



# Podiatrists Board of New Zealand

# NEWSLETTER

September 2004

## CHAIR'S INTRODUCTION

The Health Practitioners Competence Assurance Act comes into force on September 18th, and the Podiatrists Board is confident that the years of work and consultation completed have prepared us well for this day. While the Board, NZ Society of Podiatrists, NZ College of Podiatric Surgery and other groups have worked to communicate developments all along the way, we are aware that many podiatrists will still be less than familiar with the requirements of the new Act. This Newsletter therefore draws the most important aspects of the Act together for practitioners – to ensure at least basic awareness, and to stimulate further thought and reference to available information.

The HPCA Act is no longer an abstract proposal from the Ministry, but a hard piece of legislation that significantly affects how we each carry out our professional practice. The Board strongly encourages all podiatrists, (both practising and those currently non-practising) to read this newsletter thoroughly, to discuss it with their colleagues, and to take whatever steps necessary to ensure they are fully familiar with the

requirements of the Act that will affect their practice in the days and years ahead.

This newsletter, however, is intended to be read only as an introduction to the HPCA Act and is not intended to cover it in detail. It is the responsibility of all practitioners to familiarise themselves with the legislation under which they are bound by law to observe. The HPCA Act has 7 Parts of which Parts 6 & 7 concentrate on Board administrative matters. The first 5 Parts relate to matters affecting practise in general as well as practitioner's competence to practise and I would therefore encourage all practitioners to read and familiarise themselves with Parts 1, 2, 3, 4 and 5 of the Act.

Along with my Board colleagues I look forward to the positive challenges ahead for the profession, which are provided by the introduction of the new Act.

## PODIATRISTS AND THE PURPOSE OF THE HEALTH PRACTITIONERS COMPETENCE ASSURANCE ACT 2003

*Podiatrist means a health practitioner who is, or is deemed to be, registered with the Podiatrists Board continued by Section 114(1)(a) of the HPCA Act as a practitioner of the profession of podiatry.*

The principal purpose of this Act is to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practice their professions.

The Act seeks to attain its principal purpose by providing for, among other things:

- (a) a consistent accountability regime for all health professions; and
- (b) the determination for each health practitioner of the scope of practice within which he or she is competent to practise; and
- (c) systems to ensure that no health practitioner practises in that capacity outside his or her scope of practice; and
- (d) power to restrict specified activities to particular classes of health practitioner to protect members of the public from the risk of serious or permanent harm; and
- (e) certain protections for health practitioners who take part in protected quality assurance activities; and
- (f) additional health professions to become subject to this Act.

## SPECIFYING SCOPES OF PRACTICE

In order to meet the requirements of Section 11 of the HPCA Act, and after extensive consultation and deliberation, the Podiatrists Board has formally adopted four scopes of practice for the profession, and the qualification specifications for each scope.

### 1. PODIATRIST

A registered primary health care practitioner (including those previously registered as a chiroprapist) who utilises medical, physical, palliative and surgical means other than those prescribed in the Podiatric Surgeon Scope of Practice, to provide diagnostic, preventative and rehabilitative treatment of conditions affecting the feet and lower limbs.

#### **Qualification**

A Bachelor of Health Science in Podiatry from an accredited New Zealand University or equivalent overseas qualification as determined by the Podiatrists Board.

### 2. PODIATRIC SURGEON

A registered primary health care practitioner who holds the scope of practice of podiatrist and is further qualified to perform foot surgery

by way of sharp toe nail wedge resection; surgical correction of lesser digital deformities affecting the phalanges, metatarsals and associated structures; surgical corrections of deformities affecting the first toe, first metatarsal and associated structures; surgical correction of osseous deformities of the metatarsus, mid-tarsus, rearfoot and associated structures; surgical correction and removal of pathological subcutaneous structures such as tendinous and nervous tissues and other connective soft tissue masses of the foot.

### **Qualification**

A Post Graduate qualification in Podiatric Surgery as determined by the Podiatrists Board or equivalent overseas qualification.

### **3. PODIATRIC RADIOGRAPHIC IMAGER**

A registered primary health care practitioner who holds the scope of practice of podiatrist, who is qualified to use radiological equipment, and is licensed by the National Radiation Laboratory, to obtain plain radiographic images of the foot, ankle and lower leg.

