

Public consultation

December 2024

Proposed options for providing guidance to podiatrists working with assistants in their practice

Summary

The Podiatry Board of Australia (Board) is reviewing its <u>Guidelines for podiatrists working with podiatric</u> <u>assistants in podiatry practice</u> (the guidelines).

The Board is inviting feedback on proposed options for providing guidance to podiatrists and podiatric surgeons when working with assistants, including the Board's preferred option of replacing the current guidelines with a high-level guidance document.

Public consultation is open until 14 February 2025.

Making a submission

There are ten consultation questions for your consideration on page four of this consultation paper.

You can provide your feedback using the response template that is published with this consultation paper on the Board's website. Please send your submission as a Word document by email to: podiatryconsultation@ahpra.gov.au by close of business on **14 February 2024**.

Publication of submissions

The Board publishes submissions at its discretion. We generally publish submissions on our website to encourage discussion and inform the community and stakeholders. Please advise us if you do not want vour submission published.

We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the subject of the consultation. Before publication, we will remove personally identifying information from submissions, including contact details.

The views expressed in the submissions are those of the individuals or organisations who submit them, and their publication does not imply any acceptance of, or agreement with, these views by the Board.

The Board accepts submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982* (Cth), which has provisions designed to protect personal information and information given in confidence.

Please let us know if you do not want us to publish your submission or want us to treat all or part of it as confidential.

Published submissions will include the names of the individuals and/or the organisations that made them, unless confidentiality is requested.

Next steps

The Board will review and consider the feedback from this public consultation before deciding the approach it will take to providing guidance to practitioners working with assistants in their practice.

Background

The Board works with Ahpra to regulate the podiatry profession under the National Law.1

The Board develops policies, codes, and guidelines to provide guidance to the podiatry profession.

The Board published the <u>Guidelines for podiatrists working with podiatric assistants in podiatry practice</u> at the start of the National Scheme in 2010. They set out the obligations of podiatrists when working with assistants and provide prescriptive information about what they must do in this specific area of practice. The guidelines have not been reviewed since their publication in July 2010.

Since the guidelines were developed the Board and other National Boards have taken a less prescriptive approach to providing guidance to the profession.

The Board's <u>Code of conduct</u> is a principles-based document that gives important guidance to practitioners about the professional behaviour and conduct expected from registered podiatrists and podiatric surgeons. The Code of conduct is a key part of the regulatory framework that the Board has established for the podiatry profession to support safe and effective podiatry practice in order to protect the public.

Underpinning the Code of conduct is the expectation that practitioners will use their professional judgement to achieve the best possible outcomes in practice.

The Board's <u>professional capabilities</u> describe the threshold or minimum level of professional capability needed for registration of podiatrists and podiatric surgeons. They outline the knowledge, skills and professional attributes required to safely and competently practise in Australia.

The Code of conduct, professional capabilities and other relevant regulatory standards apply to all areas of podiatry practice, including when working with assistants.

The Board considers that the current guidelines for working with podiatric assistants are no longer fit for purpose and prefers to use a less prescriptive and more contemporary approach to providing guidance to support practitioners working with assistants.

The Board is proposing a different resource, in the form of high-level guidance that explains how the Board's Code of conduct, professional capabilities and other relevant regulatory standards apply when working with an assistant rather than telling practitioners what they must do in this specific area of practice.

The draft proposed guidance is designed to support podiatrists and podiatric surgeons by highlighting key principles and practices from the Code of conduct and other regulatory documents that apply when working with an assistant. Unlike the current guidelines, it doesn't include prescriptive requirements about qualifications for assistants, and the types of patients and tasks that may be delegated to an assistant.

As they do in all other areas of their practice, podiatrists and podiatric surgeons will use their professional judgement when making a decision to delegate a task to an assistant. This includes assessing:

- whether the assistant is appropriately trained, experienced, skilled and competent to safely undertake the tasks delegated to them
- whether it is safe and appropriate for the podiatry care to be provided by an assistant within the relevant clinical setting
- how often the podiatrist needs to assess that patient.

While the Board does not regulate assistants, it recognises they are a valuable part of healthcare teams in public, private and community settings and play a key role in the meeting increasing health service needs across Australia.

The Board considers that the proposed guidance will provide more flexibility for working with assistants within the context of individual practice settings as well as evolving practice settings, reduce barriers to working with assistants and support podiatrists, podiatric surgeons and assistants to work to full scope.

