

Frequently asked questions

January 2021

Registration standard and guidelines: Endorsement for scheduled medicines

The Podiatry Board of Australia's (the Board) *Endorsement for scheduled medicines registration standard* and associated guidelines came into effect on 1 August 2018. To help practitioners understand the Board's requirements, the Board has prepared some useful FAQ.

General questions about endorsement

What is an endorsement for scheduled medicines?

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

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

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

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

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

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

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

What are considered appropriate resuscitation facilities when administering methoxyflurane?

Appropriate resuscitation facilities would have adequate processes and equipment to perform advanced life support, should it be needed during or after administration of methoxyflurane.

Endorsed prescribers should be aware of the safety issues associated with methoxyflurane's administration.

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

The prescribing competencies required for endorsement for scheduled medicines are the prescribing competencies described in the NPS MedicineWise *Prescribing Competencies Framework*. *The NPS: Better choices, Better health. Competencies required to prescribe medicines: putting quality use of medicines into practice* is available on the [NPS MedicineWise website](#).

General questions about the registration standard and guidelines

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

The *Registration standard: Endorsement for scheduled medicines* and *Guidelines: Endorsement for scheduled medicines* that commenced on 1 August 2018 are published on the Board's [Endorsement for scheduled medicines page](#).

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

The *Registration standard: Endorsement for scheduled medicines* applies to all podiatrists and podiatric surgeons:

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

When did the registration standard and guidelines take effect?

The *Registration standard: Endorsement for scheduled medicines* and the *Guidelines: Endorsement for scheduled medicines* took effect on 1 August 2018.

The Board published time limited transitional arrangements for practitioners who, at 1 August 2018 were working towards an endorsement under Pathway 2 of the previous registration standard but had not yet submitted an application for endorsement. Practitioners who wanted to use the transitional arrangements needed to advise the Board by 1 September 2018.

Are there templates to support the registration standard?

Yes, templates are published on the [Endorsement for scheduled medicines page](#).

Where can I find the application form for endorsement?

The application form for endorsement for scheduled medicines is published on the [Forms](#) page of the Board's website.

Other relevant forms for practitioners using Pathway B, including an application to commence supervised practice form are also published on the [Forms](#) page of the Board's website.

FAQ for Pathway A

How do I meet the requirements for Pathway A?

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

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

There are currently no approved programs of study for the new Pathway A – see the next question for more information.

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

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

Recent graduate is defined in the *Registration standard: Endorsement for scheduled medicines* as:

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

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

Further information about the new Pathway A can be found in the *Registration standard: Endorsement for scheduled medicines* and *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

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

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

The accreditation authority for the podiatry profession, the Podiatry Accreditation Committee will develop new accreditation standards. Once the new accreditation standards are approved by the Board, they will set the standards that education providers need to meet to be accredited for the new Pathway A.

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

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

Are there any programs of study that are substantially equivalent to, or based on similar competencies to, an approved program of study for the new Pathway A?

No. As there are currently no approved programs of study for Pathway A, it is not possible to assess a program of study as substantially equivalent to, or based on similar competencies to, an approved program.

[FAQ for Pathway B](#)

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

The prescribing competencies required for endorsement for scheduled medicines are the prescribing competencies described in the NPS MedicineWise *Prescribing Competencies Framework*. *The NPS: Better choices, Better health. Competencies required to prescribe medicines: putting quality use of medicines into practice* are available on the [NPS MedicineWise website](#).

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

How do I meet the requirements for Pathway B?

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

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

- development of a portfolio of evidence for assessment by the Board.

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

Information on the requirements for Pathway B can be found in the *Registration standard: Endorsement for scheduled medicines* and *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

How do I obtain an approved qualification in podiatric therapeutics?

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

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

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

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

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

There is a specific form to apply to commence supervised practice - *Application to commence supervised practice - Endorsement for scheduled medicines Pathway B - AASP-70*.

The form is available on the [Forms](#) page of the Board's website.

What are approved online case studies?

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

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

Information about approved online case studies is in the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

A list of the online case studies approved by the Board for Pathway B can be found on the [Endorsement for scheduled medicines page](#).

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

Online case studies were previously called 'web-based case studies' in the endorsement for scheduled medicines registration standard that was in effect until 31 July 2018. The content of the 'web-based case studies' and the 'online case studies' is the same – it is just the name that changed to better reflect the nature of these case studies.

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

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

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

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

Information about these requirements is in the *Registration standard: Endorsement for scheduled medicines* and *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

There is a specific form to apply to commence supervised practice - *Application to commence supervised practice - Endorsement for scheduled medicines Pathway B - AASP-70*.

The form is available on the [Forms](#) page of the Board's website.

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

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

What does the period of supervised practice involve?

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

The period of supervised practice and portfolio of evidence must meet the requirements of the *Registration standard: Endorsement for scheduled medicines* and *Guidelines: Endorsement for scheduled medicines*.

