

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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Making a submission

Please complete this response template and email to podiatryconsultation@ahpra.gov.au.

Consultation closes on 8 November 2024.

Publication of submissions

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Your answer:

☐ Organisation

Name of organisation: [Click or tap here to enter text.](#)

Contact email: [Click or tap here to enter text.](#)

☒ Myself

Question B

If you are completing this submission as an individual, are you:

☒ A registered health practitioner?

Profession: Podiatrist / Podiatric Surgeon

☐ A member of the public?

☐ Other: [Click or tap here to enter text.](#)

Question C

Would you like your submission to be published?

☐ Yes, publish my submission **with** my name/organisation name

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Your responses to the consultation questions

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 do not agree. As a Podiatric Surgeon I consult patients exclusively in the area of surgical opinion. I perform operating sessions weekly as well as pre and post surgical consultation daily. I act in every capacity as a podiatric surgeon – that is a podiatrist who performs podiatric surgery.

The issue at heart is whether someone who is not medically qualified can use the surgeon title. If the Podiatry and Dental boards of Australia determine that this is the case for the purpose of patient safety and to reduce public confusion then the only appropriate and fair approach is to exclusively restrict the title to the list of medical practitioner specialities who are able to use it. Any submission to the health minister on change of title needs to be done as a collaborative with the Dental Board of Australia or not at all.

If the concern is that when someone sees an oral surgeon or a podiatric surgeon that the patient is confused as to whether they are a medical practitioner then this is purely a case of public education not dissimilar as to how the government educated the public on who could use the title "cosmetic surgeon." AHPRA, the Podiatry Board of Australia (PodBA) of Australia and Department of Health (DOH) could and should work with the podiatric surgery community and associated organisations for improved public awareness that podiatric surgeons are surgical specialists of the podiatry profession. Not only does this process have precedence but is a far less draconian particularly given there is no actual evidence that a change of title will actually reduce public confusion.

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 description for the craft of Podiatrists performing podiatric surgery. Public awareness will continue to improve with education from stakeholders. This campaign will; when implemented further educate the public to understand that Podiatric Surgeons are podiatrists who perform podiatric surgery not dissimilar to Oral Surgeons being dentists that perform oral surgery.

Following the above education campaign in perhaps 5 years AHPRA would be able to review how many notifications and concerns that it receives about patients being misguided that their podiatric surgeon a medical practitioner and not a podiatrist.

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

Further confusion and loss of confidence. If a consumer is seeking a surgical procedure they seek a surgeon who is highly skilled and qualified in that area. A Podiatric Surgeon for podiatric surgery, an Ophthalmic surgeon for ophthalmic / eye surgery, an Oral surgeon for Oral Surgery and a Vascular Surgeon for Vascular Surgery etc.

If there is confusion about Podiatric Surgery and the nature of Podiatric Surgery training it is because there has not been adequate time nor resources to educate the public.

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4. What are the potential impacts, including potential costs, for podiatric surgeons of the proposed change in title?
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Apart from the obvious competitive disadvantage by giving profession superiority to other providers of foot and ankle surgery tangible costs include:

- \$10,000 AUD – new website with rebranding – quoted by my website agency
- \$5000 rebranding as quoted by my graphic designer.
- \$4000 Signage at 2 consulting locations
- \$2000 Updated stationary
- ?? \$1000000 over the course of a career. It is difficult to fully quantify the impact a title change will have on referral and patient willingness to attend the services of a podiatric surgeon until after fact. It can absolutely be assured that it will not have a positive impact on the financial viability of a podiatric surgeon practitioner. In the face of rising costs the negative financial impact may well force some practitioners to take an early exit from the profession. Drastic changes such as a title change will have a significant financial and professional impact on a small speciality in a vulnerable time whereby AHPRA and government should be helping the speciality to evolve and continue to provide high quality care to the Australian public.

5. Are there any unintended consequences the Board might not have considered in relation to the proposed change of title?
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Reduced numbers of Podiatric Surgery Trainees – Like other surgical specialty pathways the pathway to become a podiatric surgeon is gruelling, expensive, long and self funded. Title is important – An inferior title that is not in keeping with the internationally recognised title of podiatric surgeon will not encourage podiatrists considering taking the pathway towards attaining a podiatric surgery qualification.

The proposed title change does nothing for patient safety but further clips the wings of a speciality that has managed to successfully navigate the Australian Regulatory process to develop a robust, internationally regarded training program in a medically dominated landscape with minimal support from government and affiliated agencies.

