



Promoting higher quality

**The Quality Assurance Agency
for Higher Education**

**Benchmark statement:
Health care programmes**

Phase 1

Podiatry (chiropody)

Subject benchmark statements: Health care programmes

Subject benchmark statements provide a means of describing the nature and characteristics of programmes of study and training in health care. They also represent general expectations about standards for the award of qualifications at a given level and articulate the attributes and capabilities that those possessing such qualifications should be able to demonstrate.

Subject benchmark statements are used for a variety of purposes. Primarily, they are an important external source of reference when new programmes are being designed and developed. They provide general guidance for articulating the learning outcomes associated with the programme but are not a specification of a detailed curriculum. Benchmark statements provide for variety and flexibility in the design of programmes and encourage innovation within an agreed overall conceptual framework.

Subject benchmark statements also provide support in the pursuit of internal quality assurance. They enable the learning outcomes specified for a particular programme to be reviewed and evaluated against agreed general expectations about standards.

Finally, subject benchmark statements are one of a number of external sources of information that are drawn upon for the purposes of academic review* and for making judgements about threshold standards being met. Reviewers do not use subject benchmark statements as a crude checklist for these purposes however. Rather, they are used in conjunction with the relevant programme specifications, the associated documentation of the relevant professional and statutory regulatory bodies, the institution's own self evaluation documentation, together with primary data in order to enable reviewers to come to a rounded judgement based on a broad range of evidence.

The benchmarking of standards in health care subjects is undertaken by groups of appropriate specialists drawn from higher education institutions, service providers and the professional and statutory regulatory bodies. The statements represent the first attempt to make explicit in published form the general academic characteristics and standards of awards in these subjects in the UK. In due course, the statements will be revised to reflect developments in the subjects and the experiences of institutions, academic review and others that are working with it.

* academic review in this context refers to the Agency's arrangements for external assurance of quality and standards. Further information regarding these may be found in the Handbook for academic review, which can be found on the Agency's web site.

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Contents

Foreword	1
An emerging health professions framework	2
A Expectations of the health professional in providing patient/client services	2
B The application of practice in securing, maintaining or improving health and well being	3
C Knowledge, understanding and skills that underpin the education and training of health care professionals	5
Benchmark statement for podiatry	6
Introduction	6
Nature and extent of programmes in podiatry	7
A The podiatrist working as a professional	8
B The application of practice in podiatry	9
C Subject knowledge, understanding and skills that underpin the education and training of a podiatrist	11
Teaching, learning and assessment	14
Teaching and learning in podiatry	14
Assessment	14
Academic and practitioner standards	15
Appendix 1	17
Podiatry (chiropractic) benchmark group membership	17
Appendix 2	18
Benchmark steering group membership	18

Foreword

This benchmark statement describes the nature and standards of programmes of study in podiatry (chiropody), that leads to awards made by higher education institutions in the United Kingdom (UK) in the subject.

It has been developed in collaboration with a number of other health care professions and these are listed below. Although initial work was undertaken in subject specific groups, the analysis of these early drafts identified a number of features which all the subject groups shared. It was, therefore, agreed by each of the specialist benchmark groups that their respective statements could be cast using a common structure. As work progressed it became increasingly apparent that there was considerable overlap within the details of the subject-specific statements and a common health professions framework was emerging. This emerging framework is, accordingly, displayed in each of the subject statements in order to illustrate on the one hand, the shared context upon which the education and training of health care professionals rests and, on the other, the uniquely profession-specific context within which programmes are organised. It is important to emphasise that benchmark statements are not cast in tablets of stone and will need to be revisited in the light of experience and further developments in health care. Moreover, we are confident that the emerging framework has the potential to embrace other health related professions such as social work, dentistry, medicine and other therapies. It is anticipated that further work in a second phase of the project could lead to an overarching health professions framework.

The initial section of this statement sets out the health professions framework under three main headings:

- A Expectations of the health professional in providing patient/client services;
- B The application of practice in securing, maintaining or improving health and well-being;
- C The knowledge, understanding and skills that underpin the education and training of health care professionals.

The main section of this statement, in addition to describing the nature and extent of programmes leading to awards in podiatry (chiropody), describes the profession-specific expectations and requirements under the same three categories.

The key feature in this statement, as in the associated statements, is the explicit articulation of the academic and practitioner standards associated with the award in podiatry (chiropody). This duality reflects the significance of the academic award as the route to registration for professional practice and formal recognition by the professional and statutory regulatory bodies. The threshold standards set out the expectations of health professionals entering their first post immediately on qualification.

The section on standards accords with the relevant level descriptor for awards in the qualifications frameworks published by the Quality Assurance Agency for Higher Education.

The section on teaching, learning and assessment draws attention to the central role of practice in the design of learning opportunities for students and the importance of ensuring that professional competence developed through practice is adequately assessed and rewarded. It also notes how essential it is that the integration of theory and practice is a planned process within the overall arrangements made for teaching and learning.

The statement acknowledges the need to put the prospective client/patient at the centre of the student's learning experience and to promote within that experience the importance of team-working and cross-professional collaboration and communication. Implicit in the statement are the opportunities that exist for shared learning across professional boundaries, particularly in the latter stages of training when inter-professional matters can be addressed most productively. It is essential that the opportunities that exist for shared learning in practice are optimised, as well as best use being made of similar opportunities that prevail more obviously in classroom-based activities.