The Board has completed a preliminary consultation with select stakeholders to inform the development of the draft proposed guidance for working with assistants.

¹ The <u>Health Practitioner Regulation National Law</u>, as in force in each state and territory (the National Law).

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Options

The Board has considered the following options in developing this proposal.

Option 1 - Retain the guidelines with revisions to make them more contemporary

Under this option, the Board would make improvements to the current guidelines to make them more contemporary and less prescriptive, and to better align them with the existing professional obligations and requirements for safe and effective podiatry care.

Option 2 - Retire the guidelines and introduce guidance

Under this option, the current guidelines would be retired and replaced by high-level guidance that explains how the Board's current regulatory framework, including the Code of conduct, professional capabilities and other relevant regulatory standards apply when a practitioner is working with an assistant in their podiatry practice.

Preferred option

The Board prefers Option 2, which is to replace the current guidelines with the proposed *Guidance for working with assistants in podiatry practice*, supported by case studies.

The draft proposed Guidance for working with assistants in podiatry practice is at Attachment A.

The Board considers this is the best option to provide guidance to practitioners in relation to this aspect of their podiatry practice. The proposal provides clear and contemporary guidance for working with assistants in podiatry practice by summarising the relevant professional obligations set out in the Code of conduct and other regulatory and professional standards for the podiatry profession. This will help ensure patients receive safe and effective person-centred podiatry care when provided by an assistant.

Potential benefits

The potential benefits of the preferred option are that the proposed guidance:

- reflects the existing professional obligations and requirements for safe and effective podiatry care in the Code of conduct and the professional capabilities and explains how they apply when working with an assistant in podiatry practice
- includes the appropriate level of information needed to support practitioners to understand their professional obligations when working with an assistant without being too prescriptive
- allows for flexibility within the context of the practice setting and reflects that podiatry practice settings are continually evolving
- reduces barriers to working with assistants and supports the provision of safe and accessible podiatry
 care in different practice settings across Australia by enabling podiatrists, podiatric surgeons and
 assistants to work to their full scope of practice
- promotes a supportive rather than a prescriptive approach to guidance
- · does not impose additional and unnecessary regulation to achieve protection of the public
- is clearer and easy to understand, and
- can be amended more easily than a guideline.

If Option 2 is supported, the Board would develop additional resources to complement the guidance. This would include case studies to provide examples of how the Code of conduct would be applied in different clinical scenarios, including roles and responsibilities of the podiatrist and assistant in each case, culturally safe practice and examples of informal and formal training and qualifications of assistants. Example case studies are provided at Attachment B. If the proposed guidance is supported, further case studies will be published alongside it on the Board's website.

Potential impacts

The Board estimates that the potential impact of replacing guidelines with guidance would be minimal as it does not introduce any new requirements. Rather it explains how existing professional obligations for safe and effective podiatry care apply when a practitioner is working with an assistant in their practice.

The Board does not anticipate any negative impact on practitioners, patients and consumers including Aboriginal and Torres Strait Islander Peoples and other stakeholders arising from the proposal. The Board's *Patient and Consumer Health and Safety Impact Statement* is provided at Attachment D

Questions for consideration

The Board is inviting general comments on the draft proposed guidance as well responses to the following questions.

- 1. Which option do you prefer and why?
- 2. Is there any content that needs to be changed, added or removed in the draft proposed guidance? If so, please provide details.
- 3. Is the language of the draft proposed guidance clear? Why or why not?
- 4. Is the structure of the draft proposed guidance workable? Why or why not?
- 5. Are there any practical unintended impacts on practitioners and/or the delivery of podiatry care if the quidelines are replaced with other quidance?
- 6. Would the draft proposed guidance result in any potential negative or unintended impacts for patients and consumers, particularly those vulnerable to harm in the community? If so, please describe them.
- 7. Would the draft proposed guidance result in any potential negative or unintended impacts for Aboriginal and Torres Strait Islander Peoples? If so, please describe them.
- 8. Would the draft proposed guidance result in any adverse cost implications for practitioners, patients or other stakeholders? If yes, please describe.
- 9. Are there any other scenarios that you think would be suitable for future development as a case study to support the guidance?
- 10. Do you have any other feedback about the Board's proposal?

