

Response template for the public consultation on the proposed change to the protected title for the podiatry speciality of podiatric surgery

September 2024

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Profession: Podiatrist
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☐ Other: Click or tap here to enter text.
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1. Do you agree with the proposal to change the protected title for the podiatry specialty of podiatric surgery to 'surgical podiatrist' to make it clear that the practitioner is a specialist podiatrist who performs surgery? Why or why not?

No I do not agree with the proposed change of name. I principally disagree with it based on the level of training required to become a Podiatric Surgeon. I believe that given Podiatry is a 4 year degree and Surgical training is and additional 1-2 of masters and 3-4 years of surgical training or 4-5 of surgical training within WA stream that this represents training within a new stream of work. Calling this a "Surgical Podiatrist" would be equivalent to calling an orthopaedic surgeon a "Surgcial GP". Both have attended extensive further education and a title that reflects this is appropriate.

2. Do you have an alternative suggestion for the protected title? If yes, how would your suggested title achieve the same result as 'surgical podiatrist' in providing greater clarity to consumers?

I believe Podiatric Surgeon does fully represent the profession and should provide proper clarity to consumer **when discussed properly with referrer**. There is some onus on the referral base in Podiatrists and General practitioners to properly discuss referral pathways with patients. A change of name and essentially reversing the name with synonyms does little to properly educate patients and consumers.

I do believe that a change to Surgical Podiatrist" stands to be more misleading to the consumer in how it may misrepresent the level of training required to be in that professional space.

3. What are the potential impacts for consumers of the proposed change in title?

It is my understanding that a change in title would undermine the current Podiatric surgical group and may lead to a decrease in acceptance of services moving forward. It is my understanding that podiatric surgery as a profession is completely committed to implementing the training and education changes set out in the independent review. With this progression moving forward Podiatric surgery provides a very real and effective alternative to orthopaedics.

Currently as a professional getting patients into Orthopaedic pathways can be difficult and timeframes can blow out significantly. By decreasing uptake in Podiatric Surgery I believe the end consumer may suffer more substantial complication given the time delays to seeking and getting into services. I have multiple examples of this as a professional where in waiting for private orthopaedic review patients have deteriorated leading to higher risk treatment and longer recovery times.

4. What are the potential impacts, including potential costs, for podiatric surgeons of the proposed change in title?

Again, it is my understanding that a change in title may lead to a decrease in the uptake of these services and have notable financial impacts to the profession. As a practitioner who regularly refers to Podiatric surgeons I am constantly up against dialogue from general practice and orthopaedic surgery against referral to the Podiatric stream. My largest concern toward a name change is that this will be used to further degrade the profession and will limit patients confidence is using these services.

5. Are there any unintended consequences the Board might not have considered in relation to the proposed change of title?

- A decrease in uptake of services
- An increase in public and private health orthopaedic demand and increased waiting times. (Much of which are already excessively high)
- An increase in hospitalisations from untreated conditions while waiting for orthopaedic input.
- A decrease in profile of the profession
- A change of title may decrease the current drive to better the education standard and training for Podiatric surgery. Given the progress of the profession in recent years and the drive to implement better education standards I firmly believe that Podiatric surgery as a profession are committed to providing care that exceeds any expectation or other profession in the space. Their contribution to education in the podiatric sector is testament to this. I would hate to see a change in title affect this drive and commitment to live up to the name "Surgeon"