This statement and the associated statements will therefore allow higher education institutions, in partnership with service providers (where appropriate), to make informed curriculum choices about the construction of shared learning experiences. In this context, shared learning is seen as one of a number of means of promoting improved collaborative practice and addressing a range of issues which span professional accountability and professional relationships.

Finally, the statement does not set a national curriculum for programmes leading to awards in podiatry (chiropody). It acknowledges that the requirements of the professional and statutory regulatory bodies need to be incorporated into the design of programmes. It seeks to encourage higher education institutions and service providers to work collaboratively in the design and delivery of their curricula. Its essential feature is the specification of threshold standards, incorporating academic and practitioner elements, against which higher education institutions are expected, as a minimum, to set their standards for the award.

¹ *Dietetics, Health Visiting, Midwifery, Nursing, Occupational Therapy, Orthoptics, Physiotherapy, Podiatry (Chiropody), Prosthetics and Orthotics, Radiography, and Speech & Language Therapy.*

An emerging health professions framework

The subject specific statements for podiatry have been set within the emerging health professions framework outlined below. As indicated in the foreword, this framework developed as a result of the benchmarking work undertaken collaboratively by 11 different health professional groups. Further evolution of the framework is anticipated through a second phase of the project which will address its goodness of fit with a range of other health and social care professions benchmark statements.

A Expectations of the health professional in providing patient/client services

This section articulates the expectations of a registered professional within health and social care services. It describes what is regarded as a minimum range of expectations of a professional that will provide safe and competent practice for patients/clients in a variety of health and social care contexts.

A1 Professional autonomy and accountability

The award holder should be able to:

- maintain the standards and requirements of professional and statutory regulatory bodies;
- adhere to relevant codes of conduct;
- understand the legal and ethical responsibilities of professional practice;
- maintain the principles and practice of patient/client confidentiality;
- practise in accordance with current legislation applicable to health care professionals;
- exercise a professional duty of care to patients/clients/carers;
- recognise the obligation to maintain fitness for practice and the need for continuing professional development;
- contribute to the development and dissemination of evidence-based practice within professional contexts;
- uphold the principles and practice of clinical governance.

A2 Professional relationships

The award holder should be able to:

- participate effectively in inter-professional and multi-agency approaches to health and social care where appropriate;
- recognise professional scope of practice and make referrals where appropriate;
- work, where appropriate, with other health and social care professionals and support staff and patients/clients/carers to maximise health outcomes;
- maintain relationships with patients/clients/carers that are culturally sensitive and respect their rights and special needs.

A3 Personal and professional skills

The award holder should be able to:

- demonstrate the ability to deliver quality patient/client-centred care;
- practise in an anti-discriminatory, anti-oppressive manner;
- draw upon appropriate knowledge and skills in order to make professional judgements, recognising the limits of his/her practice;
- communicate effectively with patients/clients/carers and other relevant parties when providing care;
- assist other health care professionals, support staff and patients/clients/carers in maximising health outcomes;
- prioritise workload and manage time effectively;
- engage in self-directed learning that promotes professional development;
- practise with an appropriate degree of self-protection;
- contribute to the well-being and safety of all people in the work place.

A4 Profession and employer context

The award holder should be able to:

- show an understanding of his/her role within health and social care services;
- demonstrate an understanding of government policies for the provision of health and social care;
- take responsibility for his/her own professional development;
- recognise the value of research and other scholarly activity in relation to the development of the profession and of patient/client care.

B The application of practice in securing, maintaining or improving health and well-being

All health care professionals draw from the knowledge and understanding associated with their particular profession. This knowledge and understanding is acquired from theory and practice. It forms the basis for making professional decisions and judgements about the deployment in practice of a range of appropriate skills and behaviours, with the aim of meeting the health and social care needs both of individual clients/patients and of groups, communities and populations. These decisions and judgements are made in the context of considerable variation in the presentation, the setting and in the characteristics of the client/patient health and social care needs. They often take place against a backdrop of uncertainty and change in the structures and mechanisms of health and social care delivery.

Sound professional practice is essentially a process of problem solving. It is characterised by four major phases:

- the identification and analytical assessment of health and social care needs;
- the formulation of plans and strategies for meeting health and social care needs;
- the performance of appropriate, prioritised health promoting/health educating/caring/diagnostic/therapeutic activities;
- the critical evaluation of the impact of, or response to, these activities.

B1 Identification and assessment of health and social care needs

The award holder should be able to:

- gather relevant information from a wide range of sources including electronic data;
- adopt systematic approaches to analysing and evaluating the information collected;
- communicate effectively with the client/patient, (and his/her relatives/carers), group/community/population, about their health and social care needs;
- use a range of assessment techniques appropriate to the situation and make provisional identification of relevant determinants of health and physical, psychological, social and cultural needs/problems;
- recognise the place and contribution of his/her assessment within the total health care profile/package, through effective communication with other members of the health and social care team.

B2 Formulation of plans and strategies for meeting health and social care needs

The award holder should be able to:

- work with the client/patient, (and his/her relatives/carers), group/community/population, to consider the range of activities that are appropriate/feasible/acceptable, including the possibility of referral to other members of the health and social care team and agencies;
- plan care within the context of holistic health management and the contributions of others;
- use reasoning and problem solving skills to make judgements/decisions in prioritising actions;
- formulate specific management plans for meeting needs/problems, setting these within a timescale and taking account of finite resources;
- record professional judgements and decisions taken;
- synthesise theory and practice.