Attachments

Attachment A: Draft proposed Guidance for working with assistants in podiatry practice

Attachment B: Example case studies to support the proposed guidance

Attachment C: Board statement of assessment against Ahpra's Procedures for the development of

registration standards, codes and guidelines

Attachment D: The Board's Patient and Consumer Health and Safety Impact Statement



Attachment A: Guidance for working with assistants in podiatry practice

	Why	The Podiatry Board of Australia (the Board) has developed this guidance for podiatrists and podiatric surgeons as part of its role to protect the public. This guidance will help you better understand and meet your professional obligations when working with assistants.
	What	You must be familiar with and meet your professional obligations and standards for safe practice, as outlined in the Board's Code of conduct, professional capabilities and other regulatory standards and guidelines for the podiatry profession.
O ₀	How	You must always practise in accordance with the Board's Code of conduct and other regulatory standards, including when working with assistants.

Why the Board developed this guidance

You must always ensure patients receive safe and person centred care.

As part of its role to protect the public, the Board publishes guidance, including FAQs and fact sheets. This guidance outlines how the Board's Code of conduct, professional capabilities and other relevant regulatory standards apply when you are working with assistants in your practice. It also provides information about other useful resources to support you when working with assistants to ensure your patients receive safe, person-centred and culturally safe podiatry care.

This guidance provides a summary of your professional obligations when delegating¹ tasks to an assistant. It emphasises the importance of quality and safety of care and service.



Your professional obligations

Code of conduct and other professional obligations

The <u>Code of conduct</u> outlines the Board's expectations for professional behaviour and conduct. You should be familiar with all sections of the code and apply it to your practice. The Board's <u>Professional capabilities</u> identify the knowledge, skills and professional attributes required to safely and competently practise in Australia. You also have a responsibility to ensure culturally safe healthcare for Aboriginal and Torres Strait Islander Peoples.

The principles for safe practice and professional conduct set out in these documents as well as other relevant regulatory standards and guidelines for the podiatry profession apply to your practice when working with assistants.

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How to meet your professional obligations

Practise in line with the Board's Code of conduct, professional capabilities and other regulatory standards

You must always put the care of your patients first and practise safely and effectively. The Board expects you to practise in accordance with its Code of conduct, standards of practice set out in the professional capabilities and other regulatory standards, including when you are working with assistants in your practice.

¹ Defined in the Code of conduct as: **Delegation** involves one practitioner asking another person or member of staff to provide care on behalf of the delegating practitioner, while that practitioner retains overall responsibility of the care of the patient.

When working with an assistant you need to ensure:

- you understand that you remain responsible for the overall management and review of the patient to inform decisions to delegate care to an assistant
- you have appropriate professional indemnity insurance (PII) arrangements in place for all aspects of your podiatry practice, including when working with assistants. Your PII provider can advise you about your PII cover
- you regularly assess the knowledge, skills, and competence of the assistant and ensure they undertake relevant professional development when required
- the assistant is appropriately trained², experienced, skilled, and competent to safely undertake the tasks you delegate to them
- it is safe and appropriate for the podiatry care to be provided by an assistant within the relevent clinical setting
- the patient has provided consent for the assistant to provide the care
- the patient is aware of any financial implications including changes in costs or reimbursement when the care is provided by an assistant
- the assistant understands their professional obligations with respect to:
 - good communication
 - providing evidence based and person-centred care
 - providing culturally safe care to Aboriginal and Torres Strait Islander people
 - informed consent
 - confidentiality and privacy
 - recognising when to stop a task and escalate clinical concerns to the podiatrist or podiatric surgeon
 - continuity of care, and
 - maintaining appropriate and accurate health records.

Other resources to help you

You should use professional judgment when selecting resources to guide your practice. Resources you may find helpful to support you when working with assistants include:

- Victorian Department of Health Supervision and delegation framework for allied health assistants
- Queensland Health Allied Health Assistants and Delegation

Professional associations can also provide guidance about working with assistants in your podiatry practice.

Review

This guidance will be reviewed as needed, but generally every three years.

² Training may include appropriate and relevant on-the-job training and/or formal qualifications, with preferred qualifications being a Certificate III or Certificate IV in Allied Health Assistance or equivalent.

Attachment B: Case studies

The following case studies have been developed to support the proposed guidance on working with assistants in podiatry practice. They are designed to illustrate key points in how podiatrists and podiatric surgeons should work with assistants in their practice.

