

Frequently asked questions

30 April 2018

New registration standard and guidelines: Endorsement for scheduled medicines

The Podiatry Board of Australia (the Board) has a new *Endorsement for scheduled medicines registration standard* and associated guidelines that come into effect 1 August 2018. To help practitioners the Board has prepared some useful FAQ.

General questions about endorsement

What is an endorsement for scheduled medicines?

The endorsement of your registration for scheduled medicines indicates that you are **qualified** to administer, obtain, possess, prescribe, sell, supply or use Schedule 2, 3, 4 or 8 medicines for the treatment of podiatric conditions, included in the *National podiatry scheduled medicines list*.

However, the endorsement **does not authorise** you to do so.

The authorisation for you to administer, obtain, possess, prescribe, sell, supply or use scheduled medicines in a state or territory will be provided by or under legislation and regulations of the state or territory in which you are practising. This may be different in each state and territory.

You must administer, obtain, possess, prescribe, sell, supply or use scheduled medicines within the scope of the state or territory authority at all times.

What is the National Podiatry Scheduled Medicines List and where can I find it?

The *National Podiatry Scheduled Medicines List* specifies the Schedule 2, 3, 4 and 8 medicines that podiatrists and podiatric surgeons, whose registration has been endorsed for scheduled medicines, are **qualified** to administer, obtain, possess, prescribe, sell, supply or use for the treatment of podiatric conditions.

The *National podiatry scheduled medicines list* is attached to the new *Registration standard: Endorsement for scheduled medicines* (ESM registration standard), published on the [Board's website](#).

What are the required prescribing competencies for endorsement for scheduled medicines?

The prescribing competencies required for endorsement for scheduled medicines are the prescribing competencies described in the NPS MedicineWise *Prescribing Competencies Framework*. *The NPS: Better choices, Better health. Competencies required to prescribe medicines: putting quality use of medicines into practice* is available at www.nps.org.au/health-professionals/cpd/prescribing-competencies-framework.

General questions about the new registration standard and guidelines

Where can I find the new *Endorsement for scheduled medicines registration standard and guidelines*?

The new *Registration standard: Endorsement for scheduled medicines* (ESM registration standard) and *Guidelines: Endorsement for scheduled medicines* (ESM guidelines) are published on the [Board's website](#).

When do the new registration standard and guidelines take effect?

The new ESM registration standard and guidelines take effect on 1 August 2018.

Applications for endorsement for scheduled medicines submitted before 1 August 2018 will be assessed in accordance with the requirements of the current ESM registration standard and guidelines.

Applications for endorsement for scheduled medicines submitted on and from 1 August 2018 will be assessed in accordance with the requirements of the new ESM registration standard and guidelines, unless transitional arrangements apply.

No applications for endorsement for scheduled medicines under the current Pathway 1 will be accepted after 1 August 2018.

The Board has developed transitional arrangements for practitioners who, at 1 August 2018 are working towards an endorsement under Pathway B of the current registration standard but have not yet submitted an application for endorsement.

A flow chart summarising the transitional arrangements can be found on the [Board's website](#).

See the specific transitional arrangements FAQ for more information.

Who does the new *Endorsement for scheduled medicines registration standard* apply to?

The new ESM registration standard applies (from 1 August 2018) to all podiatrists and podiatric surgeons:

- applying to have their registration endorsed for scheduled medicines under section 94 of the National Law¹, or
- whose registration is endorsed for scheduled medicines.

What are the changes to the *Endorsement for scheduled medicines registration standard*?

The key changes to the registration standard are:

- the new ESM registration standard has clearer wording and structure, including a section with key definitions
- the new ESM registration standard includes explicit reference to the NPS *Medicinewise Prescribing Competencies Framework* which describes the competencies that health professionals require to prescribe medicines judiciously, appropriately, safely and effectively in the Australian healthcare system, and
- the new ESM registration standard has two pathways to endorsement – Pathway A and Pathway B.

New Pathway A

The current Pathway 1 has been replaced with a new contemporary Pathway A which will enable students who complete an accredited and approved program of study for endorsement for scheduled medicines to be qualified for endorsement on graduation.

The approved program of study for the new Pathway A will be aligned to the *NPS MedicineWise Prescribing Competencies Framework* and include education and training in podiatric therapeutics **as well as** clinically-supervised practice relevant to prescribing to ensure that graduates have the required competencies for endorsement for scheduled medicines. Entry-level podiatry programs as well as post graduate programs for registered podiatrists and podiatric surgeons will be able to apply for accreditation for the purpose of providing a qualification for the new Pathway A.

There are currently no approved programs that provide a qualification for the new Pathway A.

See the specific FAQ for the new Pathway A for more information.

¹Health Practitioner Regulation National Law as in force in each state and territory (the National Law).

New Pathway B

A pathway for registered podiatrists and podiatric surgeons has been kept, with some modifications (Pathway B).

The requirement to provide evidence of an approved qualification in podiatric therapeutics and 15 web-based case studies has been kept in the new Pathway B. However, the name of the case studies has been changed from 'web-based' case studies to 'online' case studies. The content of the 'web-based case studies' and the 'online case studies' is the same – it is just the name that has changed to better reflect the nature of these case studies.