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

Information about the requirements for supervised practice under Pathway B is in the *Registration standard: Endorsement for scheduled medicines* and *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

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

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

The minimum 150 hours is made up of:

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

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

Information about the requirements for supervised practice under Pathway B is in the *Registration standard: Endorsement for scheduled medicines* and *Guidelines Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

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

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

An application form for an extension to the period of supervised practice is available on the [Forms](#) page of the Board's website

What is the role of the mentor?

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

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

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

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

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

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

Your mentor is required to progressively sign and date each piece of evidence in your portfolio. Verification by your mentor of the content of the evidence in your portfolio will help ensure that your

portfolio accurately reflects that you have completed the Board's requirements for supervised practice and have met the required prescribing competencies.

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

The template *Certification of completion of supervised practice (Pathway B)* is available on the [Endorsement for scheduled medicines page](#) of the Board's website.

Information about mentors, including the role and responsibilities of a mentor, is in Appendix 1 of the *Guidelines: Endorsement for scheduled medicines*. The guidelines are published on the [Endorsement for scheduled medicines page](#).

Who can be my mentor?

Your mentor can be either:

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

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

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

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

Further information about the requirements for a mentor is in Appendix 1 of the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

Who cannot be my mentor?

Your mentor must meet the requirements for a mentor as set out in the *Guidelines: Endorsement for scheduled medicines* at Appendix 1. Please see the previous question.

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

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

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

A change of mentor form is available on the [Forms](#) page of the Board's website.

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

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

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

A change of mentor form is available on the [Forms](#) page of the Board's website.

What is an attending prescribing clinician?

The attending prescribing clinician for the clinical sessions you are observing will be an experienced health practitioner who can prescribe scheduled medicines. This may be your mentor or another health practitioner.

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

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

Information about the attending prescribing clinician is in the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

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

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

Each clinical study that you develop for your portfolio of evidence will be based on your reflection of the relevant observational clinical session and subsequent discussions with your mentor.

What is the purpose of a portfolio of evidence?

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

What is included in my portfolio of evidence?

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

The evidence in your portfolio must demonstrate clearly and in detail that you have dealt with a diverse range of patient cases and clinical settings involving the use of scheduled medicines in the management of podiatric conditions, and demonstrate that you have the required prescribing competencies to be able to safely and effectively administer, obtain, possess, prescribe, sell, supply or use the scheduled medicines in the *National podiatry scheduled medicines list* for the treatment of podiatric conditions.

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

It is up to you to decide what additional types of evidence you include in your portfolio to demonstrate that you have met each of the competencies described in the NPS MedicineWise *Prescribing Competencies*

Framework, and that you have the related podiatric-specific knowledge, skills and behaviours for each competency.

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

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

Information on the evidence to be included in your portfolio, including examples of evidence, is set out in Appendix 2 of the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

Does my portfolio of evidence need to include clinical studies or other evidence that cover all of the medicines in the *National Podiatry Scheduled Medicines List*?

No. The evidence in your portfolio does not need to cover every medicine in the *National Podiatry Scheduled Medicines List*.

However, the clinical studies and other evidence that you include in your portfolio must clearly demonstrate that you have dealt with a diverse range of patients and medical conditions in a variety of settings involving the use of a broad range of scheduled medicines from the *National Podiatry Scheduled Medicines List* in the management of podiatric conditions, and demonstrate you have the required prescribing competencies to have your registration endorsed for scheduled medicines.

Your portfolio must include at least 15 de-identified clinical studies and a reflective journal. The clinical studies included in your portfolio must meet the specific requirements for clinical studies which are described in Appendix 2 of the *Guidelines: Endorsement for scheduled medicines*.

In order to meet these requirements, the Board expects that your clinical studies will cover a broad range of scheduled medicines across the different classes of medicines in the *National Podiatry Scheduled Medicines List*.

How do I present the evidence in my portfolio?

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

A sample portfolio of evidence is published on the [Endorsement for scheduled medicines page](#). The sample portfolio, including the example evidence matrix and log of activities, are intended to provide guidance only and are not representations of a completed portfolio, evidence matrix or log of activities.

A template evidence matrix that you can use is published on the [Endorsement for scheduled medicines page](#).

The template evidence matrix reflects the work of the ASPRINH project*.

Rather than listing the 73 competencies from the NPS MedicineWise *Prescribing Competencies Framework*, the template evidence matrix lists the condensed set of essential prescribing skills, (arranged in 22 competency areas and consisting of 45 essential prescribing skills) within each competency area.

It is recommended that you progressively complete the evidence matrix as it forms an important checklist for you to ensure that evidence of all areas of prescribing practice are included in your portfolio prior to submission.

*The ASPRINH (Assessment of Prescribing in Health) Project, a national multi-professional project, condensed the 73 performance criteria contained in the PCF to a set of essential prescribing skills, referenced to the PCF. These essential skills are detailed in the *Prescribing Assessment Toolkit* which can be found [here](#).

Further details about the ASPRINH Project and how these skills were developed can be found [here](#).

What are the requirements for the Log of activities that I must include in my portfolio of evidence?

The log of activities is developed progressively during your period of supervised practice. You should take it to each activity you undertake during your period of supervised practice. It must be signed by the relevant practitioner involved in the activity with you on the day. For example, the attending prescribing clinician for each observational clinical session must sign the entry for each session.