Case Study 1

Alex(a podiatrist) works in a busy community health centre where he works with Tien (an assistant). While the assistant has no formal qualifications, she has been working as a podiatry assistant for a number of years.

The podiatrist has a patient, Jane, who he has been seeing for about five years. The patient is an older adult with no history of vascular disease or significant health concerns other than an inability to reach her feet. The podiatrist regularly reviews the patient's overall treatment plan, and the assistant supports the patient with nail care and skin integrity checks. On a recent visit, the assistant observed a wound on the top of the patient's foot. As per the written practice protocols for delegation and escalation, the assistant asked the podiatrist to review the patient before any treatment is provided, and the patient provides information about the wound being caused by a scratch in the garden. The podiatrist assesses the patient's vascular status and the wound appearance and believes the wound will likely heal with observation and regular dressing changes.

As a result, the podiatrist wants to delegate the dressing changes to the assistant. The podiatrist is satisfied that the assistant has the necessary knowledge, skills and experience to dress the patient's wounds safely and effectively. The assistant has observed the podiatrist dressing wounds and has dressed wounds under the podiatrist's supervision for a few years. The podiatrist creates a wound management plan and discusses this with the patient and seeks her consent for the assistant to undertake wound management, in addition to usual nail care. The patient agrees.

The podiatrist explains the wound management plan to the assistant in detail, making sure the assistant understands the tasks involved and the importance of reporting any concerns about the wound immediately. The assistant knows that effective and timely communication are crucial for maintaining safe patient care. The podiatrist regularly assesses the assistant's work in their weekly supervision meetings to ensure the patient is progressing as expected.

Even though the assistant will dress the patient's wound, the podiatrist remains responsible for the overall management of the patient's care. The podiatrist will review the patient and the overall management plan again in four weeks.

This case study illustrates how the podiatrist follows the *Code of conduct* by providing person-centred care, ensuring that the assistant is properly equipped for the tasks delegated to them and clearly defining the roles and responsibilities, and who has overall responsibility for patient care. The podiatrist's practice also reflects the knowledge, skills and professional attributes required for safe and effective practice, as outlined in the *Professional capabilities for podiatrists* and the requirements for delegation as outlined in that state's delegation framework.

Case Study 2

Banan is a podiatrist working in private practice where she employs an assistant, Andrew. The assistant holds a Certificate IV in Allied Health Assistance and has a number of years of experience. The podiatrist has a patient, Joe, who has been participating in a rehabilitation program to improve mobility and strength following a recent sporting injury.

The podiatrist developed a rehabilitation program for the patient and has delegated responsibility to her assistant to oversee the completion of exercises in the program. While the assistant helps with the exercises, the podiatrist retains overall responsibility for the patient's care.

At one of his appointments, the assistant is working with the patient to undertake an exercise as part of the rehabilitation program when the patient reports increased pain and tingling in his foot. The assistant reviews the written practice protocols for delegation and escalation. The assistant knows that these types of symptoms should be escalated to the treating podiatrist.

The assistant reports this to the podiatrist immediately, knowing that timely escalation is crucial for safe and effective patient care. The podiatrist consults with the patient to reassess his condition and reviews the management plan and rehabilitation exercises.

This case study illustrates how the podiatrist follows the *Code of conduct* by ensuring systems are in place for the assistant to raise concerns about risks to patients, retaining overall responsibility for patient care and ensuring the assistant has the appropriate knowledge and skill for the tasks delegated to her. The case study also illustrates how the podiatrist's practice is consistent with the *Professional capabilities for podiatrists* by recognising and responding to the deterioration in the patient's condition.



Attachment C: Statement of assessment against Ahpra's *Procedures* for the development of registration standards, codes and guidelines

Proposed options for providing guidance to podiatrists working with assistants in their practice

Introduction

Section 25 of the Health Practitioner Regulation National Law as in force in each state and territory (the National Law) requires Australian Health Practitioner Regulation Agency (Ahpra) to establish procedures for the purpose of ensuring that the National Registration and Accreditation Scheme (the National Scheme) operates in accordance with good regulatory practice.

The Ahpra *Procedures for the development of registration standards, codes and guidelines* (2023) are available on the Ahpra Resources webpage.