The requirement to complete a period of supervised practice has been kept in the new Pathway B with some modifications:

- Pathway B requires the completion of a minimum of 150 hours of supervised practice within a 12 month period under the guidance of a mentor. The term 'mentor' has replaced the term 'supervisor'. The minimum of 150 hours of supervised practice involves observational clinical sessions with prescribing clinicians, meetings with the mentor, reflective practice, and the development of a portfolio of evidence.
- Instead of having to submit 40 log sheets to the Board for assessment, an applicant for endorsement under the new Pathway B is required to submit a 'portfolio of evidence' to demonstrate:
 - completion of a minimum of 150 hours of supervised practice within a 12-month period under the guidance of a mentor, and
 - that the applicant has the required prescribing competencies to safely prescribe the range of scheduled medicines on the Board's *National Podiatry Scheduled Medicines List* for the treatment of podiatric conditions.
- The portfolio must include at least 15 clinical studies and a reflective journal. The term 'clinical studies' has replaced the term 'log sheets'. However, practitioners have flexibility with regard to other types of evidence they may wish to include in the portfolio.

Two new administrative processes have been added under the new Pathway B:

1. before a practitioner begins their period of supervised practice they must apply to the Board to commence supervised practice. This involves submitting evidence of their approved qualification in podiatric therapeutics, completion of approved online case studies and a signed mentor agreement, and
2. during the period of supervised practice, a practitioner is required submit three clinical studies to the Board for initial assessment. The practitioner can continue their period of supervised practice while these case studies are being assessed. The practitioner must have three clinical studies assessed as satisfactory by the Board by the time they complete their period of supervised practice.

The new ESM registration standard is published on the [Board's website](#).

What are the changes to the *National Podiatry Scheduled Medicines List*?

The key changes to the *National Podiatry Scheduled Medicines List* (the list) are:

- the list has been collated into therapeutic classes of medicines and further sub-divided into sub-classes, in line with the Australian Medicines Handbook
- references to the schedule for each medicine on the list have been removed. However, definitions for the different schedules have been added to the introduction section of the list
- the list of resources in the introduction section of the list has been updated and collated into 'essential' and 'additional useful resources', with links to the relevant website for each reference
- specific notes for a number of medicines on the list have been replaced with overarching statements in the introduction of the list to support contemporary and appropriate use of scheduled medicines

For example, there are broad statements about:

- utilising resources which inform evidence-based practice and support contemporary and appropriate use of scheduled medicines
- using Therapeutic Goods Administration (TGA) approved routes, doses or indications according to the approved product information, and

- communication with the patient's nominated medical practitioner(s)
- some medicines have been removed from the list, such as Felypressin, Procaine, Mepivacaine and Temazepam. This is because they are either not available in the form specified in the current list or the product specified in the current list is not registered for podiatric use
- Naloxone has been added to the list but it is restricted to podiatric surgeons
- restriction limiting Ciprofloxacin to podiatric surgeons has been removed
- the specified dose for Oxycodone has been updated
- the restriction for Amethocaine (tetracaine) has been updated to 'Skin preparation - for use in hospital and podiatry practice setting only.' The restriction makes it clear that the topical preparation that is suitable for podiatry is the skin preparation rather than topical eye drops
- the introduction to the rheumatological drugs section of the list includes a statement about the risks associated with nonsteroidal anti-inflammatory drugs (NSAID's)
- the restriction 'Injection limited to local deposition' for the corticosteroids on the list has been removed and replaced with the following restriction:

Injection limited to treatment of podiatric conditions where there is evidence or best practice recommendations to support its use

- the additional notes for 'Other antifungals' (Terbanifine and Griseofulvin) has a statement about communication with a medical practitioner with regard to who takes responsibility for monitoring the systemic status of the patient
- Aspirin is now only included in the non-opioid analgesics section of the list
- the restrictions/additional notes for Methoxyflurane have been updated to:

Short-term analgesia and may be of use in acute trauma, pre-injection and wound dressing, and should only be used where appropriate resuscitation facilities are available, and

- a statement about anti-microbial stewardship has been added to the introduction to the anti-infectives section of the list.

The *National podiatry scheduled medicines list* is attached to the new ESM registration standard, published on the [Board's website](#).

What are the changes to the *Guidelines: Endorsement for scheduled medicines?*

The new ESM guidelines reflect the requirements of the new ESM registration standard. They include information about:

- the prescribing competencies required for endorsement for scheduled medicines
- the Board's requirements and procedures for endorsement for scheduled medicines
- for the new Pathway B
 - requirements for mentors, and
 - the portfolio of evidence to be submitted to the Board to demonstrate competency for endorsement for scheduled medicines, and
- ongoing requirements for podiatrists and podiatric surgeons with endorsement for scheduled medicines, including information about clinical practice requirements, maintaining competence, and useful references and resources.

The new ESM guidelines are published on the [Board's website](#).

What are the changes to the *Clinical practice guidelines: Endorsement for scheduled medicines?*

As well as providing information about communication with other members of the patient's treating team, the new *Clinical practice guidelines: Endorsement for scheduled medicines* (clinical practice guidelines) also includes information about:

- *Quality Use of Medicines (QUM)*
- adverse event reporting
- prescriptions
- supply of scheduled medicines, and
- antimicrobial stewardship.