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1. Do you agree with the proposal to change the protected title for the podiatry specialty of podiatric surgery to 'surgical podiatrist' to make it clear that the practitioner is a specialist podiatrist who performs surgery? Why or why not?
I believe the correct title should be Podiatric Surgeon.
2. Do you have an alternative suggestion for the protected title? If yes, how would your suggested title achieve the same result as 'surgical podiatrist' in providing greater clarity to consumers?
Podiatric Surgeon is the best title choice in my opinion.
3. What are the potential impacts for consumers of the proposed change in title?
Many consumers may not understand the qualifications and training a Podiatric Surgeon has attained to enable them to operate on patients should their well earned title be downgraded. I have had a very negative experience with an Orthopaedic Surgeon about a toe problem that is impacting my life. The surgeon misinformed me, at no stage telling me of the negative impact a particular procedure would have on my toes, foot and balance. He was arrogant, ignorant and didn't listen to my realistic request. I searched on line for a foot specialist, not an orthopaedic surgeon who 'tacks these jobs on at the end of the day'. I found a Podiatric Surgeon in another city who was polite, friendly, explained all the negative things that would occur should I have a particular procedure. He informed me of a procedure that would not only fix my problem, but have no negative repercussions. Podiatric Surgeons study extensively to be able to operate on feet and ankles with knowledge and precision. I contacted my Podiatric Surgeons rooms to make my initial appointment because, knowing by his title, that he had studied extensively, and he would be able to offer me a safe, successful and long term solution to my foot problem.
4. What are the potential impacts, including potential costs, for podiatric surgeons of the proposed change in title?
Downplaying a specialists well earned title could negatively impact their business, their ability to help people such as myself, who sought out a Podiatric Surgeon in particular, as my regular podiatrist, although lovely, doesn't have the appropriate training to be able to operate. Feet are parts of the human body comprising of many, tiny bones and Podiatric Surgeons study extensively to understand feet and how to correctly treat them in a surgical situation.

5. Are there any unintended consequences the Board might not have considered in relation to

the proposed change of title?

Yes, people not realising that these specialists ie Podiatric Surgeons, named something else, would still be the same highly qualified specialists but their changed title might very much downplay their knowledge, training, study and expertise.



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1. Do you agree with the proposal to change the protected title for the podiatry specialty of podiatric surgery to 'surgical podiatrist' to make it clear that the practitioner is a specialist podiatrist who performs surgery? Why or why not?

I disagree with the proposal to change the protected title from "podiatric surgeon" to "surgical podiatrist" because it could create more confusion and inadvertently reduce the perceived expertise of practitioners within the field.

The title "podiatric surgeon" is consistent with international standards and accurately reflects the advanced training, qualifications, and scope of practice of these professionals. For example, in the UK, public information campaigns have been highly effective in ensuring that the public is well-informed about the qualifications and training of podiatric surgeons, distinguishing them clearly from other health professionals without requiring a title change. This approach maintains clarity while preserving professional identity and recognition.

Furthermore, altering the title could unfairly advantage orthopedic surgeons by implying that podiatric surgeons are not as specialised, thereby perpetuating misconceptions about their competency and training. Instead of a title change, targeted public education campaigns and transparent communication about qualifications would better address public misunderstandings while preserving the integrity and professional standing of podiatric surgeons.

2. Do you have an alternative suggestion for the protected title? If yes, how would your suggested title achieve the same result as 'surgical podiatrist' in providing greater clarity to consumers?

I propose a multi-faceted approach that focuses on improving public awareness and transparency rather than altering the established title of "podiatric surgeon," which is already well-recognised internationally.

First, implementing a public information campaign, similar to the one successfully executed in the United Kingdom, would be highly effective. This campaign could mandate disclaimers on all advertising materials, patient registration and consent forms, and any literature provided to patients. Additionally, a structured verbal discussion with every patient about the role, qualifications, and training of podiatric surgeons would ensure a deeper understanding of their expertise. Such measures would not only address potential misunderstandings but also provide patients with clear, accessible information.

Furthermore, a broader media campaign in association with AHPRA would amplify this effort. Utilizing social media, along with updates to both the Australian College of Podiatric Surgeons (ACPS) and AHPRA websites, as well as traditional media advertising, would reach a wider audience and reinforce the message. This comprehensive strategy has been shown to be effective in various international contexts. For example, the UK's Health and Care Professions Council (HCPC) and College of Podiatry have successfully used similar campaigns to delineate the roles and qualifications of podiatric surgeons, reducing public confusion without needing to alter professional titles.

