

*Government Notice No. 114 of 2022***THE ALLIED HEALTH PROFESSIONALS COUNCIL ACT****Regulations made by the Minister, after consultation with the Allied Health Professionals Council, under section 39 of the Allied Health Professionals Council Act**

1. These regulations may be cited as the Allied Health Professionals Council (Podiatrist) Regulations 2022.
2. In these regulations –
“Act” means the Allied Health Professionals Council Act.
3. For the purpose of section 5(d) of the Act, the Code of Practice for a Podiatrist shall be the Code set out in the Schedule.
4. Every podiatrist shall comply with the Code of Practice.
5. (1) Where a podiatrist fails to comply with the Code of Practice, the Council may, by notice in writing served on him, require him to comply with the Code of Practice.

(2) A podiatrist who fails to comply with the Code of Practice may be called by the Council to explain his non-compliance with the Code of Practice.
6. These regulations shall come into operation on 1 June 2022.

Made by the Minister, after consultation with the Allied Health Professionals Council, on 16 May 2022.

SCHEDULE
[Regulation 3]
CODE OF PRACTICE
PODIATRIST
PART I – GLOSSARY

1. Chiropody/Podiatry is a profession of health sciences concerned with the research, prevention, diagnosis and treatment of deformities, pathologies and injuries of the foot and associated structures in relation with the body as well as the manifestations of systemic diseases by all appropriate systems and technologies using scientific and professional specialised knowledge.
2. A podiatrist/podologue/chiroprapist is a protected professional title recognised in law and may only be used by an individual registered as per the Allied Health Professionals Council Act 2017 if that practice is within the Republic of Mauritius.

PART II – CODE OF ETHICS OF PODIATRIST
GENERAL DUTIES OF PODIATRIST

3. This Code determines the duties and obligations that must be discharged by every registered podiatrist.
4. A podiatrist must take reasonable measures to ensure that persons who collaborate with him and any partnership or joint-stock company in which he practices his profession comply with the Allied Health Professionals Council Act 2017.
5. A podiatrist must ensure that his obligations towards the partnership or company of which he is a director or officer are not incompatible with his obligations towards his patients.

PART III – DUTIES AND OBLIGATIONS TOWARDS THE PUBLIC

6. A podiatrist must promote the improvement of the quality and availability of professional services in the field in which he practices.
7. In the practice of his profession, a podiatrist must –
 - (a) consider all the foreseeable consequences that his opinion, advice, research and work may have on society;
 - (b) promote measures of education and information in the field in which he practices and perform the necessary acts to ensure such education and information;
 - (c) contribute to the development of his profession by collaborating in research work, by sharing his knowledge and experience with the members of his profession and students and by contributing to the development and presentation of continuing education activities; and
 - (d) keep his theoretical and clinical knowledge up to date in accordance with the evolution of podiatry, in particular by participating in continuing education activities.
8. A podiatrist must act with moderation and dignity and must seek to protect the health and well-being of his patients.

PART IV – DUTIES AND OBLIGATIONS TOWARDS THE PATIENT

9. Before accepting to provide professional services, a podiatrist must take into account the limits of his proficiency, knowledge and the means at his disposal and must ensure that his services are justified and opportune.
10. A podiatrist must practice his profession in accordance with the recognised standards of practice and the present state of knowledge in podiatry. For that purpose, he must –

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- (a) use the appropriate scientific methods and, where necessary, ask for the advice of another podiatrist;
 - (b) not resort to insufficiently tested examinations, investigations or treatments, unless they are part of a research project approved beforehand by an ethics committee, complying with the standards in force and carried out in a recognised scientific milieu; and
 - (c) refrain from performing a professional act which is not suitable or proportionate to the need of his patient.
- 11.** A podiatrist must, at all times, respect a patient's right to consult with another podiatrist or another qualified person. He must collaborate with the podiatrist so consulted.
- 12.** A podiatrist must endeavour to establish a relationship of mutual trust between himself and his patients and must not practice his profession in an impersonal manner.
- 13.** A podiatrist must not interfere in the personal affairs of his patients and on matters that are not relevant to podiatry.
- 14.** A podiatrist must carry out his professional obligations with integrity.
- 15.** (1) (a) A podiatrist must avoid any misrepresentation with respect to his level of competence or to the effectiveness of his services or of those provided by the members of his profession.
- (b) Where the interest of the patient so requires, a podiatrist must, with the patient's authorisation, consult another member of the Order or another qualified person, or refer the patient to one of those persons.

(2) A podiatrist must not commit any misrepresentation with respect to his competence or effectiveness of the services generally provided by the persons with whom he carries on professional activities within a partnership or joint-stock company.

16. Before giving any opinion or advice, a podiatrist must have full knowledge of the facts of the matter before him. He must not express an opinion or advice that is contradictory, false, misleading or incomplete.