The clinical practice guidelines can be found at Appendix 3 to the new ESM guidelines, published on the [Board's website](#).

Are there templates to support the new registration standard?

Yes, templates will be available on the Endorsement for scheduled medicines page of the Board's website when the new ESM registration standard takes effect on 1 August 2018.

Will the application form be changed?

The application form for endorsement for scheduled medicines will be updated to reflect the new requirements. Other relevant forms will be published for practitioners using the new Pathway B, including an application to commence supervised practice form.

The new forms will be available on the *Forms* page of the Board website when the new ESM registration standard takes effect on 1 August 2018.

[FAQ for Pathway A](#)

How do I meet the requirements for Pathway A?

You must have an approved qualification for endorsement for scheduled medicines or another qualification that the Board considers to be substantially equivalent to, or based on similar competencies to, an approved qualification for endorsement for scheduled medicines.

An approved qualification is obtained by completing a podiatry program of study that has been accredited by the accreditation authority for the podiatry profession, and subsequently approved by the Board as providing a qualification for the purpose of endorsement for scheduled medicines under Pathway A of the new ESM registration standard. The program of study will be aligned to the *NPS MedicineWise Prescribing Competencies Framework* and includes education and training in podiatric therapeutics, as well as clinically-supervised practice related to prescribing to ensure that graduates have the required competencies for endorsement for scheduled medicines.

There are currently no approved programs of study for the new Pathway A.

The Board's *Registration standard: Recency of practice* will apply to your application for endorsement for scheduled medicines under this pathway unless you are a recent graduate.

Recent graduate is defined in the new ESM registration standard as:

A person applying for endorsement for scheduled medicines under Pathway A on the basis of an approved qualification for endorsement for scheduled medicines (as defined in this registration standard and the ESM guidelines) that was awarded not more than 12 months prior to the date of their application.

This means that if you don't apply for endorsement for scheduled medicines under Pathway A within 12 months of successfully completing the requirements for the approved qualification for endorsement for scheduled medicines, you will have to meet the requirements of the Board's *Registration standard: Recency of practice* with respect to recent practice related to the endorsement for scheduled medicines.

Further information about the new Pathway A can be found in the new ESM registration standard and guidelines, published on the [Board's website](#).

Are there any programs of study that have been approved by the Board for the new Pathway A?

No, currently there are no programs of study that have been approved for the new Pathway A.

The accreditation authority for the podiatry profession, the Australian and New Zealand Podiatry Accreditation Council (ANZPAC), is currently reviewing the accreditation standards. The new accreditation standards, once approved by the Board will set the standards that education providers need to meet to be accredited for the new Pathway A.

Entry-level podiatry programs as well as post graduate programs for registered podiatrists and podiatric surgeons will be able to apply for accreditation for the purpose of providing a qualification for the new Pathway A.

When a program of study has been accredited by ANZPAC and then approved by the Board as providing a qualification for the new Pathway A, the name of the program will be published in the online list of approved programs that can be found on the [accreditation](#) page of the Board's website.

FAQ for Pathway B

What are the required prescribing competencies that I must demonstrate for endorsement for scheduled medicines?

The prescribing competencies required for endorsement for scheduled medicines are the prescribing competencies described in the NPS MedicineWise *Prescribing Competencies Framework*. *The NPS: Better choices, Better health. Competencies required to prescribe medicines: putting quality use of medicines into practice* are available at www.nps.org.au/health-professionals/cpd/prescribing-competencies-framework.

You need to be able to demonstrate that you meet each of the competencies described in the NPS MedicineWise *Prescribing Competencies Framework* and that you have the related podiatric-specific knowledge, skills and behaviours for each competency.

How do I meet the requirements for Pathway B?

Pathway B provides a pathway for registered podiatrists and podiatric surgeons to meet the requirements for endorsement for scheduled medicines through a combination of:

- an approved qualification in podiatric therapeutics (or another qualification that the Board considers to be substantially equivalent to, or based on similar competencies to, an approved qualification in podiatric therapeutics)
- successful completion of approved online case studies relevant to the endorsement
- a period of supervised practice in Australia under the guidance of a mentor, and
- development of a portfolio of evidence for assessment by the Board.

There are also steps you must complete before commencing your period of supervised practice and to progress during your period of supervised practice.

Information on the requirements for pathway B can be found in the ESM registration standard and guidelines, published on the [Board's website](#).

How do I obtain an approved qualification in podiatric therapeutics?

An approved qualification in podiatric therapeutics can be obtained by completing a program of study that has been accredited by the accreditation authority for the podiatry profession, and approved by the Board as providing a qualification in podiatric therapeutics for the purpose of endorsement for scheduled medicines.

It includes education and training in podiatric therapeutics but **does not** include the clinically supervised practice that is required for endorsement for scheduled medicines.

The qualification must be current (not more than seven years old) at the time of applying to the Board to commence supervised practice.

The Board's approved programs of study in podiatric therapeutics are published on the [accreditation](#) page of the Board's website.