B3 Practice

The award holder should be able to:

- conduct appropriate activities skilfully and in accordance with best/evidence-based practice;
- contribute to the promotion of social inclusion;
- monitor and review the ongoing effectiveness of the planned activity;
- involve client/patient/members of group/community/population appropriately in ongoing effectiveness of plan;
- maintain records appropriately;
- educate others to enable them to influence the health behaviour of individuals and groups;
- motivate individuals or groups in order to improve awareness, learning and behaviour that contribute to healthy living;
- recognise opportunities to influence health and social policy and practices.

B4 Evaluation

The award holder should be able to:

- measure and evaluate critically the outcomes of professional activities;
- reflect on and review practice;
- participate in audit and other quality assurance procedures;
- contribute to risk management activities.

C Knowledge, understanding and skills that underpin the education and training of health care professionals

The education and training of health care professionals draws from a range of well-established scientific disciplines that provide the underpinning knowledge and understanding for sound practice. Each health care profession will draw from these disciplines differently and to varying extents to meet the requirements of their specialty. It is this contextualisation of knowledge, understanding and skills that is characteristic of the learning in specific health care programmes. Consequently, in this introductory section, the attributes and capabilities expected of the student are expressed at a generalised level.

C1 Knowledge and understanding

The award holder should be able to demonstrate:

- understanding of the key concepts of the disciplines that underpin the education and training of all health care professionals, and detailed knowledge of some of these. The latter would include a broad understanding of:
 - the structure and function of the human body, together with a knowledge of dysfunction and pathology;
 - health and social care philosophy and policy, and its translation into ethical and evidenced based practice;
 - the relevance of the social and psychological sciences to health and healthcare;
 - the role of health care practitioners in the promotion of health and health education;
 - the legislation and professional and statutory codes of conduct that affect health and social care practice.

C2 Skills

Information gathering

The award holder should be able to demonstrate:

- an ability to gather and evaluate evidence and information from a wide range of sources;
- an ability to use methods of enquiry to collect and interpret data in order to provide information that would inform or benefit practice.

Problem solving

The award holder should be able to demonstrate:

- logical and systematic thinking;
- an ability to draw reasoned conclusions and sustainable judgements.

Communication

The award holder should be able to demonstrate:

- effective skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, their relatives and carers; and, when necessary, to groups of colleagues or clients;

Numeracy

The award holder should be able to demonstrate

- ability in understanding, manipulating, interpreting and presenting numerical data.

Information technology

The award holder should be able to demonstrate

- an ability to engage with technology, particularly the effective and efficient use of information and communication technology.

Benchmark statement for podiatry (chiropody)

Introduction

Podiatry is the clinical discipline concerned with the diagnosis and comprehensive management of foot and lower limb pathologies. This involves the management of a wide variety of disorders, injuries and local manifestations of systemic conditions. This podiatric management may be curative, preventative or require long-term palliation or health education. Podiatrists have opportunities to specialise in a diverse range of clinical practice that include podiatric surgery, podiatric sports medicine, podiatric biomechanics, diabetes, rheumatology, podo-paediatrics and gerontology.

The graduate podiatrist may be employed in a variety of workplace settings that may be within NHS trusts, social services, self-employed private practice, industrial and commercial sectors, education and research. Whilst podiatrists predominantly work single handed in varied locations, podiatry is also practised within an interdisciplinary context. Podiatry is a relatively small profession numbering approximately 8,000 within the Allied Health Professions.

In an educational respect, the term 'podiatry' has replaced 'chiropody', in recognition of the universality of the title 'podiatry' in the English-speaking world and the comparative wealth of the literature base available. The use of the term 'podiatry' is gradually replacing that of 'chiropody' and in this transitional period both terms are frequently used interchangeably. In respect of the *1960 Professions Supplementary to Medicine Act*, chiropody remains the profession which is regulated. Until the *Act* is reviewed to enable recognition of the title podiatrist, graduates of degrees in podiatry, who are eligible for admission to the state register do so as chiropodists.

Whilst this statement is applicable to the United Kingdom (UK), it recognises the distinctive country specific variations which may apply in terms of organisational, educational and practice concepts. This may include for example the Scottish requirement of four years for a vocational honours degree and the special Welsh language provisions required by the *1993 Welsh Language Act* in Wales. The statement takes account of European legislation and the directives, which apply to the recognition of qualifications within the European Community. These are considered within the context and standards expressed within the statement.

Courses of study in podiatry offered in the UK that lead to eligibility for state registration are either at degree or honours degree level. All such courses must meet the requirements as laid down by the respective professional and statutory bodies. Currently degree programmes leading to eligibility for state registration are only offered through three or four year full time degree/honours degree routes. This may not remain the case, as other modes of delivery may become available. It is accepted that widening access to higher education is a current national objective and advanced standing will be a component of the entry regulations of undergraduate programmes. Degrees leading to eligibility for state registration should ensure that such arrangements enable the student to achieve the standards laid out in the benchmark statement. The statement reflects the requirement for structured clinical practice as a component of the undergraduate course. There is a clear recognition of the requirements of the professional, statutory and academic bodies via tripartite validation mechanisms. This process is achieved in partnership with professional and statutory bodies and other stakeholders. Opportunities to study podiatry are offered in 13 institutions throughout the UK.