17. (1) A podiatrist must inform his patient, in a simple, complete and objective manner, the nature and scope of a problem which, in his opinion, results from the patient's condition.

(2) A podiatrist must inform the patient of the therapeutic procedures, any recommended treatment plan and the related costs. A podiatrist must obtain the patient's explicit agreement in that regard.

18. (1) A podiatrist must inform the patient as soon as possible of any complication, incident or accident which occurred while he was providing a professional service to the patient.

(2) Notwithstanding section 18(1) above, a podiatrist must make an entry of the error, complication, incident or accident in the patient's record and take the appropriate measures to limit any consequences on the health of the patient.

19. A podiatrist must be available to and diligent towards patients.

20. (1) Except for just and reasonable cause, no podiatrist may cease to provide professional services to a patient.

(2) The following causes, among others, are considered just and reasonable –

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- (a) absence or loss of the patient's trust;
 - (b) lack of cooperation on the part of the patient and, in particular, refusal by the patient to submit to the treatment prescribed by the podiatrist or the patient's neglect to follow the podiatrist's opinion or advice;
 - (c) the fact that the podiatrist is in a conflict of interest or in a context such that the podiatrist's professional independence could be called into question; and
 - (d) incitement by the patient to perform illegal, unjust or fraudulent acts.

21. Before ceasing to provide professional services, a podiatrist must so inform the patient and ensure that no prejudice is caused to the patient as a result.

22. A podiatrist must assume full civil liability. He must not evade or attempt to evade professional liability or request that a patient or person renounce any recourse in a case of professional negligence on his part. Similarly, he may not invoke the liability of the partnership or joint-stock company within which he carries on his professional activities or that of another person also carrying on activities within the partnership or joint-stock company as a ground for excluding or limiting his liability.

23. A podiatrist must subordinate his personal interest and the interest of the partnership or joint-stock company within which he carries on his professional activities or in which he has interests to that of his patient.

24 . A podiatrist may not enter into any verbal or written agreement having the effect of compromising the independence, impartiality, objectivity and integrity required to carry on his professional activities. No agreement may, in particular –

- (a) exclude certain types or brands of podiatric orthoses from those he is authorised to manufacture, transform, alter or sell;
- (b) limit his freedom to buy and sell podiatric orthoses; and
- (c) define or restrict the professional services he offers to his patients.

25. A podiatrist must safeguard his professional independence and must not allow any intervention by a third person that could influence the performance of his professional obligations to the detriment of his patient.

26. A podiatrist must respect the right of patients to have their prescription filled at the place and by the professional of their choice.

27. (1) A podiatrist must not practise podiatry if he is in a situation of conflict of interest. A podiatrist may be in a situation of conflict of interest if he –

- (a) shares his income, in any form whatsoever, with a person, a trust or an enterprise, except for –
 - (i) in so far as that sharing corresponds to a distribution of services and responsibilities;
 - (ii) a person or a trust respecting the practice of the profession of podiatrist within a partnership or joint-stock company; and
 - (iii) a partnership or joint-stock company within which the podiatrist carries on his professional activities;

- (b) grants any commission, rebate, advantage or other consideration of a similar nature relating to the practice of podiatry; and
- (c) accepts, as a podiatrist or by using the title of podiatrist, any commission, rebate, advantage or other consideration of a similar nature, except for customary tokens of appreciation and gifts of small value;

(2) Notwithstanding paragraph 27 a podiatrist must not be in a situation of conflict of interest if he accepts a volume discount from a supplier for one of the following reasons –

- (a) for prompt or regular payment, if the discount appears on the invoice and is in keeping with marketplace rules in similar matters; or
- (b) due to the volume of products purchased other than medications, if the discount appears on the invoice or the statement of account and is in keeping with marketplace rules in similar matters; or
- (c) the podiatrist leases or uses the premises, equipment or other resources of a podiatric orthosis laboratory or a manufacturer of medications, orthopedic shoes, prostheses or other products related to the practice of podiatry; or
- (d) the podiatrist practises podiatry jointly, in a partnership or for a person or within a joint-stock company, unless the partnership, person or joint-stock company is –
 - (i) a podiatrist;
 - (ii) a government, governmental or municipal body, an educational institution or an institution

within the meaning of the Act providing health services and social services;

- (iii) an enterprise retaining his services for the sole purpose of providing podiatry advice or services to its employees; and
- (iv) a partnership or joint-stock company referred to in the Regulation respecting the practice of the profession of podiatrist within a partnership or a joint-stock company.

28. (1) A podiatrist must take the necessary measures to ensure that information and documents protected by professional secrecy are not disclosed to a partner, shareholder, director, manager, officer or employee of a partnership or joint-stock company within which he carries on his professional activities or in which he has an interest, as soon as he becomes aware that the partner, shareholder, director, manager, officer or employee has a conflict of interest.