You must submit evidence of your approved qualification with your application to the Board to commence supervised practice.

What are approved online case studies?

Approved online case studies are case studies relevant to endorsement for scheduled medicines delivered online by a university or other approved education provider and approved by the Board. These case studies include an assessable component.

The approved online case studies must be completed after you have obtained your approved qualification in podiatric therapeutics and not more than three years before first applying for endorsement for scheduled medicines.

Information about approved online case studies is in the ESM guidelines, published on the [Board's website](#).

You must submit evidence of having successfully completed 15 approved online case studies when you apply to the Board to commence supervised practice. The evidence required will usually be in the form of a certificate from the education provider certifying that you have successfully completed the online case studies.

Online case studies are called 'web-based case studies' in the current ESM registration standard. The content of the 'web-based case studies' and the 'online case studies' is the same – it is just the name that has changed to better reflect the nature of these case studies.

The Board will accept 'web-based case studies' as part of an application for endorsement under Pathway B of the new ESM registration standard as long as they are current - i.e. completed not more than three years before applying to commence supervised practice.

What do I need to do before I can start my period of supervised practice under Pathway B?

Before you can start your period of supervised practice under Pathway B you must:

1. be registered as a podiatrist or podiatric surgeon in Australia
2. hold an approved qualification in podiatric therapeutics (or another qualification that the Board considers to be substantially equivalent to, or based on similar competencies to, an approved qualification in podiatric therapeutics)
3. have successfully completed 15 approved online case studies
4. have a signed agreement with a mentor
5. have applied to the Board to commence supervised practice and submitted the following to the Board for approval:
 - evidence that you hold an approved qualification in podiatric therapeutics or equivalent (that is not more than seven years old)
 - evidence of having successfully completed 15 approved online case studies (completed not more than three years before), and
 - a signed mentor agreement, and
6. have been advised in writing that the Board is satisfied you have met the prerequisites for supervised practice.

Information about these requirements is in the ESM registration standard and guidelines, published on the [Board's website](#).

Why do I have to complete a period of supervised practice?

The purpose of completing a period of supervised practice under the guidance of a mentor is to further develop your capacity to carry out best practice in prescribing, which will build on the profession specific knowledge that you have gained through attaining an approved qualification in podiatric therapeutics and through completing approved online case studies.

What does the period of supervised practice involve?

Supervised practice for the purpose of Pathway B is the minimum of 150 hours of supervised practice completed in Australia within a 12-month period under the guidance of a mentor. It involves you attending observational clinical sessions with experienced health practitioners (attending clinician) who can prescribe scheduled medicines in a range of prescribing environments. It also encompasses reflective practice and the meetings with your mentor, culminating in a portfolio of evidence.

The period of supervised practice and portfolio of evidence must meet the requirements of the new ESM registration standard and ESM guidelines.

The supervised practice must involve podiatric pathology and be sufficient to allow substantial exposure to podiatric conditions, interventions and their management through the use of scheduled medicines.

Information about the requirements for supervised practice under Pathway B is in the new ESM registration standard and guidelines, published on the [Board's website](#).

What is the minimum 150 hours of supervised practice made up of?

You must complete at least 150 hours of supervised practice in a 12 month period. It must be completed within 12 months of the date that you are advised in writing that the Board is satisfied you have met the prerequisites for supervised practice.

The minimum 150 hours is made up of:

- the observational sessions with experienced health practitioners who can prescribe scheduled medicines (attending clinician)
- meetings with your mentor
- reflection, and
- development of your portfolio of evidence.

The requirement for the minimum 150 hours to be completed within 12 months provides flexibility for practitioners and will accommodate those who are in a position to complete the minimum 150 hours in less than 12 months, as well as those who may need the full 12 months.

Information about the requirements for supervised practice under Pathway B is in the new ESM registration standard and guidelines, published on the [Board's website](#).

What if I can't complete the requirements for supervised practice in 12 months?

The Board may grant an extension of time to complete the period of supervised practice in exceptional circumstances. A Board policy on when an extension may be granted is published on the [Endorsement for scheduled medicines](#) page of the Board's website.

An application form for an extension to the period of supervised practice will be available on the *Forms* page from the date the new registration standard takes effect on 1 August 2018.

What is the role of the mentor?

Your mentor oversees your period of supervised practice and has a key role in ensuring you understand the requirements for safe and effective prescribing of scheduled medicines for the treatment of podiatric conditions.

Through their knowledge and experience, your mentor provides support for the development of your skills to safely prescribe scheduled medicines.

Whilst your mentor is not necessarily involved in the observational clinical sessions you attend during your period of supervised practice (although they may be), your mentor will provide guidance to you during subsequent discussion of and reflection on those clinical experiences. Your mentor will also facilitate and/or guide you in finding suitable observational clinical placements.

It is essential that you have regular meetings with your mentor. Whilst it is preferable that these meetings are face-to-face, if this is not possible, due to unavailability of a suitable mentor in your area, they can be conducted by teleconference or other means of communication, such as web conferencing.

