



COUNCIL FOR THE PROFESSIONS COMPLEMENTARY TO MEDICINE

Benchmarking document

Podiatry

The Council for the Professions Complementary to Medicine is issuing this Benchmarking Document for Podiatry in the performance of its functions as defined by Article 27 of the Health Care Professions Act, Chapter 464 of the Laws of Malta and in terms of Article 28 Health Care Professions Act, Chapter 464 of the Laws of Malta and Subsidiary Legislation 454.16 Professions Complimentary to Medicine (Licence to Practice) Regulations.

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Introduction

This document outlines the standards of education and language proficiency for podiatrists as dictated by the Council for the Professions Complimentary to Medicine (CPCM) in Malta. The CPCM regulates on the Allied Health Care Professions including the professional entry level standard for podiatry in Malta.

These standards aim to reflect the expectations for current practice and training of podiatry in Malta at an entry-level, within the context of the national and EU legislation that governs and regulates Health Care Professions. These standards are the result of a review of the professional entry-level education standards & language proficiency of podiatry that are in line with European and world standards and guided by the statements of the International Federation of Podiatry (FIP).

These standards are adopted by the CPCM to assess all applications for entry into the Podiatry register, hence, to practice podiatry within the jurisdiction of Malta; and also, to guide the CPCM on how to address substantive differences from these standards. These are guided within the context of the EU Directive 2013/55/EU on the recognition of professional qualifications and regulation. In this respect, podiatry is governed by general legal provision.

Description and Scope of Practice

Occupational Description

Podiatry is a health care profession concerned with the diagnosis and management of diseases, injuries, and pathologies affecting the human foot, ankle and lower limb; including conditions that are caused by foot dysfunction. This is achieved through consultations and/or medical, surgical, mechanical, physical, and adjunctive treatments.

Scope of Practice

The aims of the podiatry service is to diagnose, prevent and treat conditions, diseases, pathologies and dysfunctions that affect or originate from the foot, ankle and lower limb in order to improve the patients quality of life and preserve foot health. This can be achieved, but is not limited to patient education, mechanical offloading, medical treatment and surgical treatment.

Podiatrists use a number of diagnostic methods to arrive at their diagnosis which include but are not limited to, physical examination, gait analysis and various biomechanical tests, imaging, and laboratory tests.

Podiatrists will ensure the best possible treatment for all patients using a number of techniques which include and are not limited to surgical techniques, medical and pharmacological advice and treatment, mechanical offloading with the use of chairside and/or functional/accommodative orthotic devices.

Podiatrists diagnose, manage and prevent foot-threatening conditions in persons who fall under the high-risk categories which include but are not limited to: conditions which increase the risk of any pathology developing into tissue loss, ulceration and/or infection.

Meeting the Standards

It is important that the standards to practice safely, lawfully and effectively are met. As an independent autonomous professional, a podiatrist is expected to take informed, reasoned decisions on and in practice, exercising their own professional judgement and ensuring that the standards are met at all times. This includes seeking advice from entities such as education providers, employers, colleagues, professional bodies and unions to safeguard the wellbeing of the service users.

The Standards of Education are divided into three areas: The Professional entry level qualification (preregistration), the Curriculum and Practice and Training.

Proficiency relates to the ability of the registrant to perform the duties of a podiatrist with attributes that include professional behaviour, accountability, professional duty and social responsibility including effective communication. This includes the ability of being conversant in the Maltese language and is included either as a pre- or post-registration requisite.



Level of Qualification

The professional entry level into the Podiatry Register is with a Bachelor's degree in Podiatry (or equivalent) (MQF/EQF1 level 6) – hereafter referred to as the programme. Whilst it is recommended that the duration of a programme is 4 years, it is understood that in line with the Bologna Agreements in Europe, a Bachelor programme may be undertaken over a 3-year period. In such cases, however, the minimum curriculum standards as outlined in this document must still be met.

The CPCM understands that a number of programmes may be at, or above, the standard outlined, and that there may be some exceptions, for example, pre-registration Master level programmes. In such cases, it will be necessary for the applicant to provide evidence that the curriculum of the pre-registration programme covers the minimum standards as outlined in this document and that these standards have been met.