(2) The following factors must be considered in assessing the effectiveness of such measures –

- (a) size of the partnership or company;
- (b) precautions taken to prevent access to the podiatrist's record by the person having a conflict of interest;
- (c) instructions given to protect confidential information or documents related to the conflict of interest; and
- (d) isolation, from the podiatrist, of the person having a conflict of interest.

29. A podiatrist must preserve the secrecy of all confidential information obtained in the practice of his profession.

30. (1) A podiatrist may be released from his obligation of keeping professional secrecy only with the written authorisation of his patient or where so ordered or expressly authorized by law.

(2) A podiatrist may also communicate information that is protected by professional secrecy to prevent an act of violence, including a suicide, where the podiatrist has reasonable cause to believe that there is an imminent danger of death or serious bodily injury to a person or an identifiable group of persons. However, the podiatrist may only communicate the information to the person or persons exposed to the danger or their representative, and to the persons who can come to that person's aid.

(3) A podiatrist may only communicate such information as is necessary to achieve the purposes for which the information is communicated.

31. A podiatrist must have the duty of keeping patient confidentiality unless expressly authorized otherwise by law, a court order or the patient.

32. A podiatrist must not make use of confidential information which may be prejudicial to a patient or with a view to obtaining a direct or indirect benefit for himself or for another person.

33. A podiatrist must ensure that any person with whom he carries on his professional activities does not communicate confidential information pertaining to a patient to a third person.

34. (1) A podiatrist must respond promptly, at the latest within 10 days of its receipt, to any request made by patients to consult documents or to obtain a copy of the documents that concern them in any record made in their respect.

(2) Section 34(1) also applies to any written request made by a patient, for the purpose of taking back a document entrusted to the podiatrist by the patient.

35. (1) A podiatrist may charge to the patient reasonable fees not exceeding the cost for reproducing or transcribing documents or the cost for transmitting a copy.

(2) A podiatrist who intends to charge such fees must, before proceeding with the copying, transcribing or transmitting of the information, inform the patient of the approximate amount to be paid.

36. A podiatrist must, at the written request of a patient and at the latest within 10 days of the date of such request, provide anyone designated by the patient with the relevant information in the record that he holds or maintains for the patient .

37. (1) A podiatrist must respond promptly, at the latest within 10 days of its receipt, to any request made by a patient to have information that is inaccurate, incomplete, ambiguous, outdated or unjustified corrected or deleted in any document concerning the patient. The podiatrist must also respect the patient's right to make written comments in the record.

(2) A podiatrist must give the patient, free of charge, a duly dated copy of the document or part of the document filed in the record so that the patient may verify that the information has been corrected or deleted or, as applicable, give the patient an attestation stating that the patient's written comments have been filed in the record.

38. A podiatrist must provide a copy, free of charge for the patient, of the corrected information or an attestation stating that the information has been deleted or, as applicable, that the written

comments have been filed in the record, to every person from whom the podiatrists received the information that was the subject of the correction, deletion or comments, and to every person to whom the information was communicated.

39. A podiatrist who denies a patient access to information contained in a record pertaining to the patient or who refuses to accede to a written request made by a patient to correct or delete information must provide the patient with written justification explaining the refusal, enter the written justification in the record and inform the patient of his or her recourses.

40. (1) A podiatrist must charge fair and reasonable fees for the provision of his services to a patient.

(2) Fees are fair and reasonable if they are justified by the circumstances and are in proportion to the services rendered. The podiatrist must, in particular, take into account the following factors when setting the fees –

- (a) the time spent carrying out the professional service;
- (b) the difficulty and magnitude of the service;
- (c) the performance of unusual services or services requiring exceptional competence or speed; and
- (d) where applicable, the cost to the podiatrist, of products or material necessary for the carrying out of his or her professional services.

41. (1) No podiatrist may charge fees for a professional service provided but not required.

(2) No podiatrist may charge fees for professional services not provided or fees which do not correspond to the services actually rendered.

42. A podiatrist must provide his patients with all the explanations necessary for the patient to understand his statement of fees and the terms of payment and, on request, a detailed statement of the fees and disbursements necessary for the performance of his professional services.

43. Before taking legal action, a podiatrist must exhaust all the other means available to him for obtaining payment of his fees.

44. When a podiatrist entrusts the collection of his fees to another person, he must take the necessary measures to make sure that the latter respects the confidentiality of the information contained in the patient's record.

45. Where a podiatrist carries on professional activities within a joint-stock company, the income resulting from the professional services rendered within and on behalf of the partnership or company belongs to the company, unless there is a written agreement to the contrary.