The purpose of the meetings is to discuss every observational clinical session you have attended and review and discuss the evidence that you wish to include in your portfolio. Each piece of evidence for your portfolio should be reviewed by and discussed with your mentor as soon as practicable after you have completed it. This will enable your mentor to provide constructive feedback on any identified prescribing errors or other errors. It will also enable your mentor to be confident that your clinical experience relates, or is relevant, to podiatric interventions and contributes to the diverse scenarios required for the Board to consider your application for endorsement for scheduled medicines.

Your mentor may also assist you to determine what additional evidence you may need to include in your portfolio and discuss any problems or issues relating to your period of supervised practice in a supportive environment.

Your mentor is required to progressively sign and date each piece of evidence in your portfolio. Verification by your mentor of the content of the evidence in your portfolio will help ensure that your portfolio accurately reflects that you have completed the Board's requirements for supervised practice and have met the required prescribing competencies.

Once you have completed your period of supervised practice, your mentor is required to review your portfolio of evidence and if satisfied that you have sufficient evidence to demonstrate that you have the required competencies for endorsement for scheduled medicines, your mentor will complete the *Certification of completion of supervised practice form*.

The form will be available on the *Forms* page of the Board's website from 1 August 2018 when the new registration standard takes effect.

Information about mentors, including the role and responsibilities of a mentor, is in Appendix 1 of the new ESM guidelines, published on the [Board's website](#).

Who can be my mentor?

Your mentor can be either:

- a podiatrist or podiatric surgeon whose registration has been endorsed for scheduled medicines for **at least two years**, or
- a registered medical practitioner.

Your mentor **must** be experienced and knowledgeable in the use of scheduled medicines for the treatment of podiatric conditions, with a minimum of **two years** clinical experience in the use and prescribing of scheduled medicines.

The relationship between you and your mentor must be professional. This means that your mentor should not be someone who is a close relative or friend, or where there is another potential conflict of interest that could impede objectivity and/or interfere with your achievement of learning outcomes or relevant experience.

Your mentor must understand the requirements for Pathway B as set out in the new ESM registration standard and new ESM guidelines, as well as the *National podiatry scheduled medicines list* (Attachment A to the new ESM registration standard) and the NPS MedicineWise *Prescribing Competencies Framework* and Quality Use of Medicines (QUM).

Further information about the requirements for a mentor is in Appendix 1 of the new ESM guidelines, published on the [Board's website](#).

Who cannot be my mentor?

Your mentor must meet the requirements for a mentor as set out in the ESM guidelines at Appendix 1. Please see the previous answer.

The relationship between you and your mentor must be professional. This means that your mentor should not be someone who is a close relative or friend, or where there is another potential conflict of interest that could impede objectivity and/or interfere with your achievement of learning outcomes or relevant experience.

You cannot have a mentor whose registration or endorsement is subject to a restriction (such as condition(s) or an undertaking) which restricts their prescribing scope of practice, and limits access to the full range of medicines in the *National podiatry scheduled medicines list*.

If a mentor has restrictions of this nature placed on his or her registration during the period of supervised practice a new mentor must be engaged. You must have a signed mentor agreement in place with a new mentor and submit the new agreement to the Board as soon as possible after it is signed by the mentor.

A change of mentor form will be available on the *Forms* page of the Board's website from 1 August 2018 when the new ESM registration standard takes effect.

What if my mentor is no longer available or suitable to mentor me during my period of supervised practice?

If you need to change mentors because your mentor is no longer available or no longer suitable to be your mentor, you must have a signed mentor agreement in place with a new mentor.

The new mentor agreement must be submitted to the Board as soon as possible after it is signed by the mentor.

A change of mentor form will be available on the *Forms* page of the Board's website from 1 August 2018 when the new ESM registration standard takes effect.

What is an attending prescribing clinician?

The attending prescribing clinician for the clinical sessions you are observing will be an experienced health practitioner who can prescribe scheduled medicines.

This may be your mentor or another health practitioner. Examples of prescribing clinicians include a podiatrist or podiatric surgeon whose registration is endorsed for scheduled medicines, a GP or another medical specialist, specialist nurse practitioner, hospital medical officer, or a pharmacist.

The use of more than one prescribing clinician is encouraged as this may assist you to obtain exposure to a mix of clinical experiences. It will also enable you to benefit from different perspectives on prescribing, according to different contexts.

Information about the attending prescribing clinician is in the new ESM guidelines, published on the [Board's website](#).

What is my role at the observational clinical sessions that I must attend as part of my supervised practice?

The Board expects that rather than just being a passive observer for these clinical sessions you will actively observe the clinical decision-making for the particular patient and then discuss with the attending prescribing clinician after the consultation. You will also have a subsequent discussion and reflection on each observational session with your mentor.

What is the purpose of a portfolio of evidence?

The purpose of the portfolio of evidence, which is submitted with your application for endorsement for scheduled medicines, is to demonstrate to the Board that you have the required prescribing competencies to have your registration endorsed for scheduled medicines and that you have met the Board's requirements for supervised practice.

What is included in my portfolio of evidence?

You will progressively develop a portfolio of evidence during your period of supervised practice. This will be done in consultation with your mentor. The portfolio allows you to describe and provide evidence of your learning through your observational clinical experience, related education, interaction with your mentor and self-reflection.