Nature and extent of programmes in podiatry

Podiatry is practised by specialist practitioners who are capable of both independent and interdisciplinary clinical practice. They are skilled in assessing the needs of their patients and of managing both chronic and acute conditions affecting foot and lower limb function. These skills are often practised independently of medical referral and medical supervision. The key role of the podiatrist is to maintain and enhance locomotion function and tissue viability, to alleviate pain and reduce the impact of disability thereby maintaining/improving the quality of life for patients. Podiatric practitioners can provide care to the whole population and so provide clinical services for a diverse range of patients. These particularly include children, the elderly, athletes, people with a learning disability, people with a physical impairment and patients whose health status place the viability of their lower limb at high risk.

Podiatric management is predicated on accurate assessment and diagnosis that leads to the implementation of an appropriate management plan. This recognises the inter-relationship of systemic and extrinsic factors with the function of the lower limb. Effective management is achieved by the implementation of a range of approaches including health promotion, surgical, mechanical and pharmacological therapies.

Podiatrists work predominately in primary care in single-handed community practice and also as members of specialist multi-disciplinary teams in both the primary and acute sectors within the NHS. In addition, many podiatrists work in private or commercial environments.

As competent professionals, podiatrists subscribe to the maintenance and development of their skills and knowledge to maintain their clinical currency within the expanding evidence base available to the profession. They are responsible for the quality of care they provide for their patients by employment of the principles and practice of clinical governance.

Podiatrists work within the context of a sound knowledge and understanding of health policy, business principles and health economics, treating their patients with an ethical and caring approach. Effective practice requires the recognition and understanding of the social and economic context of their patients in assessing, planning, delivering and evaluating care. This can only be achieved through the effective application of interpersonal and personal transferable skills.

A The podiatrist working as a professional

A1 Professional autonomy and accountability

The award-holder should be able to:

- maintain the standards and requirements for state registration in podiatry;
- appreciate the role of professional and statutory bodies in podiatry;
- understand the legal responsibilities and ethical considerations of professional podiatric practice;
- have a detailed knowledge and understanding of the legal implications of the supply and administration of prescription only medicines available to chiropodists/podiatrists in accordance with the relevant exemption order of the 1968 Medicine Act and subsequent orders;
- comply with the requirements of the Statement of Conduct of the Chiropodists Board in accordance with the 1960 Professions Supplementary to Medicine Act and any subsequent statutory regulation;
- comply with statutory obligations in respect of the limitations placed on the podiatrist, eg in the use of local anaesthetic drugs;
- demonstrate an awareness of aspects of employment law and health and safety regulations in relation to the self employed podiatric practitioner;
- understand the particular considerations relating to podiatric private practice, eg business planning, confidentiality, informed consent, appropriate fee structures, taxation, local licensing, planning and marketing;
- demonstrate an understanding of the 'professional self' including aspects of professionalism in manner, dress, speech, integrity and confidentiality consistent with contemporary standards and values and which recognise cultural differences;
- recognise the need for lifelong learning and continuing professional development in order to maintain fitness for practice;
- demonstrate time management skills including the ability to prioritise competing demands.

A2 Professional relationships

The award-holder should be able to:

- participate effectively in multi-professional approaches to health care appropriate to the practice of podiatry;
- recognise the unique contribution that podiatric practice can make to multi-professional care;
- recognise the value of the podiatrist as a health educator;
- demonstrate the ability to recognise the limits of one's own practice, referring or discharging the patient as necessary;
- understand the principles involved in working with foot care assistants, technical, support and administrative staff, delegating tasks and responsibilities where appropriate and in accordance with accepted practice;
- understand that patients' rights override personal/commercial considerations in the practice of podiatry.

A3 Personal and professional skills

The award-holder should be able to:

- exercise a professional duty of care to patients/clients/carers in the context of independent single-handed practice within the NHS, private practice and the industrial setting;
- practise in an anti-discriminatory/anti-oppressive manner;
- understand the responsibilities associated with independent podiatric diagnosis and the use of all of those podiatric techniques and treatments that fall within the podiatrist's scope of practice;
- administer or supply pharmacological agents relevant to podiatric practice (to include local analgesia, anaesthetics, topical pharmacology and prescription only medicines schedules with reference to podiatrists' access to drugs);

- conduct surgical interventions for foot pathologies (ie procedures performed under local anaesthesia, skin and nail surgery);
- perform operative and psychomotor skills using a high degree of manual dexterity (eg scalpel reduction of skin and nail lesions);
- conduct non-surgical interventions for foot pathologies in the administration of:
 - appropriate mechanical therapies (eg taping, padding and strapping, footwear modifications, casted and non-casted orthoses, chair-side orthoses);
 - appropriate physical therapies (eg exercise, manipulation, rehabilitation, principles of physio-therapeutic modalities - ie ultrasound, electrosurgery, laser therapy, infra-red, heat & cold, cryo-surgery and chemical cautery).
- understand the principles of orthopaedic foot surgery;
- recognise the need to develop and maintain current psychomotor skills necessary for effective patient assessment and management. In doing so ensure that skills development satisfies medico-legal requirements of podiatric practice and meets the needs of the work place setting obligation to maintain fitness for practice;
- practise with an appropriate degree of self-protection and contribute to the well-being and safety of people in the work place;
- demonstrate an understanding of the need to manage and respond effectively to the rapidly changing nature of the profession of podiatry and the context in which it is practised;
- evaluate podiatric and related research and other evidence to inform and develop practice with regard to the function and disorders of the lower limb and foot;
- continue to develop specific podiatric treatment strategies for the treatment of locomotor and foot disorders;
- demonstrate a basic level of understanding of the evolving policy agenda that impacts on the delivery of health care and the practice of podiatry;
- uphold the principles and practice of clinical governance.

