reflect on your continuing professional development (CPD) portfolio and to identify areas for ongoing improvement. As part this reflection, ensure your current Professional Indemnity Insurance is appropriate given your scope of practice.

The graduate online registration process is now open. This allows graduates a smooth transition from study to participation in the health workforce. I encourage all new graduates this year to begin this process as soon as possible.

Message from the Chair

The three-year term of the inaugural Podiatry Board of Australia ended on 30 August 2012. Three members of the inaugural Board – Jason Warnock (Chair), Joan Russell (community member) and Helen Matthews (practitioner member) – completed their term and were farewelled at the August 2012 meeting. Their contribution to the inaugural Board was invaluable and we thank them for their leadership and dedication in establishing the new Board and the continuing effectiveness that will result from their commitment and participation during these formative years.

I would like to welcome the new members of the Board – Dr Paul Bennett, a practitioner member from Queensland; Ms Annabelle Williams, a practitioner member from Tasmania; and Mr Mark Bodycoat, a community member from South Australia.

Some of the Board's work in the first three years was the development of standards, codes and guidelines for the podiatry profession. It is now time for a review of these documents, which will involve wide-ranging public consultation. I urge all registered practitioners and stakeholders to visit the Podiatry

Cathy Loughry

Chair, Podiatry Board of Australia

Registration renewals due by 30 November – renew online, on time

Podiatrists across Australia are reminded that their registration is due for renewal by 30 November. Email renewal reminders have been sent by the Australian Health Practitioner Regulation Agency (AHPRA) to podiatrists for whom an email address is known.

More than 3,600 podiatrists are due to renew their registration. The quickest and easiest way to renew registration is online, with 83% of podiatrists using this secure service last year.

Podiatrists who do not want to renew their registration can simply ignore the reminders from AHPRA or go online to 'opt out' of renewing. This new online facility will provide the Board and AHPRA with better data on the number of podiatrists who choose to opt out of renewing their registration, to distinguish them from those who intend to renew, but do not do so on time. Using the 'opt out' service puts a stop to renewal reminders. >>



Under the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), practitioners who do not renew registration within one month of their registration expiry date must be removed from the National Register of Practitioners. Their registration will lapse and they will not be able to practise podiatry in Australia until a new application for registration is approved.

Neither the Board nor AHPRA has any discretion about this so our advice is clear: renew online and on time.

To renew your registration and/or update your contact details

- Go online at www.ahpra.gov.au, click online services, use your unique contact number (User ID) and follow the prompts. Your User ID, included in AHPRA correspondence to practitioners, is not your registration number.
- If you do not have your User ID, complete an online enquiry form, selecting 'User ID' as the category of enquiry, or call 1300 419 495.

CPD reminder

Practitioners are required to regularly participate in continuing professional development (CPD) that is relevant to their scope of practice. Podiatrists with general registration are required to complete a minimum of 20 hours of CPD per year as well as hold current a CPR certificate which includes management of anaphylaxis and use of an automatic external defibrillator (AED).

Podiatric surgeons must complete an additional 20 hours of CPD per year related to this scope of practice. Podiatrists with an endorsement for scheduled medicines must complete an additional 10 hours of CPD per year related to the use of scheduled medicines in podiatry practice.

The Board's CPD requirements must be met by the time practitioners renew their registration, which is due on 30 November 2012.

Practitioners are required to declare on the renewal of registration form whether during the preceding registration period they have met the Board's CPD requirements. The Board may refuse to renew a practitioner's registration if the CPD requirements have not been met.

For more information

- The Board's requirements for CPD are set out in the *Continuing Professional Development*

Registration Standard, published on the Board's website under the [Registration Standards](#) tab.

- The Board's *Guidelines for continuing professional development* and FAQ for CPD are also on the Board's website under the [Policies, Codes and Guidelines](#) tab.

Online graduate registration

Students of podiatry who will graduate soon can go online now to apply for registration as a health practitioner.