A template Log of activities is published on the [Endorsement for scheduled medicines](#) page of the Board's website.

The template includes information about what must be included in the Log of activities and also includes some examples of entries in the log.

What are clinical studies?

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

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

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

The clinical studies must meet the specific requirements for clinical studies which are described in detail in Appendix 2 of the *Guidelines: Endorsement for scheduled medicines*.

A template for a clinical study is published on the [Endorsement for scheduled medicines page](#). A table providing guidance on how to complete the clinical study is attached to the template.

All clinical studies must be accompanied by a sample completed prescription that you have prepared for that individual patient. The sample prescription must demonstrate your ability to clearly and unambiguously prescribe the scheduled medicines in the *National podiatry scheduled medicines list*.

Sample clinical studies together with sample prescriptions are included in the sample portfolio of evidence published on the [Endorsement for scheduled medicines page](#).

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

As required by the *Registration standard: Endorsement for scheduled medicines*, three of the clinical studies must be submitted to the Board for assessment after you have completed at least 25 hours of supervised practice.

Further information about the initial assessment is in the *Guidelines: Endorsement for scheduled medicines* (see 2.2.7 *Assessment - Initial assessment of clinical studies*), published on the [Endorsement for scheduled medicines page](#).

Can I submit a clinical study with local anaesthetic as the only scheduled medicine?

No. The use of local anaesthetic falls within the capability of all registered podiatrists. A clinical study with local anaesthetic only does not demonstrate the additional capabilities required for endorsement for scheduled medicines.

While you can include local anaesthetic in a clinical study, the clinical study should also include other scheduled medicines from the *National Podiatry Scheduled Medicines List*.

For example, an antibacterial may be prescribed in conjunction with the administration of local anaesthetic for the management of an infected ingrown toenail.

Do I need to include a prescription for local anaesthetic if this is used as part of my clinical study?

No, you don't need to include local anaesthetic in the written prescription that accompanies your clinical study.

Clinical studies should be reflective of podiatry clinical practice. Local anaesthetic is administered as part of podiatry clinical practice without a written prescription.

All the necessary elements of safe practice relating to the use of local anaesthetics, including dosage calculation and counselling/education must be included as part of your clinical study.

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

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

The clinical studies must meet the requirements set out in Appendix 2 of the *Guidelines: Endorsement for scheduled medicines* and be accompanied by a brief report from you which outlines which of the prescribing competencies are demonstrated in each clinical study.

A template for a clinical study is published on the [Endorsement for scheduled medicines page](#). A table providing guidance on how to complete the clinical study is attached to the template.

A form for you to submit your clinical studies for initial assessment is published on the [Forms](#) page of the Board's website. You must use this form every time you submit clinical studies to the Board for initial assessment.

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

Further information about the clinical studies and the initial assessment is in the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

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

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

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

You cannot re-submit any clinical study you have previously submitted.

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

Further information about the requirements for clinical studies is in Appendix 2 of the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

What is required for a reflective journal?

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

It must include a log of the activities that you have undertaken during your period of supervised practice. The

attending prescribing clinician at each observational clinical session you have attended must sign and date the entry in the log for each attendance.

A sample log of activities is published on the [Endorsement for scheduled medicines page](#).

Examples of what can be included in the reflective component of the journal are in Appendix 2 of the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

The sample portfolio of evidence that is published on the [Endorsement for scheduled medicines page](#) includes some examples of the types of evidence that could be included in the reflective journal.

When can I submit my application for endorsement?

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

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

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

The application form is available on the [Forms](#) page of the Board's website.

FAQ for mentors - Pathway B

What is the role of a mentor?

The role of a mentor of a podiatrist or podiatric surgeon working towards endorsement for scheduled medicines is an important one. As a mentor, you will oversee the practitioner's period of supervised practice and have a key role in ensuring they understand the requirements for safe and effective prescribing of scheduled medicines for the treatment of podiatric conditions. Through your knowledge and experience in prescribing, you will provide support for the development of their skills to safely and effectively prescribe scheduled medicines.

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

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

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

Information about mentors, including the role of a mentor, is in Appendix 1 of the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).

What are my responsibilities as a mentor?

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

In assessing whether you have the skills and time to take on the role of mentoring a podiatrist or podiatric surgeon, you should consider the description of the role as set out in Appendix 1 of the *Guidelines: Endorsement for scheduled medicines* and take into account the time commitment for the role.

You must be familiar with and understand the Board's *Registration standard: Endorsement for scheduled medicines*; the *Guidelines: Endorsement for scheduled medicines*, the *National podiatry scheduled medicines list* (Attachment A to the registration standard) and the *Clinical practice guidelines: Endorsement for scheduled medicines*. You must also understand the NPS MedicineWise *Prescribing Competencies Framework*, and Quality Use of Medicines (QUM).

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

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

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

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

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

Further information about mentors, including the responsibilities of a mentor can be found in Appendix 1 of the *Guidelines: Endorsement for scheduled medicines*, published on the [Endorsement for scheduled medicines page](#).