A4 Profession and employer context

The award-holder should be able to:

- contribute to and maintain a safe health care environment within a range of working environments eg private practice, the national health service, patients' own homes, care homes;
- demonstrate an understanding of the role of the podiatrist within public and private health care sectors;
- know about current developments in health care policy and how these impact on podiatry;
- recognise the value of research and other scholarly activity in relation to the development of the podiatry profession and for the benefit of patient care;
- practise podiatry independently, particularly in the context of both the public and private sectors, recognising the particular demands of the commercial sector in relation to self-employment;
- recognise the value of professional, organisational, business and financial skills needed for self-employed single-handed podiatric practitioners.

B The application of practice in podiatry

This section describes the principles and concepts held by the profession of podiatry that are applied to maintain or improve lower limb and foot health.

B1 Identification and assessment of health and social care needs

The award holder should be able to:

- communicate effectively with the patient, or the patient's relative/guardian/carer or other health care practitioner, to obtain a general physical, medical, social, and behavioural history together with a detailed history of the presenting complaint;

- conduct appropriate and valid neurological, vascular, biomechanical, dermatological and podiatric examinations of the patient's lower limb and associated structures, modifying practice according to patient need;
- conduct or requisition, where appropriate, specialist clinical or laboratory tests (eg X-ray, blood test, microscopy and culture) in order to reach accurate conclusions relating to lower limb health status;
- utilise contemporary technologies that aid in patient assessment, eg computerised gait analysis equipment;
- recognise situations where the best interests of the patient can be more appropriately served by a different health professional or a multi-disciplinary approach to care.

B2 Formulation of plans and strategies for meeting health and social needs

The award holder should be able to:

- use a problem-solving approach to identify and integrate the findings gathered from patient history taking and physical examination, to formulate and test a diagnosis and arrive at and implement a negotiated podiatric treatment plan;
- understand the need to seek a second opinion and/or consult with colleagues and/or other members of the health care team to inform the treatment plan;
- in negotiation with the patient/patient guardian/carer, select appropriate podiatric techniques in accordance with current best practice/research. These can be selected from mechanical debridement of skin and nails, prescription and manufacture of orthoses, administration of prescription only and non-prescription medicines, local analgesia techniques, surgical procedures for skin and nail conditions, physical therapeutic modalities, and use of chair-side devices;
- demonstrate the ability to record and communicate accurately the outcomes of patient assessment, diagnosis and management plans.

B3 Practice

The award holder should be able to:

- demonstrate the ability to utilise safely the full scope of treatment regimes available to the podiatrist in the successful management of a patient presenting with a lower limb problem;
- effectively use appropriate clinical techniques in accordance with the best accepted practice;
- demonstrate competency in:
 - mechanical debridement of skin and nails;
 - prescription and manufacture of orthoses;
 - administration of prescription only and non-prescription medicines,
 - local anaesthesia techniques;
 - surgical procedures for skin and nail conditions;
 - physical therapeutic modalities;
 - use of chair-side orthoses.
- demonstrate competency in the use of appropriate therapeutic technologies that aid patient treatment, eg ultrasound, electrosurgery, laser therapy, infra-red, heat & cold, cryosurgery and chemical cautery;
- demonstrate a competence in the recognition and adaptation of approaches to practice to meet the needs of modifying circumstances to include specific client groups eg children and the older person, and taking into consideration physical, psychological, social, environmental, cultural, occupational activity and economic factors;
- demonstrate the ability to identify and respond to a range of clinical incidents, threats and psycho-social crises, eg violent patients, alcohol, substance and drug abuse;
- demonstrate the ability to act swiftly and appropriately in the best interest of the patient and in accordance with contemporary practice for the maintenance of life in a clinical emergency, such as anaphylaxis, toxic reaction, epileptic attack, faint, hypo/hyperglycaemic attack, heart attack;

- provide written instructions to a patient concerning details of a podiatric treatment regime requiring patient self-treatment/advice;
- obtain and record informed consent for the treatment plan;
- conform to current data protection legislation;
- the podiatric management plan and its evaluation in order to convey precise meaning to the podiatrist and/or others who may be required to follow-up the treatment and to satisfy medico-legal requirements.

B4 Evaluation

The award holder should be able to:

- in the context of evidence based practice, demonstrate the ability to conduct an ongoing evaluation of the podiatric management plan against treatment milestones using recognised health outcome measures;
- use information gathered in evaluating the podiatric management plan to judge its effectiveness, reviewing and revising the plan as necessary in negotiation with the patient;
- demonstrate effective listening and re-assessing skills to ensure that podiatric treatment is appropriate;
- recognise that clinical problem solving can be an inexact art, and in solving one problem another may arise for which further action may need to be taken;
- demonstrate an ability to undertake clinical audit in a podiatric context;
- use the knowledge and critical appraisal of relevant podiatric and related research and evaluation methodologies to enable and facilitate an evidence based approach;
- demonstrate the ability to recognise the limits of one's own practice, referring or discharging the patient as necessary.