An online graduate registration service for final year students was launched by AHPRA in May 2011. The service enables students to apply for registration early before completing their course and aims to smooth the path from study to work in five simple steps.

Online applications for registration are now open. All applications require students to return some supporting documents to AHPRA by mail.

Graduates of approved programs of study must make an application for general registration if they intend to practise using the protected title 'podiatrist'. Using AHPRA's online graduate application service is recommended.

For more information

- Go to the Graduate Applications website at www.ahpra.gov.au/Registration/Graduate-Applications.aspx for FAQ and links to more information.
- For registration enquiries call 1300 419 495 (within Australia) or +61 3 8708 9001 (overseas callers).

Board's October forum held in Brisbane – Adelaide and Canberra to follow in 2013

The Board held its October 2012 meeting in Queensland at the AHPRA Brisbane office. While in Brisbane, the Board held an informal forum on the evening of 11 October 2012, which was attended by a number of local podiatrists.

The Board welcomed the opportunity to meet Queensland podiatrists and discuss issues relating to the registration and regulation of podiatrists under the National Law.

The Board will be hosting similar forums in Adelaide in May 2013 and Canberra in October 2013 and invitations will be sent to podiatrists in those jurisdictions closer to the event.

Review of accreditation arrangements

A review of accreditation arrangements is underway for the 10 National Boards that entered the National Registration and Accreditation Scheme (the National Scheme) in 2010.

Accreditation authorities play an important role in the National Scheme: recommending accreditation standards to National Boards for approval; and assessing programs of study and education providers to determine whether accreditation standards are being met. Their work helps to ensure that education providers and programs of study provide students with the knowledge, skills and professional attributes to practise their profession in Australia.

The National Law requires each National Board to have reviewed its accreditation arrangements by 30 June 2013. The review includes an assessment of how existing authorities have performed, and consultation with stakeholders about accreditation functions.

A public consultation process was recently completed for eight of the 10 professions, including podiatry, and the Board will now decide on the ongoing accreditation arrangements for the profession.

Further information about the accreditation arrangements review is available on many National Board websites, which are accessible via the [AHPRA](#) site.

Snapshot of registered workforce

There are 3,708 podiatrists registered in Australia, according to new National Board statistics released in October.

The Board published its second quarterly update on registration data, including a number of statistical breakdowns about registrants such as state/territory, age and gender by registration type.

The figures show:

- of the practitioners who disclosed their gender to AHPRA, 1,674 (45.15%) are female and 1,170 (31.55%) are male
- the largest group (714 or 19.26%) of podiatrists are aged between 26 and 30
- about 32% of podiatrists are based in Victoria and 25% in NSW
- there are 25 podiatrists with specialist recognition as podiatric surgeons, and
- 48 podiatrists are now endorsed for scheduled medicines.

Podiatrists: State/territory by registration type

State	General	General and Specialist	Non-practising	Total	% By State
ACT	46		1	47	1.27%
NSW	940	4	9	953	25.7%
NT	17			17	0.46%
QLD	623	2	7	632	17.04%
SA	354	4	9	367	9.9%
TAS	90			90	2.43%
VIC	1,153	3	38	1,194	32.2%
WA	365	11	4	380	10.25%
Not Stated	22	1	5	28	0.76%
Total	3,610	25	73	3,708	

Podiatrists: Endorsement type by state/territory

Endorsement	NSW	QLD	SA	VIC	WA	Total
Scheduled Medicines	2	2	4	15	25	48
Total	2	2	4	15	25	48

Find the Board's statistics in the [About](#) section of its website.

Notifications

One of the ways in which the Board protects the community is by assessing and investigating notifications and, when necessary, subsequently managing practitioners when they have been found to have engaged in unprofessional conduct, unsatisfactory professional performance or when their health is impaired and may place the public at risk.

In the last edition of the newsletter we outlined the grounds for notification, and details about who can make a notification.