Given the issue at heart is the absence or presence of a medical degree in addition to a surgical qualification if the proposed title change is recommended to the health minister it must be done by ALL professions that use surgeon in their title that are not medically qualified. Is the Dental Board of Australia prepared to make that recommendation and if so then the Podiatry Board of Australia should move forth.

Changing my professional title will have a drastic effect on my standing and referral base within my community. I work in an environment whereby I am already at a disadvantage as highlighted by the independent review of podiatric surgeons.

As a podiatric surgeon working in regional areas for over a decade I have a record of many tangible examples of professional bullying and undermining by my only competing specialty – Orthopaedics who along with their representative bodies are very much in support of a title change. Being forced to change my professional title gives further weight to these practitioners at my local hospital and region in the absence of any benefit.

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☒ Myself

Question B

If you are completing this submission as an individual, are you:

☒ A registered health practitioner?

Profession: Podiatrist

☐ A member of the public?

☐ Other: [Click or tap here to enter text.](#)

Question C

Would you like your submission to be published?

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Your responses to the consultation questions

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?
<p>No, unnecessary and will create more confusion as to why the name change was required. I have been practising for 28 years as a podiatrist and have never has a member of the public mention anything about how they are confused by the title podiatric surgeon.</p> <p>This feels like a turf war over who gets to own the title surgeon. I feel that this is another grab for elitism and status. The Royal Australasian College of Surgeons discouraged the use of Mr as it believed the term was confusing to patients and this I agree with as it was a gendered term.</p> <p>In reference to the document put out by the podiatry board "The independent review found that many consumers did not understand the term 'podiatric', and they thought the use of the title 'surgeon' indicated that the practitioner was a medical practitioner and had completed their qualifications and training in medicine." The protected title of Dr can be used for vets, dentists, chiropractors and indeed doctors. Only some of whom have completed the training in medicine.</p> <p>The title surgeon I think would imply that the person has undertaken training in surgery not medicine. I would not seek health advice for myself from a veterinary surgeon. The board has an expectation that it will protect public safety this will not assist in reducing complication rates associated with podiatric surgery which are no higher than any other speciality.</p> <p>The outcome data for complications for podiatric surgery is low. The training for podiatrists is rigorous on the affects of systemic complications associated with foot health. The training for podiatric surgery is world class and should be available publicly and privately in Australia's health care system.</p> <p>Perhaps the public could be made aware of the training both podiatrists and podiatric surgeons undertake. Additionally public education around podiatric surgery training, the complication rate and outcomes would be beneficial.</p> <p>Most health professionals have a bachelor degree and not a doctorate, yet many use the title Dr.</p>
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?
<p>Foot and ankle surgeon</p>
3. What are the potential impacts for consumers of the proposed change in title?
<p>It will create more confusion as to why it was required. Change of public perception that the surgical podiatrist is less qualified and not a surgeon.</p>

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

I am not a surgeon but a business owner and if it were affecting me I would be frustrated at the increase in costs for the name change both financial and time and change in public perception. Given that the title has been in existence for 25 years if the name was to change I believe that podiatric surgeons should be entitled to compensation

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

I believe that in other countries such as the US and UK the title is still podiatric surgeons. How does this affect our Australian podiatric surgeons ?

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Contact email: [Click or tap here to enter text.](#)

☒ Myself

████████████████████

██

Question B

If you are completing this submission as an individual, are you:

☒ A registered health practitioner?

Profession: General Practitioner

☐ A member of the public?

☐ Other: [Click or tap here to enter text.](#)

Question C

Would you like your submission to be published?

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Your responses to the consultation questions

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This is already better than "podiatric surgeons" which is extremely misleading. However, I am concerned that by using the title "surgical podiatrist", it is still not clear enough to distinguish a podiatrist from a surgeon. The title "surgical" implies being a surgeon which then implies being a doctor, which a podiatrist is not.

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 prefer "procedural podiatrist" i.e. a podiatrist who performs additional procedures, which is exactly what they do. This is similar to "procedural GPs" referring to GPs who perform non-standard procedures.

I am aware of the alternative proposal of "operative podiatrist". My concern with this is that the word "operative" implies an operation, which is generally performed by a surgeon.

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

As a GP, I often see patients getting confused by the qualifications of different providers involved in their care; for example, they sometimes mix up between a psychologist vs psychiatrist, or optometrist vs ophthalmologist.

Whilst patients generally understand that a podiatrist is different to an orthopaedic surgeon, a "podiatric surgeon" literally means "foot surgeon" which is clearly very deceptive.