The evidence in your portfolio must demonstrate clearly and in detail that you have dealt with a diverse range of patient cases and clinical settings involving the use of scheduled medicines in the management of podiatric conditions, and demonstrate that you have the required prescribing competencies to be able to

safely and effectively administer, obtain, possess, prescribe, sell, supply or use the scheduled medicines in the *National podiatry scheduled medicines list* for the treatment of podiatric conditions.

Your portfolio **must include** at least 15 de-identified clinical studies and a reflective journal, which includes a log of the activities you have completed during your period of supervised practice.

It is up to you to decide what additional types of evidence you include in your portfolio to demonstrate that you have met each of the competencies described in the NPS MedicineWise *Prescribing Competencies Framework*, and that you have the related podiatric-specific knowledge, skills and behaviours for each competency.

Some pieces of evidence may be used to demonstrate that you have met a number of the prescribing competencies. You may use multiple pieces of evidence to address any of the competencies.

Each piece of evidence in your portfolio must be your own work and be signed and dated by you and your mentor. Each piece of evidence must also be referenced to one or more of the required prescribing competencies.

Information on the evidence to be included in your portfolio, including examples of evidence, is set out in Appendix 2 of the new ESM guidelines, published on the [Board's website](#).

How do I present the evidence in my portfolio?

The evidence in your portfolio should be clearly presented, labelled and accompanied by an evidence matrix to show which piece of evidence demonstrates what competency.

A template evidence matrix that you can use will be published on the Endorsement for scheduled medicines page of the Board's website from 1 August 2018, when the new ESM registration standard and guidelines take effect.

What are clinical studies?

During your period of supervised practice you will develop clinical studies to reflect a variety of observational clinical placements. You must include at least 15 clinical studies in your portfolio of evidence.

Clinical studies are an important means of demonstrating your knowledge and skills and your clinical reasoning in relation to a particular case.

Each clinical study you include in your portfolio of evidence must be prepared as though you were the prescribing practitioner. It must be comprehensive and clearly show your patient assessment and clinical decision making processes, and demonstrate your knowledge and critical thinking about the use of scheduled medicines in your clinical practice.

The clinical studies must meet the specific requirements for clinical studies which are described in detail in Appendix 2 of the new ESM guidelines.

A template for a clinical study will be published on the Endorsement for scheduled medicines page of the Board's website from 1 August 2018 when the new ESM registration standard and guidelines take effect.

A clinical study may be used as evidence of a number of the required prescribing competencies.

As required by the new ESM registration standard, three of the clinical studies must be submitted to the Board for assessment after you have completed at least 25 hours of supervised practice.

Further information about the initial assessment is in the new ESM guidelines (see 2.2.7 *Assessment - Initial assessment of clinical studies*), published on the [Board's website](#).

Why do I have to submit three clinical studies for initial assessment?

The requirement to submit three clinical studies for assessment when you have completed a minimum of 25 hours of supervised practice provides an opportunity for the Board to provide feedback to you in the early part of your period of supervised practice, and provide you with an opportunity to reflect on the feedback, discuss it with your mentor and address any concerns before you complete your period of supervised practice.

The clinical studies must meet the requirements set out in Appendix 2 of the new ESM guidelines and be accompanied by a brief report from you which outlines which of the prescribing competencies are demonstrated in each clinical study.

Clinical studies that have been assessed as satisfactory by the Board will be returned to you, and you must resubmit them in your portfolio to the Board when you apply to have your registration endorsed for scheduled medicines at the end of the period of supervised practice. These clinical studies are counted towards the minimum of 15 that you are required to submit in the portfolio.

Further information about the clinical studies and the initial assessment is in the new ESM guidelines, published on the [Board's website](#).

What if the clinical studies I submit for initial assessment are assessed as unsatisfactory?

Any clinical studies that are assessed during the initial assessment as unsatisfactory will be returned to you with a clear statement about why the particular clinical study was unsatisfactory. This provides you with an opportunity to reflect on the feedback you have received, discuss it with your mentor and then apply that learning to another clinical study.

You will be given an opportunity to submit one further clinical study to replace each unsatisfactory clinical study. In other words, you can present up to three new clinical studies for initial assessment.

You will not be allowed to re-submit any clinical study you have previously submitted.

A total of three clinical studies must be assessed as satisfactory by the Board before you finish your period of supervised practice.

If six clinical studies are assessed as unsatisfactory during the initial assessment, the Board may decide that you must undertake further education before continuing with any further supervised practice.

Further information about the requirements for clinical studies is in Appendix 3 of the new ESM guidelines, published on the [Board's website](#).

What is required for a reflective journal?

The reflective journal enables you to demonstrate that you have completed a minimum of 150 hours of supervised practice within a 12-month period, and that you have reflected on your prescribing practice during your period of supervised practice.

It must include a log of the activities that you have undertaken during your period of supervised practice. The attending prescribing clinician at each observational clinical session you have attended must sign and date the entry in the log for each attendance.

A sample log of activities will be published on the Endorsement for scheduled medicines page of the Board's website from 1 August 2018, when the new ESM registration standard and guidelines take effect.

Examples of what can be included in the reflective component of the journal are in Appendix 2 of the new ESM guidelines, published on the [Board's website](#).