C Subject knowledge, understanding and associated skills that underpin the education and training of a podiatrist

This section describes the subject knowledge, understanding and associated skills that are essential to underpin informed, safe and effective podiatric practice. In order to be able to carry an appropriate podiatric assessment, diagnosis and treatment plan, the award holder should be able to demonstrate:

C1 Systematic knowledge and understanding of the key concepts that underpin podiatry

Anatomy and human locomotion studies

Human anatomy with particular reference to the foot and lower limb, that includes an overview of the gross anatomy of organ systems underpinning the later study of podiatry, podiatric biomechanics, surgery, pharmacology and medicine. He/she will have an understanding of the development of normal human bipedal stance and locomotion across the life cycle in order to develop competence in analysing gait.

Histology

Detailed knowledge of the cell and its intra-cellular components, the structure and function of tissues with special reference to skin that underpins understanding of general and podiatric tissue pathology.

Physiology/immunology

Homeostatic mechanisms, cell physiology and biochemistry; cardiovascular, respiratory, neurological and endocrine systems plus an overview of hepatic, renal and digestive systems that provides knowledge of normal human functioning and underpinning for the study of pathology and medicine. Understanding of aspects of microbiology and immunology to underpin understanding of pathological processes as applied to the lower limb and foot.

Podiatric orthopaedics and biomechanics

General knowledge and understanding of the basic principles of biomechanics; causes and mechanisms of dysfunction with a specific focus on effects on the lower limb and foot; detailed study of congenital and acquired changes to normal structure and function; the effects of abnormal structure and function on stance and locomotion and the tissues of the lower limb.

Systemic and podiatric pathology

Systemic disease and the local manifestations that occur in the lower limb and foot, eg diabetes melitus, the arthropathies, neurological disorders, peripheral vascular disease, dermatology, oncology, blood dyscrasias; the sources and effects of acute and chronic trauma to the foot and lower limb; effects of systemic and local infections on the foot.

Podiatric therapeutic sciences

The underpinning theory that relates to the management of podiatric pathologies. This includes therapeutic indications, contraindications and complications that may arise from podiatric intervention using:

- pharmacology (to include local analgesia, anaesthetics, topical pharmacology and prescription only medicines schedules with reference to podiatrists' access to drugs);
- surgical interventions (this includes procedures performed under local analgesia, skin and nail surgery, principles of orthopaedic foot surgery);
- operative and psychomotor skills (including scalpel reduction of skin and nail lesions and foot ulcer debridement);
- mechanical therapies (to include the therapies underpinned by biomechanical principles such as the prescription of casted and non-casted orthoses, chair-side devices and footwear modifications);
- physical therapies (to include exercise, manipulation, rehabilitation, principles of physio-therapeutic modalities, eg ultrasound, electrosurgery, laser therapy, infra-red, heat & cold, cryosurgery and chemical cautery).

Behavioural sciences

- Social and psychological factors that have an impact on patients' health and their implications for, and contribution to, patient care, recognising the psychosocial effects of loss of mobility and pain and the role of the podiatrist in their amelioration. This is in the context of improving the patient's quality of life, mobility and independence;
- The significance of non-compliance/concordance in relation to foot health and its effect on the patient/practitioner relationship;
- The human factors that impact on the patient/practitioner relationship, eg in special populations;
- The principles of non-discriminatory practice.

Foot health promotion/education

- The principles and challenges of behaviours and extrinsic factors that impinge on foot health. The principles underlying strategies employed by patients' in self-care of the feet.

Professional studies

The nature and scope of the podiatry profession to include:

- concepts of the 'professional self' including aspects of professionalism in manner, dress, speech, integrity and confidentiality consistent with contemporary standards and which recognise cultural differences;
- health service policies, the organisation and delivery of health care;
- multi-disciplinary working;
- codes of conduct, regulatory and legislative frameworks that apply to podiatry.

C2 Skills

Information gathering

The award holder should be able to demonstrate:

- the ability to gather, evaluate and synthesise evidence and information from a wide range of sources in order to derive a credible podiatric diagnosis;
- the ability to use validated methods of enquiry to collect and interpret data in order to provide information that informs the podiatric evidence base.

Problem solving

The award holder should be able to demonstrate:

- logical and systematic thinking in the management of their individual patient and also in their management of podiatric practice;
- the ability to draw reasoned conclusions and sustainable judgements in the context of podiatric practice;
- the ability to undertake a research project that includes some original thinking utilising established methods of enquiry.

Communication

The award holder should be able to demonstrate:

- effective skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, their relatives and carers; and, when necessary, to groups of colleagues or clients;
- the ability to provide information to the patient in the context of obtaining informed consent;
- competence in the maintenance of patient records in order to meet their medico-legal responsibilities.

Numeracy

The award holder should be able to demonstrate:

- the ability in understanding, manipulating, interpreting and presenting data;
- the ability to use number skills to enable good practice in respect of calculation of dose, interpretation of physiological, biomechanical and research data.

Information technology

The award holder should be able to demonstrate:

- the ability to engage with technology, particularly the effective and efficient use of information and communication technology;
- a working knowledge of the specialist equipment used in analysing gait, assessing vascular and neurological status;
- the ability to safely use a range of therapeutic equipment in podiatric management;
- the ability to operate technological systems that facilitate the management of podiatric practice;
- Information technology skills that include a knowledge of the use of statistical packages and the ability to make use of word processing packages for report writing.