### **Qualification**

As part of the New Zealand undergraduate Bachelor of Health Science in Podiatry or satisfactory completion of an accredited post graduate training course in podiatric radiography.

### **4. PODIATRIC PRESCRIBER**

A registered primary health care practitioner who holds the scope of practice of podiatrist and is further qualified to prescribe a list of medications approved by the Podiatrists Board. (Subject to prescribing rights being granted by the New Prescribers Advisory Committee).

### **Qualification**

A Post Graduate qualification in Podiatric Prescribing as determined by the Podiatrists Board or equivalent overseas qualification.

Please note that the definition of podiatrist and ensuing registration and competence requirements, also includes those practitioners practising or qualified under the title of *chiropodist*.

The Board thanks all stakeholders who took the time to reflect on this matter and make known their views and suggestions. The Board continues to develop the policies and procedures that will operationalise and underpin the scopes. Consultation with the profession and other stakeholders will continue.

## **WHAT DOES THIS MEAN FOR ME?**

On 18 September 2004, when the HPCA Act officially comes into effect, all podiatrists registered under the Medical and Dental Auxiliaries Act 1966 will be deemed to be registered under the general **“podiatrist”** scope of practice. You do not need to re-register under the new Act, or apply for a general scope of practice if you are currently registered.

The Board has further resolved that all practitioners with current annual practising certificates are deemed to be practising in all the scopes of practice (if more than one) that they currently practice in, after the implementation of the Act until the renewal of their Annual Licence (now to be called Annual Practising Certificate or APC) before 1 April.

Before APCs are renewed, practitioners will be required to apply for registration in the scopes of practice that they wish to practice in.

A form to apply for the extra scope(s) of practice will be available on the Board's website and from the Registrar's office.

## **PRACTICALITIES: RENEWAL OF PRACTISING CERTIFICATES**

Annual Practising Certificates (APCs) issued before 18 September 2004 will continue through to 31 March 2005. To assist you in maintaining a current and legal registration status, the Board will be posting applications for practising certificates in January 2005. Application forms and payment of the fee of \$550 should be sent to the Registrar's office before 25 February 2005 to allow for the bulk of practising certificates to be sent out before 31 March 2005.

*Payments received after the due date will increase to \$650.* As in the past, the New Zealand Health Information Survey will be part of the APC mail-out.

Under the new Act, applying for an APC includes the following minor changes:

- All existing registered podiatrists will be registered in the general **“Podiatrist”** scope of practice. The title of each of the podiatrist's extra scope(s) of practice will be endorsed on their practising certificate.
- There will be more address details and other contact information required.
- A statutory declaration of competence will need to be signed and witnessed.
- Bulk payments of registration fees from employers cannot be accepted. Individuals will have the responsibility of ensuring that their registration fee is paid on time.

## **REQUIREMENTS FOR NON - PRACTISING PODIATRISTS**

The Act allows under section 27(1)(f) that those podiatrists who have not practiced for three years may have to provide evidence of their competence, which may include undergoing further training or completing a competence programme required by the Board, in order to obtain an APC.

## **WHAT INFORMATION ON THE PODIATRISTS REGISTER IS AVAILABLE TO THE PUBLIC?**

Under the Med Aux Act 1966 a 'register' address for all registered podiatrists was able to be made known to any member of the public who asked for that information. The Board, under section 138 of the HPCA Act, resolved to make only the minimum legal information available on the public register. This does not include addresses of registered podiatrists, but does include name, registration qualifications, scope(s) of practice, any changes to scope(s) of practice (e.g. conditions imposed), and whether an annual practising certificate or interim practising certificate is held.

The information on the public register may be shared with the Ministry of Health's new Health Practitioner Index (HPI) project at some future date.

Members of the public who enquire of the Board contact details for registered podiatrists will be referred to the Yellow or White Pages. The Board for communication purposes may collect other information, including address, telephone and email addresses, but this information does not form part of the public register.