When can I submit my application for endorsement?

You may submit your application to the Board to have your registration endorsed for scheduled medicines under Pathway B, together with your portfolio of evidence when:

- a. you have completed your period of supervised practice, and
- b. three clinical studies have been assessed as satisfactory by the Board.

Your application must be submitted within 12 months of completing your period of supervised practice.

FAQ for mentors - Pathway B

What is the role of a mentor?

The role of a mentor of a podiatrist or podiatric surgeon working towards endorsement for scheduled medicines is an important one. As a mentor, you will oversee the practitioner's period of supervised

practice and have a key role in ensuring they understand the requirements for safe and effective prescribing of scheduled medicines for the treatment of podiatric conditions. Through your knowledge and experience in prescribing, you will provide support for the development of their skills to safely and effectively prescribe scheduled medicines.

You may be involved in the observational clinical sessions that the practitioner attends during their period of supervised practice but you don't have to be. You will provide guidance and feedback to the practitioner during subsequent discussion of and reflection on those clinical experiences. You will also facilitate and/or guide the practitioner in finding suitable observational clinical placements.

You will also review and discuss each piece of evidence that the practitioner would like to include in their portfolio of evidence for submission to the Board, to demonstrate they have met the required prescribing competencies. This will enable you to provide constructive feedback on any identified prescribing errors or other errors. It will also enable you to be confident that their clinical experience relates, or is relevant, to podiatric interventions and contributes to the diverse scenarios required for an application for endorsement for scheduled medicines.

You may also assist the practitioner to determine what additional evidence they may need to include in their portfolio, and discuss any problems relating to their period of supervised practice in a supportive environment.

Information about mentors, including the role of a mentor, is in Appendix 1 of the new ESM guidelines, published on the [Board's website](#).

What are my responsibilities as a mentor?

To be a mentor you must be experienced and knowledgeable about the use of scheduled medicines for the treatment of podiatric conditions, with a minimum of two years of clinical experience in the use and prescribing of scheduled medicines.

In assessing whether you have the skills and time to take on the role of mentoring a podiatrist or podiatric surgeon, you should consider the description of the role as set out in Appendix 1 of the new ESM guidelines and take into account the time commitment for the role.

You must be familiar with and understand the Board's new ESM registration standard, new ESM guidelines, the *National podiatry scheduled medicines list* (Attachment A to the new ESM registration standard) and the ESM clinical practice guidelines. You must also understand the NPS MedicineWise *Prescribing Competencies Framework*, and Quality Use of Medicines (QUM).

It is essential that you have adequate time for regular meetings with the practitioner you are mentoring. The purpose of the meetings is to discuss every observational clinical session the practitioner has attended and review and discuss the evidence that they wish to include in their portfolio. Whilst it is preferable that these meetings are face-to-face, if this is not possible, they can be conducted by teleconference or other means of communication, such as web conferencing.

Each piece of evidence for the portfolio should be reviewed by you and discussed with the practitioner as soon as practicable after they have completed it. This will enable you to provide constructive feedback on any identified prescribing errors or other errors and also enable you to be confident that the practitioner's clinical experience relates, or is relevant to podiatric interventions and contributes to the diverse scenarios required for an application for endorsement for scheduled medicines.

You may also assist the practitioner to determine what additional evidence they may need to include in their portfolio, and discuss any problems or issues relating to their period of supervised practice in a supportive environment.

You must progressively sign and date each piece of evidence that is to be included in the practitioner's portfolio. Your verification of the content of the evidence in the practitioner's portfolio will help ensure that their portfolio accurately reflects that they have completed the Board's requirements for supervised practice and have met the required prescribing competencies.

Once the practitioner has completed their period of supervised practice, it is your responsibility to review their portfolio of evidence. If you are satisfied that they have sufficient evidence to demonstrate the required competencies for endorsement for scheduled medicines, you must complete the *Certification of completion of supervised practice* form, which will be published on the Endorsement for scheduled

medicines page of the Board's website from 1 August 2018 when the new ESM registration standard and guidelines take effect.

Further information about mentors, including the responsibilities of a mentor can be found in Appendix 1 of the new ESM guidelines, published on the [Board's website](#).

FAQ on transitional arrangements

When do the transitional arrangements apply from?

The transitional arrangements apply from 1 August 2018, which is the date the new ESM registration standard and guidelines take effect.

Why has the Board developed transitional arrangements for the new ESM registration standard?

The Board has developed transitional arrangements to ensure a smooth transition to the new ESM registration standard and to ensure that practitioners who are already working towards an endorsement for scheduled medicines under Pathway 2 of the current ESM registration standard are not unduly disadvantaged.

Who do the transitional arrangements apply to?

The transitional arrangements developed by the Board apply to podiatrists and podiatric surgeons who, at 1 August 2018, are working towards an endorsement under Pathway B of the current registration standard but have not yet submitted an application for endorsement.

Different arrangements will apply, depending on how far a practitioner has progressed under Pathway 2.