Teaching, learning and assessment

Decisions about the strategies and methods for teaching, learning and assessment are for institutions to determine, but should complement the learning outcomes associated with health profession programmes. It is not for benchmark statements to promulgate any one, or combination of, approaches over others. However, this benchmark statement promotes an integrative approach to the application of theory and practice. It underlines the significance attached to the design of learning opportunities that facilitate the acquisition of professional capabilities and to assessment regimes that ensure these are being both delivered and rewarded to an appropriate standard. Fundamental to the basis upon which students are prepared for their professional career, is the provision of programmes of academic study and practice-based learning which lay the foundation for career-long professional development and lifelong learning to support best professional practice and the maintenance of professional standards.

Teaching and learning in podiatry

The overall aims and expected final outcomes of degrees in podiatry, together with the specific requirements of particular subjects, modules and clinical experience should inform the choice of both learning and teaching strategies and associated methods of assessment.

The podiatric model of clinical learning should be fully integrated within the curriculum. It should be characterised by the provision of specialist teaching clinics. A good model of clinical education should provide:

- a highly managed clinical learning environment that is closely related to both the educational needs of students and the clinical needs of patients;
- the introduction to a structured clinical environment at an early stage in the students' course;
- close, standardised supervision of students that facilitates the development of precise psychomotor skills;
- integration between theory and its clinical application facilitated by clinical academics in podiatry;
- opportunities for multi-disciplinary clinical learning;
- a facility in which students' practical application can be assessed/examined in a standardised framework.

All teaching and learning within undergraduate podiatric curricula should be designed to underpin the phased development of clinical competence using knowledge and understanding, analytic and intellectual skills, personal transferable skills and clinical skills as the key building blocks.

Clinical learning should be a dynamic process whereby the novice develops his/her clinical expertise in order to achieve clinical competence on graduation. This should be achieved through the provision of a highly structured and carefully organised range of clinical learning opportunities involving a variety of selected and relevant patients with increasingly complex problems. Staff should tailor their teaching and learning approaches to meet sensitively the needs of students on an individual and group basis. Students are increasingly challenged in their clinical work in order to develop their clinical reasoning skills. Placement education supplements students' clinical learning, once they have acquired their basic clinical skills, in order to provide them with enhanced learning opportunities.

Assessment

A wide range of assessment strategies should be employed in order to be able to test specified programme learning outcomes. A range of formative and summative approaches should be used in non-clinical and clinical environments. Clinical assessments might include reflective portfolios, objective structured clinical examinations, case-based studies and formal tests of competence.

Academic and practitioner standards

The standard expected of the threshold graduate is outlined below. 'Threshold' is taken to mean that standard of achievement demonstrated at the end of the educational experience, at the point of registration. This is at unclassified or at honours degree level. Achievement at this level meets the requirements of the statutory body for state registration and the Society of Chiroprody and Podiatrists for membership.

A Working as a professional

The award-holder should be able to:

- demonstrate achievement of the standards required for state registration;
- recognise legal and ethical boundaries as determined by professional and statutory bodies;
- demonstrate an awareness of the challenges inherent in single-handed podiatric practice in public/private sectors;
- recognise the need and value of lifelong learning to ensure continued competence to practise;
- understand the differing roles of the podiatrist in single-handed and multi-disciplinary practice and demonstrate awareness of the roles of colleagues in the cross-professional team;
- recognise the limits of one's own scope of practice and demonstrate the ability to refer to other health and social care professionals when appropriate;
- demonstrate the ability to contextualise podiatric care according to the needs of the individual patient;
- understand the principles involved in working with others including foot care assistants, podiatric surgery assistants, appliance technicians and administrative staff;
- evaluate research and other evidence to inform one's own practice;
- appreciate service requirements for the practice of podiatry in a wide range of clinical contexts including primary care, acute sector, private, commercial and social care environments;
- practise podiatry within the NHS, private, or commercial sectors, either as a single-handed independent practitioner or as part of a larger organisation;
- demonstrate an understanding of the need to manage and respond effectively to the rapidly changing nature of the profession of podiatry and the context in which it is practised;
- demonstrate a basic level of understanding of the evolving policy agenda that impacts on the delivery of health care and the practice of podiatry;
- demonstrate an ability to prioritise workload in an effective process of self and practice management;
- demonstrate awareness of the need to self-manage all aspects of podiatric practice particularly in the context of independent practice in public/private sectors.

B Application of practice in podiatry

The award-holder should be able to:

- demonstrate an ability to establish the nature of the patient's podiatric and associated problems based on the use of a range of communication skills and information gathering;
- select and demonstrate relevant vascular, neurological, musculoskeletal, locomotor, and dermatological tests and interpret these findings together with relevant laboratory reports pertinent to the patient and their podiatric and associated problems;
- integrate and synthesise available sources of information in order to consider differential diagnoses to arrive at a safe podiatric diagnosis, or to identify the necessity for further referral or investigations;
- identify and consider therapeutic options based on those currently available and formulate a podiatric management plan. Negotiate this with the patient and, where required, other relevant parties. Review, and if necessary modify this plan in the light of experience and consultation, clearly setting out the options and potential outcomes ;
- organise and/or skilfully perform treatment techniques using specialist podiatric, surgical, physical, pharmacological and mechanical therapies. These may be supplemented where appropriate with advice to the patient about self-management, health promotion and support for carers and/or relatives;

- demonstrate the ability to recognise and manage the consequences of adverse effects of podiatric intervention and clinical emergencies;
- review the effectiveness and progress of podiatric therapeutic intervention in negotiation with the patient. In the light of objective assessment of achievement of the treatment goals, modify or re-design the plan ;
- Identify where required the need for referral and ensure the necessary communication to effect optimum care within the multi-disciplinary team;
- demonstrate an ability to communicate effectively and record accurately the process and outcome of the patient intervention.