It is crucial that these efforts clearly convey that podiatric surgeons are not medical doctors but rather highly trained specialists in foot and ankle surgery, ensuring that the public is not misled. To address the often-unclear distinction between orthopedic and podiatric surgeons, specific informational content

should be developed, outlining the unique competencies, training pathways, and scope of practice for each. This would help patients make informed decisions and accurately understand which professional is best suited to manage their specific conditions. By adopting these measures, we can enhance public understanding and protect the professional identity of podiatric surgeons without resorting to a title change that may create more confusion.

3. What are the potential impacts for consumers of the proposed change in title?

The proposed change in the title from "podiatric surgeon" to "surgical podiatrist" is likely to have significant negative impacts on consumers.

Firstly, the title "podiatric surgeon" has been in use in Australia for over 40 years and is internationally recognised in countries such as the United Kingdom and the United States. Changing it now would create unnecessary confusion for consumers who have become accustomed to the current designation and already associate it with specialised surgical expertise in foot and ankle care. Such confusion could hinder patients' ability to identify appropriately qualified specialists, potentially compromising their access to the right care and eroding trust in the profession.

Secondly, this change may inadvertently create anti-competitive behaviors, favoring orthopedic surgeons and leading to monopolistic market conditions. By altering the title and potentially diminishing the perceived qualifications of podiatric surgeons, the public might be misled into believing that only orthopedic surgeons are competent to perform these surgeries. This would restrict consumer choice, forcing patients to rely more heavily on orthopedic surgeons. Historical evidence shows that reduced competition in healthcare markets often results in inflated costs. For instance, the out-of-pocket expenses for knee and hip surgeries have risen significantly in markets dominated by orthopedic specialists due to limited options for patients. A similar scenario could unfold for foot and ankle surgery, with increased costs and longer waiting times for consumers as demand for a narrower pool of specialists grows.

Lastly, implementing this change would require complex legislative amendments, including altering regulations and professional standards, which would be both time-consuming and costly. Given that there are alternative and more effective measures available—such as enhancing public education, implementing transparent advertising standards, and improving patient information—resorting to a title change appears unwarranted. These alternative strategies would better address any confusion about the qualifications and scope of practice of podiatric surgeons without the need for disruptive and costly legislative reforms. Thus, maintaining the existing title, coupled with targeted public education and regulation, would better serve the interests of consumers by preserving clarity, choice, and affordability in healthcare.

4. What are the potential impacts, including potential costs, for podiatric surgeons of the proposed change in title?

The proposed change in the protected title from "podiatric surgeon" to "surgical podiatrist" will have numerous detrimental impacts on existing podiatric surgeons, both financially and professionally.

First, there will be immediate financial costs associated with rebranding. This includes the need to update all existing marketing materials, websites, brochures, and other patient-facing resources to reflect the new title. Such changes can be expensive and time-consuming, placing an undue burden on practitioners who have built their reputations and patient base around the established title.

Moreover, altering the title diminishes the professional recognition for which podiatric surgeons have rigorously trained. It is inherently unfair to existing podiatric surgeons who have undergone extensive education and certification to earn their status. Changing their title implies a lesser scope or qualification and fails to accurately reflect their advanced competencies in surgical practice. This

undermines their professional identity and erodes public confidence, making it more difficult for them to establish their expertise and gain patient trust.

Additionally, the proposed change exacerbates existing inequities in the healthcare system. Podiatric surgeons are already at a disadvantage compared to their medical counterparts, as Medicare rebates and private health insurance reimbursements for podiatric surgical procedures are significantly lower or does not exist. This disparity extends to associated services such as pathology and imaging, making it financially challenging for both practitioners and patients. Reducing the perceived value of podiatric surgery by altering the title will likely dissuade new entrants from pursuing this career path, decreasing the number of podiatrists willing to undergo the rigorous training required to become podiatric surgeons. This will ultimately threaten the viability of the profession, potentially leading to its extinction.