Language Proficiency

The CPCM requires applicants to the podiatry register, originating from countries that do not have English as their first language, to meet the CPCM's level of Proficiency in English language. The FIP guideline for physical therapist professional entry level specifies that one needs to recognise barriers for effective communication and identify strategies for overcoming such barriers. Effective communication with others using written, verbal and non- verbal methods is included. Ineffective communications can jeopardise patient's safety.

The CPCM requires those applicants who wish to enter the Podiatry register, to provide proof of language proficiency as defined in Annex A.

Evaluation of Application

On evaluation of the application the Council may choose to do one of the following:

- Grant registration;
- Ask for further clarification when required;
- Ask for the applicant to attend an interview;
- Reject the application if the qualification is not adequate and in line with this benchmark; and
- Be asked to carry out a period of supervised practice or undergo an aptitude test.

Minimum Curriculum Requirements

This standard ensures that the curriculum meets the standards for professional knowledge, skills and attitudes as expected by CPCM and therefore the applicant would be considered fit to practise in Malta.

The programme must reflect the philosophy, core values, skills and knowledge base that ensure that an applicant, once registered, is able to work as an independent and autonomous practitioner.

Integration of theory and practice is central to the curriculum and must be adequate to cover a number of areas within healthcare practice that are relevant and necessary to work within the Maltese National Health Care system. These areas where podiatry interventions may be practised include dermatology, the diabetic foot and the treatment of diabetic foot complications, local anaesthesia and nail surgery, podopaediatrics, biomechanics and orthotic design and manufacture, footwear and musculoskeletal conditions. In addition, but not compensatory, applicants are guided to have proficiency levels also in the areas of oncology, paediatrics, mental health, cardiac care and adult rehabilitation.

Applications shall be scrutinised for evidence in the curriculum that demonstrate the theory and practice and that these are combined within both the theoretical and practical parts of the programme.

The curriculum must demonstrate relevance to current practice as well as uphold the established pillars of podiatry practice i.e. dermatology, biomechanics, the diabetic foot and surgery. A comprehensive list of learned expectations is noted in Table 1. The CPCM is aware that scope of practice as well as population needs/expectations may change over time, both on a national and international level and expects to view evidence of how applicants adhere to training that is relevant. This includes evidence of how research and academic activity are integrated into the curriculum. The CPCM will be guided by international benchmarks set by the FIP.

The curriculum should include aspects that demonstrate the applicant to have acquired knowledge that predicts or reflects: change in practice and its organisation; changes in the law; changes in service users' needs reflecting developments in a profession's research base and advances in technology; an ability to respond to changes in practice; changes to their practice to make sure they continue to practise safely and effectively; the knowledge, skills and understanding necessary to make a positive contribution for their service users.

The presenting programme for entry into the podiatry profession must support and develop autonomous and reflective thinking that encourages the graduate to consider their own practice; the limits of their safe and effective practice; how they will relate to other people practising in their profession; and their responsibility to make sure that they practise safely and effectively, based on evidence, when they complete the programme.

Table 1: Minimum learned expectations for Podiatry		
Biological and Physical Sciences	General Anatomy and Physiology	
	Foot and lower leg Anatomy	
Social, Behavioural and Technical Sciences	Pharmacology	
	Communication Skills	
	Ethics and Values	
	Professional Practice and Management	
	Health Psychology	
	General Medicine	
Clinical Sciences	Podiatric Dermatology	
	Foot Orthotic Fabrication and Materials	
	Diabetes & Management of the Diabetic Foot	
	Podiatric Orthopaedics	
	Theoretical & Practical Podiatric Anaesthesia	
	Podogeriatrics	
	Theoretical and Practical Podiatric Surgery	
	Podopaediatrics	
	Physical Therapy	
	Circulatory and Rheumatic Disorders of the Foot	
	Metabolic and Neurological Disorders Affecting the Foot	
	Management of the High Risk Foot	
	Theoretical and Practical Podiatric Surgery	
	Introduction to Diagnostic Ultrasound for Podiatry	
	Foot and Lower leg Biomechanics	

