



## Response template for providing feedback to public consultation on draft proposed professional capabilities

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The Podiatry Accreditation Committee welcomes your feedback on the draft proposed professional capabilities and the draft proposed accreditation standards.

Please use this response template to respond to the questions on the **draft proposed professional capabilities for podiatrists and podiatric surgeons**.

Please indicate which set of draft proposed professional capabilities you are providing feedback on by placing an 'X' in the box below. Please use a separate response template for each document you are providing feedback on.

Then provide your responses to all or some of the questions in the text boxes on the following pages. You do not need to respond to a question if you have no comment.

X	Draft proposed threshold professional capabilities for podiatrists
	Draft proposed professional capabilities for podiatric surgeons

Please submit your responses to the questions in the template by email to: [accreditationstandards.review@ahpra.gov.au](mailto:accreditationstandards.review@ahpra.gov.au) using the subject line 'Feedback on draft proposed professional capabilities for podiatrists and podiatric surgeons.'

**Feedback should be provided by Friday 12 March 2021.**

### Stakeholder details

Please provide your details in the following table:

<b>Name:</b>	Assoc Prof Caroline Robinson
<b>Organisation Name:</b>	Australasian Council of Podiatry Deans

## Your responses to the consultation questions

<p><b>1. Does any content need to be added to the draft proposed professional capabilities?</b></p> <p><b>In section 1.1</b> there is an absence of attention to other ‘isms’ including ageism and sexism. Suggest re-phrasing of the <b>key capability 1.1i</b> <i>Create a culturally safe and inclusive environment which enables care that is holistic and free of racism, ageism and sexism.</i></p> <p>A previous recommendation was made to add a reference to scope of practice to <b>key capability 1.3</b> Administer, obtain, possess, prescribe, sell, supply and use pharmaceutical products safely and effectively</p> <p>In order to clarify this key capability and reduce the risk of malpractice, it would seem appropriate to modify the wording to read <i>use pharmaceuticals safely and effectively <b>within scope of practice</b></i></p> <p><b>In 3.1a</b>, it is appropriate to highlight the specific needs of older people. Suggest that this could be integrated as: <i>a. Engage in culturally appropriate, safe, empathetic and sensitive communication that facilitates trust and the building of respectful relationships including with Aboriginal and Torres Strait Islander Peoples, those from culturally and linguistically diverse backgrounds, and older people.</i></p> <p>The important issue of health literacy is absent from this set of professional capabilities. This could be addressed in enabling components <b>section 3.2f</b> – suggested edit to add another first dot point: <i>the patient’s level of health literacy.</i></p>
<p><b>2. Does any content need to be amended in the draft proposed professional capabilities?</b></p> <p>Correction of minor typographical error in <b>1.4 c</b>. Explain the patient’s response to treatment to the patient, other health professionals, carers and disability support workers where appropriate.</p> <p><b>2.1e</b>. As currently phrased, this enabling component would be impossible to assess for a student i.e. <b>Manage</b> personal mental and physical health to ensure the podiatrist is able to practice safely at all times, including recognising the impact of stress and fatigue on physical and mental health.</p> <p>A suggested change was proposed previously to enable authentic assessment of this component: <b>demonstrate an awareness of the importance of personal mental and physical health to ensure the podiatrist is able to ...</b></p> <p><b>2.2b</b>. As currently phrased, this enabling component is problematic: <b>Display</b> culturally competent and culturally safe practice. The journey towards cultural competence is lifelong and who can judge whether a person is ‘culturally competent’?</p> <p>It is preferable to require a student/practitioner to ‘<i>demonstrate the values, knowledge, skills and attributes to ensure culturally safe and respectful practice</i>’. This aligns with the objectives of the National Scheme’s Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 202-2025 <a href="https://www.ahpra.gov.au/About-Ahpra/Aboriginal-and-Torres-Strait-Islander-Health-Strategy/health-and-cultural-safety-strategy.aspx">https://www.ahpra.gov.au/About-Ahpra/Aboriginal-and-Torres-Strait-Islander-Health-Strategy/health-and-cultural-safety-strategy.aspx</a></p> <p>Correction of minor typographical error in <b>2.4c</b>. Consider patient preferences for traditional or alternative treatments when <b>appropriate</b>.</p> <p>Correction of minor typographical error in 3.1a <i>Aboriginal and Torres Strait Islander <b>peoples</b>, (small ‘p’).</i></p> <p>It is important to add ‘relevant others’ to <b>key capability 3.2</b> otherwise it does not recognise the potential for a patient’s healthcare team to extend beyond health professionals e.g. social care professionals; extended family and community members. Suggested edit: <i>communicate and collaborate with the patient, family, relevant others and members of the patient’s healthcare team</i></p> <p>Similarly, this can be reflected in enabling components <b>section 3.2f</b> – suggest minor edit: <i>discuss and clarify with the patient and relevant others to confirm:</i></p> <p>As currently phrased, enabling components <b>section 5.2e</b> would be very difficult to assess. Additionally, it is also important to focus on risk mitigation. Suggested edit: <i>demonstrate an</i></p>