The transitional arrangements apply to practitioners who:

- have an approved qualification in podiatric therapeutics
- have successfully completed web-based case studies, and
- may or may not have commenced a period of supervised practice

There are different arrangements for:

- practitioners who **have started** a period of supervised practice under Pathway 2 of the current ESM registration standard, and
- practitioners who **have not started** a period of supervised practice under Pathway 2 of the current ESM registration standard.

A flow chart summarising the transitional arrangements can be found on the [Board's website](#).

For more information about the transitional arrangements, see the four questions below and choose the scenario that reflects your circumstances.

1. [I have started a period of supervised practice under Pathway 2 of the current ESM registration standard and want to apply for endorsement under that pathway – what do I need to do?](#)

If, at 1 August 2018 you have started a period of supervised practice in accordance with Pathway 2 of the current ESM registration standard and have not yet submitted an application for endorsement, but want to apply under Pathway 2:

- By **1 September 2018**, you must submit to the Australian Health Practitioner Regulation Agency (AHPRA):
 - evidence of your approved qualification in podiatric therapeutics (not more than seven years old)
 - evidence of successful completion of web-based case studies (completed not more than three years ago), and
 - a signed supervisory agreement (dated and signed before 1 August 2018).

A form for submitting these documents will be published on the Endorsement for scheduled medicines page of the Board's website on 1 August 2018, when the new ESM registration standard takes effect.

- You have **12 months** from the date of the signed supervisory agreement to complete the requirements of the current Pathway 2 and submit your application for endorsement, together with the required supporting documentation, including 40 log sheets for assessment.
- No extensions to the period of supervised practice will be granted.
- Applications submitted under this transitional arrangement will be assessed against the requirements for Pathway 2 of the current ESM registration standard.
- No applications under this transitional pathway will be accepted after 1 August 2019.

A flow chart summarising the transitional arrangements can be found on the [Board's website](#).

2. [I have started a period of supervised practice under Pathway 2 of the current ESM registration standard and want to apply for endorsement under Pathway B of the new ESM registration standard – what do I need to do?](#)

If, at 1 August 2018 you have started a period of supervised practice in accordance with Pathway 2 of the current ESM registration standard and have not yet submitted an application for endorsement, but want to apply under Pathway B of the new ESM registration standard:

- You do not need to apply to commence supervised practice, but you must submit to AHPRA by 1 September 2018:
 - evidence of your approved qualification in podiatric therapeutics (not more than seven years old)
 - evidence of successful completion of web-based case studies (completed not more than three years ago), and
 - a signed supervisory agreement (dated and signed before 1 August 2018).

A form for submitting these documents will be published on the Endorsement for scheduled medicines page of the Board's website on 1 August 2018, when the new ESM registration standard takes effect.

- If you will be **applying for endorsement** under this transitional arrangement:

- **before 1 December 2018** you do not have to submit any clinical studies for initial assessment, and
- **after 1 December 2018** you must submit three clinical studies for initial assessment in accordance with the requirements of the new ESM registration standard and guidelines.

- You have **12 months** from the date of the signed supervisory agreement to complete the requirements of the new Pathway B and submit your application for endorsement for scheduled medicines, together with the required supporting documentation, including a portfolio of evidence.
- Your application and your portfolio of evidence will be assessed against the requirements for Pathway B of the new ESM registration standard and the updated *National Podiatry Scheduled Medicines List* attached to that standard.
- No applications under this transitional pathway will be accepted after 1 August 2019.

A flow chart summarising the transitional arrangements can be found on the [Board's website](#).

3. [I have a qualification in podiatric therapeutics, have completed web-based case studies, and have a signed supervisory agreement but have not started a period of supervised practice – what do I need to do?](#)

- You must meet **all of the requirements for Pathway B** of the new ESM registration standard, including applying to commence supervised practice and submitting the following documents:
 - evidence of approved qualification in podiatric therapeutics (must be current – i.e. not more than seven years old)
 - evidence of successful completion of web-based case studies (must be current – i.e. completed not more than three years before applying to commence supervised practice), and
 - signed supervisory agreement (dated and signed before 1 August 2018).

- The Board will accept evidence of completion of 'web-based case studies' under the new Pathway B as long as the web-based case studies are current – i.e. completed not more than three years before applying to commence supervised practice.
- The Board will accept a 'signed supervisory agreement' under the new Pathway B for 12 months after the commencement date of the new ESM registration standard
- You must not start a period of supervised practice until advised in writing that the Board is satisfied the prerequisites for supervised practice have been met.

4. I have a qualification in podiatric therapeutics and have completed web-based case studies but do not have a signed supervisory agreement and have not started a period of supervised practice – what do I need to do?

- You must meet **all of the requirements for Pathway B** of the new ESM registration standard, including applying to commence supervised practice and submitting the following documents:
 - evidence of approved qualification in podiatric therapeutics (must be current – i.e. not more than seven years old)
 - evidence of successful completion of web-based case studies (must be current – i.e. completed not more than three years before applying to commence supervised practice), and signed mentor agreement.
- The Board will accept evidence of completion of 'web-based case studies' under the new Pathway B as long as the web-based case studies are current – i.e. completed not more than three years before applying to commence supervised practice.
- You must not start a period of supervised practice until advised in writing that the Board is satisfied the prerequisites for supervised practice have been met.