Context - issue or problem statement

The Podiatry Board of Australia (Board) is reviewing its *Guidelines for podiatrists working with podiatric assistants in podiatry practice* (guidelines) that have been in effect since 2010 and are scheduled for review. The Board considers that the current guidelines are no longer fit for purpose and would prefer a less prescriptive and more contemporary approach to providing guidance to support practitioners working with assistants in their podiatry practice. The Board proposing to replace the current guidelines with highlevel guidance that explains how the Board's Code of conduct, professional capabilities and other relevant regulatory standards apply when working with an assistant in podiatry practice.

Below is the Board's assessment of its proposal to replace the current guidelines with guidance in the form of a fact sheet against the three elements outlined in the Ahpra procedures.

Assessment

Below is the Board's assessment of the of its proposal to replace the current guidelines with high-level guidance against the three elements outlined in the Ahpra procedures.

1. Describe how the proposal

- 1.1 takes into account the paramount principle, objectives and guiding principles in the National
- 1.2 draws on available evidence, including regulatory approaches by health practitioner regulators in countries with comparable health systems

The Board's proposal takes into account the National Scheme's paramount principle of protecting the public and maintaining public confidence in the safety of services provided by health practitioners by providing clear and contemporary guidance for practitioners working with assistants in podiatry practice to ensure patients whose care is provided by an assistant receive safe and effective person-centred podiatry care.

The proposed guidance also supports the National Scheme to operate in a transparent, accountable, efficient, effective and fair way. The proposed guidance does not impose additional and unnecessary regulation. It is less prescriptive than the current guidelines and explains how the existing professional

¹ See section 3 and section 3A of the National Law

obligations and requirements for safe and effective podiatry care in the Board's Code of conduct and professional capabilities apply when working with an assistant in podiatry practice.

2. Outline steps that been taken to:

- achieve greater consistency within the National Scheme (for example, by adopting any available template, guidance or good practice approaches used by National Scheme bodies)
- meet the wide-ranging consultation requirements of the National Law

The proposal to replace the current guidelines with high-level guidance has been informed by recent approaches taken by Ahpra and other National Boards to providing guidance to health practitioners.

For example, Ahpra worked with seven National Boards, including the Podiatry Board to develop common resources to help practitioners better understand and meet their health record management obligations. This included a one page document *Managing health records – Summary of obligations* that summarises and brings together all the guidance on record keeping and management from the shared Code of conduct into a single document.

The Board also drew on the Dental Board of Australia's (DBA) *Guidance for registered dental practitioners: Infection prevention and control*, which replaced the DBA's guidelines on infection control. The Board adopted a similar format to the DBA guidance for its proposed guidance.

The National Law requires wide-ranging consultation on proposed standards, codes and guidelines, including consulting other National Boards on matters of shared interest. This requirement of the National Law is being met through a ten-week public consultation which includes publishing a consultation paper and news item on the Board's website and a social media campaign. The Board will also invite practitioners and other key stakeholders to provide feedback on the proposed guidance, including other National Boards, professional organisations, patient safety organisations, consumer groups and Aboriginal and Torres Strait Islander groups.

3. Address the following principles:

a. whether the proposal is the best option for achieving the proposal's stated purpose and protection of the public

The Board considers that this proposal is the best option for providing clear contemporary guidance to practitioners about their professional obligations when working with an assistant to ensure the safe and effective delivery of podiatry care when the care is provided by an assistant. It emphasies the importance of professional practice and quality and safety of care and reflects the existing professional obligations and requirements for safe and effective podiatry care in the Board's Code of conduct and the professional capabilities It doesn't introduce new regulatory requirements and promotes a supportive, rather than prescriptive approach to guidance for the podiatry profession.

b. whether the proposal results in an unnecessary restriction of competition among health practitioners

The proposal is unlikely to restrict competition among health practitioners and doesn't limit or restrict practice. Like the current guidelines, the proposed guidance would be applicable to all registered podiatrists working with assistants in their practice. The proposed guidance does not impose additional and unnecessary regulation. It is less prescriptive than the current guidelines and explains how the existing professional obligations and requirements for safe and effective podiatry care in the Board's Code of conduct and professional capabilities apply when working with an assistant in podiatry practice. It potentially reduces barriers to working with assistants and supports the provision of safe and accessible podiatry care in different practice settings across Australia by enabling podiatrists, podiatric surgeons and assistants to work to their full scope of practice.

c. whether the proposal results in an unnecessary restriction of consumer choice

The proposal is not expected to result in any unnecessary restrictions of consumer choice as it does not

introduce any new requirements for practitioners working with assistants in podiatry practice. The proposed guidance clearly explains how existing professional obligations and requirements for safe and effective podiatry care apply when working with assistants in podiatry practice and will support access to podiatry services.

d. whether the overall costs of the proposal to members of the public and/or registrants and/or governments are reasonable in relation to the benefits to be achieved

The proposal does not introduce any new requirements for practitioners working with assistants in podiatry practice. The Board does not expect any additional costs to the public, practitioners or government.