## CHANGING ADDRESS AND NAME DETAILS

Registered podiatrists are required under the Act to promptly give the Registrar of the Board written notice of any change in postal address, residential address and, if applicable, work address. Within one month after a registered podiatrist changes his/her name, written notice of the new name must be given to the Registrar.

## NEW INFORMATION ABOUT COMPLAINTS AND DISCIPLINE

Under the Act, there will be major changes to the way in which concerns about, and complaints against, registered podiatrists are processed. A range of new mechanisms has been established that enable the Board to exercise more flexibility in addressing concerns about podiatrists' practice, fitness and competence in a constructive and rehabilitative manner. The new Health Practitioners Disciplinary Tribunal (HPDT) will be in operation and will hear the most serious of cases. More information about the HPDT will be available from their website after 18 September 2004.

## NEW PROVISIONS TO UNDERTAKE COMPETENCE REVIEWS

The Podiatrists Board is required to oversee a system providing for Competence Reviews ("Reviews") and Competence Programmes ("Programmes"). Reviews and Programmes are not disciplinary in nature. A review is to assess the podiatrist's competence, and is therefore **evaluative and educational** in nature. Any Programme arising from a review is remedial in nature.

There has to be significant concerns prompting Reviews, and the requests for these Reviews are likely to come from professional colleagues, employers, organisations such as the Health and Disability Commissioner, and the Board (via PCCs). The Board has the legal right to disregard concerns raised by other health practitioners if seen as frivolous or vexatious.

**The Board may at any time review the competence of a registered podiatrist holding a current practising certificate, whether or not there is reason to believe that the podiatrist's competence may be deficient.**

A Competence Review Panel ("Panel") will be appointed consisting of practitioners who are clinically competent, have good interpersonal skills, and have some knowledge of performance and educational assessment relevant to the scope of the person being reviewed. The practitioner

being reviewed will be told about the substance of the concerns and the activities used to assess competence. These activities may include reviewing written work, files, and interviews with the practitioner, as well as commonly accepted assessment tools. This practical component of the Review may take from half a day to a full day depending on the breadth of the problem.

Within a month of conducting the Review, the Panel writes a report to the Board. If the Panel has determined that the practitioner does not meet required competence standards, then the Board must make one or more of the following orders specified in the Act:

- That the practitioner undertakes an individual competence programme. If this is the case, the Board works with the practitioner to collaboratively develop a Programme to fill the gaps in skill, as described in the Review. This will include specific objectives, educational activities, and an agreed process of reporting or reassessment at the end of the process. The Programme may also include the appointment of an educational or clinical supervisor. The Practitioner meets the cost of completing this programme;
- That one or more conditions be included in the practitioner's scope of practice;
- That the practitioner sit a specified examination or assessment;
- That the practitioner be counselled or assisted by one or more nominated persons.

The Board will meet the cost of a review.

## ON-GOING COMPETENCE / RECERTIFICATION PROGRAMMES

Under Section 40 of the Act, the Board may set or recognise competence programmes for all podiatrists or groups of podiatrists. The Board has commenced planning the framework for the development of programmes and the profession will be informed of options and given an opportunity to provide input in due course.

The Board is still exploring options but is expected to propose basing any competence programmes on the self-directed formula underpinned by:

- critical/ self competency appraisal
- development of an objective achievement plan/programme to be presented to the Board
- formally assessed modules
- recording/ logging of competence activities (logbook & portfolio)
- annual practitioner statutory self declaration of competence

Accredited providers will submit their course/module outlines to the Board for accreditation as part of the Recertification Framework Criteria for practitioners to participate in, to enable them to tailor their own competence programme pathway.

The Board proposes to run random annual audits to enable all practitioners the opportunity to show the Board how they are keeping up their competence levels, over a 5 year period.

## NEW CULTURAL COMPETENCE REQUIREMENTS

Section 118 (i) of the Act states that standards of cultural competence are to be observed by health practitioners of the profession. *Cultural competence could be defined as a consistent demonstration of a recognition and acceptance of the customary beliefs, social forms, and material traits of all religious and social groups.* Work is currently being done to develop these standards.

The Board is also required under the Act to set standards of clinical competence and ethical conduct to be observed by registered podiatrists.