C Subject knowledge and understanding

The award-holder should be able to:

- demonstrate systematic knowledge and understanding of the key areas as outlined in C1;
- describe and analyse information relevant to the practice of podiatry and be able to develop a basic re-interpretation of key factors in relation to their practice;
- reflect critically on podiatric practice and evaluate in the light of contemporary evidence;
- demonstrate the ability to apply specialist podiatric knowledge and skills to identify and determine the solution of familiar and unfamiliar problems;
- construct critical argument ensuring that the viewpoints of others are considered and weighted and incorporated where appropriate;
- demonstrate an ability to use research and enquiry techniques to collect, analyse and interpret relevant information and to subsume this into podiatric practice;
- demonstrate the use of effective processes by which information may be gathered and disseminated to patients, peers, other professionals and the public, in a clear and precise manner via a variety of means, for example, verbal, paper-based and electronic methods;
- ensure that effective methods of communication are utilised to optimise patient understanding in order that negotiated podiatric treatment plans may be implemented with informed consent;
- demonstrate the ability to communicate effectively within a group;
- use a range of communication and presentation skills to provide health education;
- recognise and address the difficulties of good communication with patients who have impaired sight, hearing, learning difficulties or other special needs, taking care to overcome any personal prejudices;
- utilise C&IT to support practice, in particular be able to use and interpret data from a range of equipment including:
 - gait analysis equipment such as in vivo pressure measurement systems, electronic goniometry;
 - vascular and neurological equipment such as vasoflow and biothesiometer;
 - interrogate podiatry databases using on-line and off-line resources.
 - be aware of the value of electronic management and record systems in the management of patient caseloads and as research/audit tools;
 - demonstrate the ability to use number skills to enable good practice in respect of calculation of dose, and in the interpretation of physiological, biomechanical and research data.

Appendix 1

Podiatry (chiropody) benchmark group membership

Mr David Ashcroft (facilitator)	Society of Chiropodists & Podiatrists
Mr Paul Blakeman	Staffordshire University
Mr Brian Ellis	Queen Margaret University College, Edinburgh
Mr Paul Frowen	University of Wales Institute, Cardiff
Dr Margaret Johnson	New College, Durham
Mrs Janet McInnes	University of Brighton
Ms Penelope Renwick	University of Huddersfield
Mr Warren Turner	University College Northampton

Appendix 2

Benchmark steering group membership

Mrs Margaret Andrews	North East Wales Institute of Higher Education
Mr David Ashcroft	Society of Chiropodists & Podiatrists
Mrs Linda Auty	Leeds Metropolitan University
Miss Lesley Barrowman	National Board for Nursing, Midwifery & Health Visiting for Northern Ireland
Mrs Valerie Beale	Somerset Health Authority
Ms Mary Boyle	National Board for Nursing, Midwifery & Health Visiting for Scotland
Mrs Ann Clarke	Bedford Hospital NHS Trust
Ms Helen Davis	Royal Hallamshire Hospital, Sheffield
Professor Anne de Looy	Queen Margaret University College, Edinburgh
Miss Faye Doris	University of Plymouth
Mr Martin Duckworth	College of St Mark & St John, Plymouth
Mr Brian Ellis	Queen Margaret University College, Edinburgh
Miss Anne Fagan (deceased)	Hospital of St John & St Elizabeth, London
Mrs Janice Gosby	UK Central Council for Nursing, Midwifery & Health Visiting
Ms Valerie Hall	University of Brighton
Mrs Julia Henderson	University of Hertfordshire
Ms Anne Hopkins	University of Wales Swansea
Mr Stephen Hutchins	University of Salford
Mr Tom Langlands	English National Board for Nursing, Midwifery and Health Visiting
Ms June Leishman	University of Abertay, Dundee
Professor Jeffrey Lucas	University of Bradford
Professor Dame Jill Macleod-Clark (co-chair)	University of Southampton
Ms Diane Marks-Maran	Thames Valley University
Mrs Susan Montague	University of Hertfordshire
Mrs Christine Mullen	South Manchester University Hospital NHS Trust
Mr Luke O'Byrne	East Berkshire NHS Trust
Mrs Audrey Paterson	Canterbury Christ Church University College
Ms Robyn Phillips	Welsh National Board for Nursing, Midwifery & Health Visiting
Professor Mike Pittilo (co-chair)	Kingston University & St George's Medical Hospital
Ms Lorna Povey	Wolverhampton Health Care NHS Trust
Mrs Jarina Rashid-Porter	Coventry Healthcare NHS Trust
Mr Gwilym Roberts	College of Occupational Therapists
Ms Jenny Routledge	University of East Anglia
Mr Ian Rutherford	University of Nottingham
Mrs Sandra Sexton	University of Strathclyde
Ms Gail Stephenson	University of Liverpool
Professor Averil Stewart	Queen Margaret University College, Edinburgh
Professor Mary Watkins	University of Plymouth