While the proposal is a change from the status quo, in substance, the requirement for practitioners to ensure assistants provide safe and effective podiatry care has not changed. The public will benefit from clear and contemporary guidance to practitioners working with assistants in podiatry practice that has a focus on safe and quality podiatry care.

e. whether the proposal's requirements are clearly stated using 'plain language' to reduce uncertainty, enable the public to understand the requirements, and enable understanding and compliance by registrants, and

The proposed guidance will help practitioners understand and meet their professional obligations when working with assistants in podiatry practice. This will ensure the provision of safe and effective podiatry care when working with assistants.

Board has used plain language in the proposed guidance that also help the public to better understand the professional obligations of practitioners

f. whether the Board has procedures in place to ensure that the proposed standard remains relevant and effective over time.

The Board has procedures in place for regularly reviewing standards, codes, guidelines and other guidance for the profession. If supported, the Board will review the proposed guidance as needed, but generally every three years.

However, the Board may choose to review the proposed guidance earlier, in response to any issues which arise, or new evidence which emerges to ensure its continued relevance and workability.

4. Closing statement

Feedback on any regulatory impacts identified during the consultation process will be provided to the Board to inform decision-making.

The Board has completed a **patient health and safety impact statement** for this public consultation consultation and will provide a patient and safety impact assessment if the proposal is supported.



Attachment D: National Boards Patient and Consumer Health and Safety Impact Statement

Proposed guidance for working with assistants in podiatry practice

Statement purpose

The National Boards Patient and Consumer Health and Safety Impact Statement (Statement)¹ explains the potential impacts of a proposed registration standard, code or guideline on the health and safety of the public, particularly those vulnerable to harm in the community which includes those subject to stigma or discrimination in health care, and/or experiencing health disadvantage and Aboriginal and Torres Strait Islander Peoples.

The four key components considered in the Statement are:

- 1. The potential impact of the proposed revisions to the registration standard, code or guideline on the health and safety of patients and consumers particularly those vulnerable to harm in the community including approaches to mitigate any potential negative or unintended effects.
- 2. The potential impact of the proposed revisions to the registration standard, code or guideline on the health and safety of Aboriginal and Torres Strait Islander Peoples including approaches to mitigate any potential negative or unintended effects.
- 3. Engagement with patients and consumers particularly those vulnerable to harm in the community about the proposal.
- 4. Engagement with Aboriginal and Torres Strait Islander Peoples about the proposal.

The National Boards Patient and Consumer Health and Safety Impact Statement aligns with the <u>National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025</u>, <u>National Scheme engagement strategy 2020-2025</u>, the National Scheme Strategy 2020-25 and reflects key aspects of the Ahpra <u>Procedures for the development of registration standards</u>, <u>codes</u>, <u>guidelines and accreditation standards</u>.

Below is our initial assessment of the potential impact of the Podiatry Board of Australia's proposal to replace the current *Guidelines for podiatrists working with podiatric assistants in podiatry practice* (guidelines) with high-level guidance on the health and safety of patients and consumers, particularly those vulnerable to harm in the community, and Aboriginal and Torres Strait Islander Peoples. This statement will be updated after consultation feedback.

1. How will this proposal impact on patient and consumer health and safety, particularly those vulnerable to harm in the community? Will the impact be different for people vulnerable to harm in the community compared to the general public?

The Board has carefully considered the impacts that its proposal to replace the current guidelines with high-level guidance could have on patient and consumer health and safety, particularly those vulnerable to harm in the community. The Board does not expect that its proposal will have any adverse impacts on

¹ This statement has been developed by Ahpra and the National Boards in accordance with section 25(c) and 35(c) of the Health Practitioner Regulation National Law as in force in each state and territory (the National Law). Section 25(c) requires Ahpra to establish procedures for ensuring that the National Registration and Accreditation Scheme (the National Scheme) operates in accordance with good regulatory practice. Section 35(c) assigns the National Boards functions to develop or approve standards, codes and guidelines for the health profession including the development of registration standards for approval by the Ministerial Council and that provide guidance to health practitioners registered in the profession. Section 40 of the National Law requires National Boards to ensure that there is wide-ranging consultation during the development of a registration standard, code or quideline.

patient and consumer safety, particularly those vulnerable to harm in the community. However, our engagement through consultation will help us to better understand possible outcomes and meet our responsibilities to protect patient safety and health care quality.