Furthermore, the proposal is unfair to the majority of practicing podiatric surgeons, as an independent review found that most podiatric surgeons were not responsible for the higher notification rates that initially prompted the suggestion for title reform. The same review concluded that no changes were necessary to the scope of practice, further supporting the view that the proposed title change is not evidence-based. Instead of penalising the entire profession for the actions of a few, more targeted measures and enhanced patient communication would be more effective. Thus, the potential impacts and costs associated with this title change are extensive and disproportionate, making it an unjustified course of action

5. Are there any unintended consequences the Board might not have considered in relation to the proposed change of title?

significant consequence is the potential confusion among the public and healthcare professionals alike. The title "podiatric surgeon" has been used for decades and is internationally recognised, signifying a high level of expertise and surgical proficiency. Changing it could obscure the distinction between general podiatric care and specialized surgical practice, leading to misunderstandings about the qualifications and capabilities of podiatric surgeons. This may result in patients being unsure whom to approach for advanced foot and ankle surgeries, thereby delaying access to appropriate care and potentially worsening health outcomes.

Another unintended consequence is the impact on interprofessional relationships. A change in title could alter the dynamics between podiatric surgeons and other medical specialists, such as orthopedic surgeons, by implying a diminished scope or expertise. This perception could undermine collaborative care models, making it more challenging for podiatric surgeons to gain referrals from other healthcare providers. In turn, this would limit patient access to specialised foot and ankle care, forcing more patients into the already overburdened orthopedic surgeons and public system.

Additionally, altering the title might discourage new entrants from joining podiatric surgical training programs. The ambiguity of a new title may lead aspiring practitioners to perceive the specialty as less recognised or valued, deterring them from pursuing advanced surgical training. This could cause a decline in the number of trained podiatric surgeons, further exacerbating workforce shortages in specialised foot and ankle care, particularly in rural and underserved areas.

Finally, there could be potential legal and administrative ramifications. Changing the protected title would necessitate amendments to multiple regulatory and legislative frameworks, not only increasing administrative burden and costs but also creating discrepancies between jurisdictions until these changes are uniformly implemented. This could temporarily compromise the regulation and oversight of podiatric surgeons, leading to a period of uncertainty that negatively impacts both practitioners and patients.

In sum, the unintended consequences of this title change extend beyond mere semantics, affecting public understanding, interprofessional relationships, workforce sustainability, and regulatory coherence. These risks must be carefully weighed against the purported benefits of the proposal to ensure that any changes are truly in the best interest of public safety and healthcare outcomes.



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No, for the following reasons:

- 1. The term 'podiatric surgeon' is grammatically correct. The adjective 'surgical' can be defined as 'relating to or used in surgery', which infers that the podiatrist is performing surgery (which they are), and the noun for someone who performs surgery is, of course, 'surgeon'.
- 2. The Australian Medical Association states that use of the term 'podiatric surgeon' has led to patients "potentially suffering unnecessary harm". There is no evidence for this somewhat alarmist claim. Indeed, the review states that "there is no basis for a restriction of the scope of practice of podiatric surgeons", so one has to wonder what goal is being achieved by changing the title.
- 3. It is worth noting that the title was the "single biggest issue" raised by orthopaedic surgeons. One would hope that the safety of patients would be the primary concern, which is the primary goal of the Podiatry Board.
- 4. Orthopaedic surgeons claimed that their patients were "shocked to hear the practitioner was not a doctor". The lack of understanding of the title 'doctor' is disappointing. The term 'doctor' is an academic title in use since the 13th century and has since been used to designate an individual who has obtained a doctorate (usually a PhD). A medical degree is not a doctorate. The use of this title by medical practitioners followed much, much later the first official recognition of 'doctor' being applied as a title to medical practitioners was in 1838, more than 500 years after it was first used. Outside of academic circles, the noun 'doctor' has become synonymous with someone who practices medicine, but it is important to remember that 'doctor' is a *courtesy* title, not an *official* title.
- 5. The term 'podiatric surgeon' has been used in the United Kingdom by the Health and Care Professions Council for several decades and is the accepted nomenclature in the Anglophone world to describe a podiatrist who is trained in surgery.
- 6. There is no evidence that the term 'podiatric surgeon' is intended to deceive the general public into thinking their podiatrist is medically trained. Changing a title in response to misunderstanding by a small number of patients is not a good approach to policy. It is disappointing that the review conflates confusion regarding the term 'podiatric surgeon' and 'doctor', as the two are completely separate issues, as explained in point #4.
- 7. There is no guarantee that adopting the terminology of 'surgical podiatrist' addresses any of the issues raised in the otherwise well-considered Paterson review.