Common notifications and the assessment and investigation process

The vast majority of podiatrists meet the high standards expected by the profession and the public. However, a notification can be made to the Board when a member of

the public believes that:

- a practitioner's professional conduct is or may be of a lesser standard than that expected by the public or the practitioner's professional peers, or
- the knowledge, skill or judgment possessed, or care exercised by the practitioner is or may be below the standard reasonably expected.

The following case study illustrates some of the issues that are commonly raised in notifications made to the Board.

Background

Mr G, an elderly man, suffered from chronic hip pain. His doctor had indicated that he might need a hip replacement at some stage; however no investigations had been undertaken as yet.

Mr G wondered if orthotics might help and, finding a discount coupon for a podiatrist on the back of his shopping receipt, he attended the podiatrist. This was the first time he had visited this podiatrist.

The podiatrist asked Mr G to walk up and down his clinic waiting room, in full view of other clients, asking if he had any knee trouble. After some prompting, Mr G said that sometimes he did have soreness in his knees. Without taking a full medical history and without further examination of the patient, the podiatrist recommended the use of orthotics and stated that they would fix his condition and in a few months he would no longer require his walking stick. He also informed Mr G that he would not need a hip replacement.

The podiatrist told Mr G that he would require a couple of appointments and went ahead and booked them, asking if he had private health insurance. However, there was no discussion about the cost of the orthotics, nor was any advice given to Mr G about contacting the health insurer to find out about coverage for the out-of-pocket expenses.

One week later Mr G had orthotics fitted but he was not given any information about their use. At a review appointment two weeks later Mr G reported a slight improvement in his knee discomfort but no change in his hip pain. The podiatrist told him that no further visits were required and no advice was given about future management.

The patient persevered with the orthotics for six months with no improvement to his hip pain, the original reason for consulting with the podiatrist. Mr G then consulted his doctor, who diagnosed significant osteoarthritis in both hips. Mr G has since undergone bilateral hip replacements.

Mr G's son was concerned that his elderly father had been provided with expensive orthotics unnecessarily and contacted the podiatrist's rooms seeking a refund for the

cost of the orthotics or a free further consultation with the podiatrist for his father. He was informed that the treating podiatrist would call him.

The podiatrist did not call but instead sent a letter informing Mr G's son that a hip replacement was anticipated at the initial consultation, and that as the orthotics were prescribed for knee pain no refund would be offered.

On behalf of his elderly father, Mr G's son made a notification to the Board about the podiatrist.

Professional conduct issues raised by the notification

Following a preliminary assessment of the notification the Board decided to investigate the professional conduct of the podiatrist. The issues raised by the notification included the practitioner's failure to:

- conduct an appropriate physical examination and take a full medical history
- protect the privacy of Mr G by conducting an examination in the waiting room in full view of other patients
- discuss the treatment options available for Mr G including their nature, purpose, possible positive and adverse consequences, limitations and any reasonable alternatives
- provide adequate information about use of the orthotics
- provide adequate information about the cost of the treatment
- maintain adequate clinical records
- communicate effectively with the patient, and
- comply with the advertising provisions of the National Law and the Board's advertising guidelines in that a discounted service was advertised without the terms and conditions of the offer being stated.

A review of the podiatrist's clinical case notes indicated that the records were not of an adequate standard in that:

- there was no medical history recorded
- there was no record of current medication
- the dates of the consultations were not clearly stated
- there was no information about the type of examination conducted and the clinical findings and observations
- a copy of the prescription for the orthotics was not included in the clinical record for this patient, and
- there were no details of the advice provided to the patient.

What would happen next?

The Board has the power to take a range of actions at any time after receiving a notification, or after an investigation, including the following:

- take no further action
- take immediate action if the practitioner’s conduct or performance poses a serious risk to people and it is necessary to take immediate action to protect public health or safety. Immediate action includes suspension or the imposition of a condition on the practitioner’s registration (not in this case)
- require the practitioner to undergo a performance assessment (not in this case)
- caution the practitioner
- accept an undertaking from the practitioner or place conditions on the practitioner’s registration requiring the practitioner to (for example): undertake further training regarding appropriate prescribing of orthotics; and/or keeping of adequate clinical records; and/or effective communication with patients; and/or requirements to maintain the privacy and confidentiality of patients; and/or amend their advertising to comply with the requirements of the National Law
- refer the matter to a performance and professional standards panel hearing, or
- refer the matter to a tribunal for hearing.