*awareness of policies and procedures to mitigate risks and ensure safe practice in the workplace, including the safe and effective use of pharmaceuticals.*

**3. Are there any potential unintended consequences of the current wording of the draft proposed professional capabilities?**

**4. Are there implementation issues the Accreditation Committee should be aware of?**

The 'enabling components' are stated as being measurable (**page 4**). A number of the enabling components have verbs that are not measurable (e.g. understand, recognise, respect). A review of the verbs is suggested to ensure that they are measurable.

**5. Do you have any general feedback on the draft proposed professional capabilities?**

Thank you for addressing previous feedback and modifying the language used for the professional capabilities.



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<input type="checkbox"/>
<input checked="" type="checkbox"/>

Draft proposed threshold professional capabilities for podiatrists

Draft proposed professional capabilities for podiatric surgeons

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## Your responses to the consultation questions

<p><b>1. Does any content need to be added to the draft proposed professional capabilities?</b></p>
<p><b>In section 1.1</b> there is an absence of attention to other ‘isms’ including ageism and sexism. Suggest re-phrasing of the <b>key capability 1.1k</b> <i>Create a culturally safe and inclusive environment which enables care that is holistic and free of racism, ageism and sexism.</i></p> <p><b>1.3d</b> there appears to be relevant point missing from the list, which is include in the professional competencies for podiatrists: <i>the patient’s preferences and goals for treatment.</i> Suggest that this is added as the final dot point in this section.</p> <p><b>In 3.1a</b>, it is appropriate to highlight the specific needs of older people. Suggest that this could be integrated as: <i>a. Engage in culturally appropriate, safe, empathetic and sensitive communication that facilitates trust and the building of respectful relationships including with Aboriginal and Torres Strait Islander Peoples, those from culturally and linguistically diverse backgrounds, and older people.</i></p> <p>The important issue of health literacy is absent from this set of professional capabilities. Thjs could be addressed in enabling components <b>section 3.2f</b> – suggested edit to add another first dot point: <i>the patient’s level of health literacy.</i></p>
<p><b>2. Does any content need to be amended in the draft proposed professional capabilities?</b></p>
<p><b>2.2b.</b> As currently phrased, this enabling component is problematic: <b>Display</b> culturally competent and culturally safe practice. The journey towards cultural competence is lifelong and who can judge whether a person is ‘culturally competent’?</p> <p>It is preferable to require a student/practitioner to ‘<i>demonstrate the values, knowledge, skills and attributes to ensure culturally safe and respectful practice</i>’. This aligns with the objectives of the National Scheme’s Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 202-2025 <a href="https://www.ahpra.gov.au/About-Ahpra/Aboriginal-and-Torres-Strait-Islander-Health-Strategy/health-and-cultural-safety-strategy.aspx">https://www.ahpra.gov.au/About-Ahpra/Aboriginal-and-Torres-Strait-Islander-Health-Strategy/health-and-cultural-safety-strategy.aspx</a></p> <p>Typographical correction in <b>Section 2.3</b> – duplication of lettering a,b,c ...</p> <p>Correction of minor typographical error in <b>3.1a</b> <i>Aboriginal and Torres Strait Islander peoples</i>, (small ‘p’).</p> <p>It is important to add ‘relevant others’ to <b>key capability 3.2</b> otherwise it does not recognise the potential for a patient’s healthcare team to extend beyond health professionals e.g. social care professionals; extended family and community members. Suggested edit: <i>communicate and collaborate with the patient, relevant others and members of the patient’s healthcare team</i></p> <p>Similarly, this can be reflected in enabling components <b>section 3.2f</b> – suggest minor edit: <i>discuss and clarify with the patient and relevant others to confirm:</i></p> <p><b>Section 5.2e</b> - also important to focus on risk mitigation. Suggested edit: <i>Contribute to the improvement of policies and procedures to mitigate risks and ensure safe practice in the workplace, including the safe and effective use of pharmaceuticals.</i></p>
<p><b>3. Are there any potential unintended consequences of the current wording of the draft proposed professional capabilities?</b></p>

**4. Are there implementation issues the Accreditation Committee should be aware of?**

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