References

Menz HB, Borthwick AM, Potter MJ, Landorf KB, Munteanu SE. 'Foot' and 'surgeon': a tale of two definitions [editorial]. Journal of Foot and Ankle Research 2010;3:30.

Borthwick AM, Nancarrow S, Bristow I, Bowen C. Contested role boundaries and professional title: Implications of the independent review of podiatric surgery in Australia. Journal of Foot and Ankle Research 2024;e70007.

2. Do you have an alternative suggestion for the protected title? If yes, how would your suggested title achieve the same result as 'surgical podiatrist' in providing greater clarity to consumers?

No – there are no suitable alternatives, nor should there be.	

3. What are the potential impacts for consumers of the proposed change in title?

I do not think there are any significant benefits to consumers in changing the title. There is no evidence that simply changing a title improves patient safety, as has been commonly argued. Although the review suggests that some consumers misunderstand the training of podiatric surgeons, it is not known how widespread this actually is.

4. What are the potential impacts, including potential costs, for podiatric surgeons of the proposed change in title?

Changing the title from 'podiatric surgeon' to 'surgical podiatrist' is a significant and expensive undertaking for both the professional body that represents podiatric surgeons (the Australasian College of Podiatric Surgeons) and podiatric surgeons themselves.

5. Are there any unintended consequences the Board might not have considered in relation to the proposed change of title?

Changing the title of 'podiatric surgeon' to 'surgical podiatrist' does not benefit consumers (in relation to safety or access) and is detrimental to podiatric surgeons themselves. The only potential benefit of this title change is the medical profession, by restricting the use of the term 'surgeon' to those who complete training within their specialist colleges.



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	podiatrist who performs surgery? Why or why not?

No, I Disagree. The title should not be changed to the above Podiatric surgeons have gone through right training to become the a podiatric surgeon, rountless hours of observation, practical and they have gone through more training in the foot and anule then any the orthopaedic surgeon. Myry

2. Do you have an alternative suggestion for the protected title? If yes, how would your suggested title achieve the same result as 'surgical podiatrist' in providing greater clarity to consumers?

No, I think the current title is fine and consumers do research lexplantion from the pod surgeon is known. In no other country does a title have to change.

3. What are the potential impacts for consumers of the proposed change in title?

if the totle is changed I believe consumers will not fully understand the expectise, get all avenues and end up with reduced outcomes in their quality of health and daily living

4. What are the potential impacts, including potential costs, for podiatric surgeons of the proposed change in title?

There are many potential costs for red surgeons loss of income loss of trust in the profession from other GP, Rheumidologist other allied's health. As well as reduced trust from consumers/portients.

5. Are there any unintended consequences the Board might not have considered in relation to the proposed change of title?

I believe other things to question is what I how long has an orthopaedic surgeon done on purely foot and ankle companed to a padiatric surgeon.

As well as the outcomes of polyruggeon pt outcomest quality of life, follow up companed to orthopaedic.