	Sports Medicine	
Interventional Skills	Dermatological	
	Orthotic Therapy	
	Exercise Therapy	
Evidence based practice	Research Methods	
	Research Application	
	Thesis	
Clinical Education – Practical Training	Diabetic and High Risk Foot	150 hrs
	Anaesthesia	100hrs
	Surgery	150hrs
	Foot and Lower Leg Biomechanics	350hrs
	Orthotics Fabrication	150hrs
	Clinical Practice	700hrs

Practice and Training

This standard concerns practice placements. Practice placements refer to supervised clinical practice with real patients in a diverse clinical setting. Practice placements are understood to be an important and integral part of the programme. The practice placements must meet the standards identified in the curriculum requirements (general podiatry, local anaesthesia, surgery, biomechanics, foot orthoses fabrication and the diabetic foot).

Notwithstanding these should account for either one third of the whole curriculum, or approximately 1650 hours of supervised clinical practice in total with at least 100 hours in each of the areas identified. The CPCM also understands that progress in terms of the practical skills is logical and develops from peer-to-peer learning in class, to practice placements with real patients, and that the learning outcomes for the first placement are different from those of the final one. Notwithstanding, the evidence for the clinical practice must be clear and distinguished from classroom practice.

The expectations of meeting these Standards of Education are that a podiatrist manages patients with simple or complex conditions without guidance or clinical supervision. The podiatrist is consistently proficient and skilled in simple and complex tasks for assessment, interventions and clinical reasoning; and consults with others to resolve unfamiliar or ambiguous situations.

Other CPCM documents to be considered in conjunction with this Benchmarking Document:

1. Codes of Professional and Ethical Conduct

<https://deputyprimeminister.gov.mt/en/regcounc/cpcm/Documents/Codes%20of%20Professional%20and%20Ethical%20Conduct%20-%20March%202019.pdf>

2. Code of Practice (Podiatry)

<https://deputyprimeminister.gov.mt/en/regcounc/cpcm/Documents/Podiatry%20Code%20of%20Practice.pdf>

ANNEXE A

Language Proficiency Requirements by The Council for The Professions

Complementary to Medicine

The Council for the Professions Complementary to Medicine requires applicants to meet the Council's level of Proficiency in the English or the Maltese Language.

All professionals seeking registration are requested to present either one of the following:

1. A Maltese language certificate; **OR**

(i) An Ordinary Level MATSEC certificate (MQF level 3); OR

<https://myexams.gov.mt/matsec-examinations/>

(ii) An Advanced/Intermediate Level MATSEC certificate (MQF level 4); OR

<https://myexams.gov.mt/matsec-examinations/>

(iii) A Medical Maltese Proficiency Certificate.

<https://www.um.edu.mt/arts/malti/korsijiet/medicalmaltesecours>

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2. The applicant can provide evidence that his/her professional qualification(s) (on the basis of which he/she is applying for registration) was/were acquired through the medium of English or Maltese and that practice placements in that/those qualification(s) were undertaken and supervised through the medium of English or Maltese; **OR**

3. The applicant can provide evidence that s/he has **lived in and practised** his/her profession through the medium of English or Maltese in a country that has English or Maltese recognised as the official language of that country for a period of **not less than 2 years in the past five-year period; OR**
4. Any other proof of English or Maltese language Proficiency.

Additionally, should the applicant choose to opt for other forms of proving language proficiency, the applicant can opt for either one of the following Secure English Language Tests.

Should the applicant opt for this, the below is the list of Examining Boards recognized by the Council and the minimum required standards accepted by the Council in terms of the table below (or equivalent);

Examining Board	TOEFL Internet-Based (iBT)	IELTS (Academic)	Cambridge	Occupational English Test (OET)
Required Level	95	6.5	Advanced Certificate	B
Remarks	A writing score of at least 24 is required.	Required with a minimum of 6.0 in all elements.	A pass at a grade C or better is required.	A grade B or better is required in all components.

Any other Secure English Language Tests which are equivalent to those mentioned in the table above will also be considered.