## OTHER NEWS:

### PODIATRISTS BOARD SUBMISSION FOR EXTENDED PRESCRIBING RIGHTS

The Board has consulted widely over this submission, and generally the response has been very positive with nearly a 30% response rate. Work is now in its final stages before the submission will be presented before the Ministry of Health's New Prescribers Advisory Committee.

### APPLICATIONS FOR REGISTRATION BY OVERSEAS APPLICANTS

The Board is now implementing changes to take over the administration of this process from the Australasian Podiatry Council. The candidates are now able to sit the Stage II examinations in Auckland at the Auckland University of Technology (AUT), no longer requiring the candidate to travel to Australia.

The Trans-Tasman Mutual Recognition Act remains unaffected by the new HPCA Act and applications received from podiatrists already registered in Australia (excluding Northern Territory) are able to register in New Zealand under the same process and requirements. They will however be required to be registered within all their scope/s of practice like everyone else.

## FEES

### ANNUAL PRACTISING CERTIFICATE FEES

For registered podiatrists, the standard APC year is from 1 April until 31 March. The Board has not changed the current APC fee under the new Act and it remains at \$550.00 per annum. All fees will be reviewed in one year's time following an assessment of any further financial impact of the HPCA Act implementation.

Please note that the previous increase of APC fee for the 2004-2005 year was the result of extra expense to the Board due to a) a large increase in the volume of work for the Board with the introduction of the HPCA legislation and b) a costly disciplinary tribunal hearing in 2003. The Board is satisfied, however, that the cost of the APC fee for podiatrists compares very favourably with the same expense incurred by practitioners of other health professions with a similar number of practising practitioners: for example the APC fee for chiropractors is \$1,100 p.a. and osteopaths \$560 for 6 months.

## REMINDERS

There will be no reminders sent out next year for the 2004/2005 renewal of Annual Practising Certificates. The fee will remain at \$550, however will increase to \$650 for those with a current APC who make payments after 31 March 2005. The Board's finance assistant would also appreciate that payments were not made by post-dated cheques.

## DISCIPLINARY LEVY

The Board advises that if there are any further disciplinary cases in the future, the Board will reluctantly be forced to introduce a discipline levy. The Board also advises that practitioners be vigilant in advising the Board if they have knowledge of any podiatrist practising without a current APC, or anyone practising whilst unregistered.

## RECORD KEEPING

The Board has been notified by the ACC Medical Misadventure Unit that there have been a number of cases where they have had concerns about the standard or lack of record keeping. It is every registered podiatrist's legislative requirement and responsibility to keep detailed and accurate records as specified in the Board's Code of Ethics. The Code of Ethics and Code of Practice are both accessible on the Board's website [www.podiatristsboard.co.nz](http://www.podiatristsboard.co.nz) or [www.regboards.co.nz/podiatrists/](http://www.regboards.co.nz/podiatrists/).

## PODIATRISTS BOARD MEMBERS

Current Board members: Trevor Tillotson (Chair), Merron Wilkes (Deputy Chair), Paul Craig, Greg Coyle, Michele Garrett, Margaret Jamieson (lay member) and Geoff Mariu (lay member).

Staff: Annabel Whinam (Registrar), Andrew Symonds (Emergency Acting Registrar).

## THE BOARD'S WEBSITE

Go to <http://www.regboards.co.nz/podiatrists/>.

The Board is currently preparing up to date information to be posted on the website to replace information applicable under the Medical and Dental Auxiliaries Act 1966. HPCA Act 2003 updates are easily accessible from the home page. There will be a period of construction in the week before and after 18 September while new information is finalised and published. Feedback on the website is always welcome and suggestions for improvements can be emailed to the Registrar.

## CONTACTING THE BOARD

**Contact with the Board is through it's Wellington office at :**

Level 21,  
Grand Plimmer Tower,  
2-6 Gilmer Terrace, Wellington  
Tel: (04) 499 7979 , Fax: (04) 472 2350  
Email: [podiatrists@regboards.co.nz](mailto:podiatrists@regboards.co.nz)  
Website: [www.podiatristsboard.org.nz](http://www.podiatristsboard.org.nz)

**Post all correspondence to:**

The Registrar,  
Podiatrists Board,  
PO Box 10-140, Wellington