2. How will National Boards engage with patients and consumers, particularly those vulnerable to harm in the community during consultation?

In line with our <u>consultation processes</u> the Board is undertaking wide-ranging consultation. We will engage with patient and consumer bodies, peak bodies, and other relevant organisations to get input and views from those vulnerable to harm in the community.

3. What might be the unintended impacts for patients and consumers, particularly people vulnerable to harm in the community? How will these be addressed?

The Board has carefully considered what possible unintended impacts of replacing the current guidelines with high-level guidance might be, as explained in the public consultation paper. The Board does not expect there to be any unintended impacts for patients and consumers, including those vulnerable to harm in the community.

Consulting with relevant organisations and those vulnerable to harm in the community will help us to identify any other potential impacts. In our public consultation questions, we have specifically asked whether the proposal would result in any potential negative or unintended impacts for patients and consumers, particularly those vulnerable to harm in the community, which will also help us better understand possible impacts and address them.

We will fully consider and take actions to address any unintended impacts for patients and consumers that may be raised during consultation particularly for those vulnerable to harm in the community.

4. How will this proposal impact on Aboriginal and Torres Strait Islander Peoples? How will the impact be different for Aboriginal and Torres Strait Islander Peoples compared to non-Aboriginal and Torres Strait Islander Peoples?

The Board has carefully considered any potential outcomes of replacing the current guidelines with high level guidance on Aboriginal Torres Strait Islander Peoples and how, when compared to non-Aboriginal and Torres Strait Islander Peoples they might be different, in order to put forward the proposed options for feedback as outlined in the public consultation paper. The proposal does not significantly change current requirements for podiatrists when working with podiatric assistants and does not propose additional requirements that would impact on practitioners, patients and consumers. Therefore, the Board does not expect there to be any potential impacts on Aboriginal and Torres Strait Islander Peoples as a result of the proposal.

The Board's engagement through wide-ranging consultation will help us to identity any potential impacts and meet our responsibilities to protect safety and health care quality for Aboriginal and Torres Strait Islander Peoples.

5. How will consultation about this proposal engage with Aboriginal and Torres Strait Islander Peoples?

The Board is committed to the National Scheme's <u>Aboriginal and Torres Strait Islander Cultural Health and Safety Strategy 2020-2025</u> which focuses on achieving patient safety for Aboriginal and Torres Islander Peoples as the norm, and the inextricably linked elements of clinical and <u>cultural safety</u>.

As part of our consultation process, we have tried to find the best way to meaningfully engage with Aboriginal and Torres Strait Islander Peoples. We are continuing to engage with Aboriginal and Torres Strait Islander organisations and stakeholders.

6. What might be the unintended impacts for Aboriginal and Torres Strait Islander Peoples? How will these be addressed?

The proposal does not significantly change the current requirements for practitioners working with assistants. Therefore, the proposal to replace the guidelines with high-level guidance should not impact on quality of services or access to services.

The Board has considered what might be any unintended impacts for Aboriginal and Torres Strait Islander Peoples. While the Board does not expect there to be any unintended impacts, our engagement with

relevant organisations and Aboriginal and Torres Strait Islander Peoples will help us to identify any potential impacts.

In our public consultation questions, we have specifically asked whether the proposal to replace the current guidelines with high-level guidance will result in any potential negative or unintended impacts for Aboriginal and Torres Strait Islander Peoples which will also help us better understand possible impacts and address them.

We will consider and take action to address any other potential negative impacts for Aboriginal and Torres Strait Islander Peoples that may be raised during consultation.

7 How will the impact of this proposal be actively monitored and evaluated?

Part of the Board's work in keeping the public safe is ensuring that all its standards, codes guidelines and any other guidance are regularly reviewed. If the proposed high-level guidance is supported, the Board will monitor and regularly review the guidance and any supporting material, to check it is working as intended.