To this end, banning the use of "podiatric surgeons" title should be a minimum requirement which is much-needed and long overdue. The overall impact of the proposed change in title would be very positive for consumers. Anything else we can do to minimise confusion and maximise clarity is welcome in this space, in order to keep patients safe and adequately informed.

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

Changing the title does not stop these podiatrists from performing any procedures they intend to do. Therefore, I do not see it affecting their work or insurance liability. Only that they can no longer claim to be surgeons. If they want to be a surgeon, then they should go to medical school and do the surgical training fellowship.

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

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[Redacted]

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Profession: Orthopaedic Surgeon

☐ A member of the public?

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There needs to be a change of name but there needs to be a clear distinction between a surgeon and a podiatrist who operates on people. I do not agree with the change of name due to the ambiguity it creates. As a surgeon who operates on patients with foot and ankle conditions, there are multiple occasions where patients have been misled by podiatrists into thinking they are fully qualified surgeons.

A better term would be operative podiatrist, or extended scope podiatrist, to make it clear to the public that they are not seeing a professional that has completed surgical training.

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?

Yes, operative podiatrist.

Alternatively, extended scope podiatrist, much like other allied health professionals have adopted the title.

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

Provides clarity for the public as to whom they are consulting with.

Consumer protection against misleading fees.

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

The impact would be that the public can see the podiatrist and know that they are not seeing a surgeon. It protects the podiatrist against unrealistic expectations for their level of training.

It may mean less patients who want to see an actual surgeon.

I believe the benefits of consumer protection outweigh the business impacts on operative podiatrists.

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

Including “surgical” in the title means the public are still confused about who they are seeing, particularly when podiatrist advertise themselves as doctors and surgeons. This needs to be regulated better for the public and also protects surgeons who have completed the necessary training to use that title.

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We do not agree that the change to the title is either necessary or meaningful.

Introduction

It is important that Health Ministers are given considered and balanced advice on the ongoing issues related to podiatric surgery as covered in the *Independent Review of the Regulation of Podiatric Surgery in Australia* (The Review) to allow them to make a decision regarding title change.

With Australia's aging population and the growing need for targeted foot care we believe that the principle focus should be on facilitating implementation of the developmental recommendations rather than on being concerned with a symbolic change of title that, as we discuss below, may create more issues than it would solve.

It is clear from The Review, that Professor Paterson makes no link between the skills or training of podiatric surgeons and his recommendation for a title change to be put to Ministers. Rather, the change seems linked to the position of some orthopedic surgeons who seem to resent the services provided by podiatric surgeons.

We are pleased therefore to have the opportunity to comment. We have had extensive exposure to the podiatric surgery profession in recent years, albeit as clients and observers rather than as practitioners.

Confusion

The reasons for the proposed title change as set out in available information and reports/commentary are not clear. Overall the implication appears to be a lack of public awareness of the speciality; so called 'confusion'. This is likely caused by poorly targeted and negative media reporting, limited public consultation and a general lack of broader public knowledge or even interest until people develop 'bad feet'.

Interest is raised when a matter is of personal concern. For example, in seeking to address mental health issues a person can find the difference between a psychologist (not 'medically' trained) vis a vis a psychiatrist ('medically' trained). Similarly, a person interested in having a foot or ankle complaint managed can easily access extensive information on the internet or by seeking further advice from their GP or podiatrist. If one puts 'podiatric surgeon' into an internet search, detailed information surfaces on the speciality, including training and education, in Australia and in like-minded countries (NZ, Canada, UK and USA).

In our view, a title change would do nothing to avoid this so called 'confusion', nor would it contribute to the growth of the profession. It is a side issue. It is the implementation of the other 13 recommendations of The Review that will take the profession forward. Professor Paterson's recommendations about, *inter alia*, Education and Training, Registration and Practice, System Safety and Handling of Complaints are the things that when implemented, will define a positive future for the profession.

Media stories of lagging medical care in Australia often refer to the long waiting lists that see people in need left to manage their health problems – sometimes for five years or more. Having people highly trained to take care of physical wellness issues that are not able to be quickly administered by the broader medical system is a necessary back-up to that system and provides considerable benefit to the public. Australians are treated by allied health practitioners in many fields (especially when they are unable to access a GP or 'medically trained' person) and podiatric surgery fits well in this category of care.

Most importantly, given the speciality as it currently stands, the required Aphra registration of podiatric surgeons (based on completion of approved training and education) prevents **open use** of the title by individuals who are not Ahpra registered and who may wish to undertake foot surgery. Changing the

nomenclature in the protected title would allow anyone who wishes to refer to themselves as a 'podiatric surgeon' to do so. (As in recent cases of untrained practitioners referring to themselves as 'cosmetic surgeons'). An unprotected title will therefore not only increase confusion but will also reduce the current protection of the public that ensures that only appropriately qualified and skilled practitioners are able to use the title 'podiatric surgeon'.