Orthotics

The effectiveness or otherwise of orthotics as viewed by patients is a recurring issue in notifications to the Board. When a podiatrist has been unable to resolve or improve the patient’s podiatry condition through the use of orthotics this will often trigger a notification to the Board, particularly if the podiatrist has led the patient to believe that the orthotics will provide a ‘sure cure’ for that condition. Patients will often seek a refund if they are dissatisfied with the results of the treatment and a refusal to provide a refund will also often trigger a notification to the Board.

It is important to conduct an adequate examination of the patient and take an appropriate medical history before making a clinical decision to prescribe orthotics. It is also important to communicate effectively with the patient about the use of orthotics including their nature, purpose, possible positive and adverse consequences, limitations and any reasonable alternatives that are available, and to record that advice in the patient’s clinical records.

It is also helpful to provide an information sheet setting out the appropriate use of orthotics. When a patient expresses dissatisfaction with the treatment provided, once again it is important to communicate effectively with the patient and explain the reasons why the condition has not improved. If a patient requests a refund and you

do not believe a refund is justified, you should clearly explain the reasons why a refund will not be given.

National Board appointments by ministers – new Podiatry Board announced

The Australian Health Workforce Ministerial Council announced new appointments and reappointments to all National Boards including the Podiatry Board of Australia – effective from 30 August 2012.

The new Podiatry Board comprises:

Mrs Catherine Loughry	Appointed as Chair and reappointed as a practitioner member from South Australia
Associate Professor Laurence Foley	Reappointed as a practitioner member from Western Australia
Dr Paul Bennett	Appointed as a practitioner member from Queensland
Mr Mark Gilheany	Reappointed as a practitioner member from Victoria
Associate Professor Paul Tinley	Reappointed as a practitioner member from New South Wales
Ms Annabelle Williams	Appointed as a practitioner member from Tasmania
Mrs Anne-Marie Hunter	Reappointed as a community member
Mr Ebenezer Banful	Reappointed as a community member
Mr Mark Bodycoat	Appointed as a community member

All appointments to the Podiatry Board of Australia are for a three-year term.



*Left to right: Mrs Anne-Marie Hunter, Associate Professor Laurence Foley, Mr Mark Gilheany, Mrs Catherine Loughry (Chair), Ms Annabelle Williams, Mr Ebenezer Banful, Dr Paul Bennett
Absent: Associate Professor Paul Tinley, Mr Mark Bodycoat*

In brief

AHPRA annual report released

AHPRA's 2011/12 annual report was publicly released in early November. The report must be tabled in state, territory and commonwealth parliaments. The report is the second since the National Scheme began and details the work of AHPRA and the National Boards during the 2011/12 year.

The report is now available on all National Boards' websites and on the AHPRA site. There is also a special edition of [AHPRA Report](#) to highlight key elements of the annual report.

Website and email for important information

The best way to stay in touch with news and updates from the Board is to regularly visit our website www.podiatryboard.gov.au and to make sure AHPRA has your up-to-date contact details. Accurate email details are particularly vital to the Board and AHPRA being able to contact practitioners rapidly with important information. Remember to:

- update your contact details with AHPRA if your email address changes when, for example, you move jobs or internet service providers, and
- ensure that the email address you provide will not reject Board correspondence as spam.

Contacting the Board

AHPRA can be contacted by telephone on 1300 419 495. More information on the Board is available at www.podiatryboard.gov.au and more information on AHPRA is available at www.ahpra.gov.au. An online enquiry form is available on both websites under Contact Us. Mail correspondence can be addressed to: Cathy Loughry, Chair, Podiatry Board of Australia, GPO Box 9958, Melbourne VIC 3001.