Further, changing the title to 'surgical podiatrist' would not provide clarity of the services to be provided, because for a layperson, if a practitioner is registered to perform 'surgery' he/she is by definition a surgeon. After all, podiatric surgeons are highly specialised and only perform foot surgery, similar to a dental/oral surgeon who works on the mouth. There is no suggestion that an oral or dental surgeon title should be changed.

A wide-spread public awareness campaign on the podiatric surgeon profession would be more appropriate and effective in improving understanding of the profession rather than changing to a title that would have only limited protection.

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?

In 2010 the Australian Health Minister Workforce Ministerial Council *approved specialist registration for the podiatric specialty of podiatric surgery, with protection of the specialist title 'podiatric surgeon'*. Prior to that protection being afforded, practitioners were initially called 'surgical podiatrists' and later **without title protection** 'podiatric surgeons'. There is no logical argument for returning to an unprotected 1970-1990s title and there seems to be no new option offered from the medical profession or related organisations.

If the word 'podiatric' is considered problematic (as indicated in the Board's Face Book request for input into the survey), a title change would not necessarily address this. Orthopedic surgeons or other practitioners that specialise in the foot and ankle care may draw on the term 'podiatric' (meaning 'the medical care and treatment of the foot') in their own service promotion, thereby adding to the confusion around the podiatric surgeon profession.

If the word causing concern in the protected title is 'surgeon', changing the title to 'surgical podiatrist' would be equally confusing: what does 'surgical' mean unless **to perform surgery**?

Given there is highly likely to be unintended outcomes, is it possible to move beyond what 'podiatric' means to a layperson and concentrate on the **scope of service** provided through the use of a term such as 'foot surgeon'.

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

There would be **no improvement** in public understanding of the profession by using 'surgical podiatrist' in place of 'podiatric surgeon'. In the latter, the noun is 'surgeon'. In the former the noun is 'podiatrist'. Confusion, if there is any, would grow with a term such as 'surgical podiatrist' because the term is less clear about the function of the specialist. 'Podiatric surgeon' indicates unambiguously that the person does surgery; whereas 'surgical podiatrist' does not clearly indicate this would be the case.

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

The Board notes that it recognises *‘the impact of these costs on practitioners’*, however, it *‘seeks to minimise the likely costs by setting an appropriate transition period before any changes are implemented. This will ensure currently registered podiatric surgeons have enough time to make changes to reflect the new title’*. Unfortunately, this does not indicate a deep understanding of the costs of setting up and running a podiatric surgery practice. Rather it suggests changes to business naming and advertising, not the broader costs that will no doubt be impacted.

Costs are likely to be extensive. Given podiatric surgeons are not at this stage covered under Medicare and are not able to work in the public system, most have to outlay considerable funds to build a small business practice to provide the benefit of their skills and training to people who can afford private health services.

Discussions with several podiatric surgeons in Australia indicate that most have substantial bank loans, staff and practice management costs and are in daily battle with negative input from colleagues in the broader medical community. Given there are around 40 podiatric surgeons in Australia, the time spent on title change versus improving public awareness of the services that can be provided by the podiatric surgeon profession is disappointing.

Further, the UWA course for a doctorate of podiatric medicine, followed by a doctorate of podiatric surgery, is a six-year total post graduate study course involving a high HECS debt.

A final consideration that has not yet surfaced in any of the reports/commentary is whether there is any chance of a change in **private health care insurance** for clients of podiatric surgeons or if a change in title might impact on **medical insurance** for podiatric surgeons.

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

As described in The Review, there appears to have been a long-term campaign to undermine podiatric surgery in Australia. As Professor Paterson expressed it:

‘The division of opinion reflects a longstanding ‘turf war’ between orthopaedic surgeons and podiatric surgeons. The review saw evidence of a coordinated campaign by various groups in the medical profession to remove title protection for podiatric surgeons and require their training programs to meet the standards of the Australian Medical Council (AMC) – the accreditation authority for the medical profession. This was reflected in the pattern of submissions from orthopaedic surgeons.’
(Page 10 of The Review)

Therefore, there is a high likelihood of significant backlash from some specialities within the medical fraternity that could drive podiatric surgeons out of business. There is a serious danger of the podiatric surgeon workforce becoming unsustainable. It is clear that these consequences were not the underlying intention of The Review.