PART V – DUTIES AND OBLIGATIONS TOWARDS THE PROFESSION

46. Engaging in personal activities or activities relating to health services likely to compromise compliance with the duties and obligations that this regulation imposes on podiatrists is incompatible with the practice of the profession.

47. The following acts of a podiatrist are derogatory to the dignity of the profession –

- (a) unduly urging someone to use their professional services;
- (b) delivering, issuing or providing a false report, a false certificate or a false prescription to anyone;

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- (c) issuing to anyone, for any reason whatever, a prescription, certificate or attestation or any other document containing false, misleading, inaccurate or unchecked information;
 - (d) guaranteeing the effectiveness of their services;
 - (e) using or administering medication whose period of usage as indicated by the manufacturer has expired;
 - (f) lending one's name to a person for the purpose of permitting the person to recommend or to promote the sale, distribution or utilisation of medications or instruments used in the practice of podiatry, or with a view to permitting that person to recommend or promote a treatment;
 - (g) unduly seeking or making a profit on a treatment plan or on the sale of podiatric orthoses;
 - (h) altering or removing notes in a patient's record which are already entered, or replacing any part thereof without justification;
 - (i) allowing any person who is insufficiently qualified or competent to perform the tasks assigned to him and to assist the podiatrist in the practice of the profession;
 - (j) failing to forthwith inform the Allied Health Professionals Council when the podiatrist becomes aware of a person not qualified as a podiatrist performs acts reserved for podiatrists;
 - (k) knowingly deriving a profit from the illegal practice of podiatry by another person;
 - (l) resorting to legal proceedings against a patient within the delay of 45 days following receipt of a copy of an application for the conciliation of accounts;

- (m) communicating with a person who requested that an inquiry be held, without prior written permission of the syndic or the assistant syndic, where a podiatrist is informed that he is the object of an inquiry into their professional conduct or competence or where a podiatrist has been served with a complaint against him;
- (n) resorting to legal proceedings against another member of the Allied Health Professionals Council in connection with a matter related to the practice of the profession without having first required conciliation from the syndic;
- (o) charging, offering, accepting or agreeing to accept a sum of money or advantage for the purpose of having a procedure or decision of the Allied Health Professionals Council adopted or rejected;
- (p) providing false, inaccurate or misleading information to the Allied Health Professionals Council;
- (q) not informing the Allied Health Professionals Council that he has reason to believe that a podiatrist is incompetent or does not respect professional ethics;
- (r) refusing to provide his professional services to a patient for the sole reason that the patient has had or intends to have his or her prescription filled by a third person;
- (s) practising podiatry without identifying himself by their name and title;
- (t) carrying on professional activities within, or having an interest in, a partnership or company whose name compromises the dignity of the profession of podiatrist, or carrying on professional activities with a person who, to the podiatrist's knowledge, performs acts that are derogatory to the dignity of the profession of podiatrist;

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- (u) carrying on professional activities within, or having an interest in, a partnership or company, where a partner, shareholder, director or officer of the partnership or company has been struck off the roll of registered podiatrist for more than 3 months or has had his professional permit revoked, unless the partner, shareholder, director or officer –
- (i) ceases to hold a position of director, officer or representative within the partnership or company within 15 days of the date on which the mandatory striking off or revocation of permit has become effective;
 - (ii) ceases, if applicable, to attend any shareholder meetings and to exercise his or her right to vote within 15 days of the date on which the mandatory striking off or revocation of permit has become effective; or
 - (iii) disposes of his or her voting shares or units or turns them over to a trustee within 15 days of the date on which the mandatory striking off or revocation of permit has become effective; and
 - (v) intimidating, hindering or denigrating in any way whatsoever a person who has requested an inquiry or any other person identified as a witness likely to be summoned before a disciplinary body

48. A podiatrist must not abuse the good faith of another member of the Allied Health Professionals Council or be guilty of breach of trust or disloyal practices towards him or her.

49. A podiatrist must not intimidate, hinder or denigrate in any way whatsoever a representative of the profession acting in the performance of the duties conferred upon the representative by the regulations thereunder.

50. A podiatrist consulted by another member of the profession or another professional must promptly provide them with the results of the consultation and the recommendations deemed appropriate.

PART VI – ADVERTISING AND GRAPHIC SYMBOL

51. (1) A podiatrist’s advertising must convey only information that will help the public to make an enlightened choice and that will facilitate the public’s access to useful or necessary professional services.

(2) The information must be such that it informs persons having no particular knowledge of podiatry.

52. A podiatrist must not, by whatever means, advertise or make a representation to the public or to a person having recourse to his services or allow such to be made in his name, about them or for its benefit, that is false, misleading or incomplete, particularly as to their level of competence or the scope or effectiveness of their services, or unduly favouring a medication, products, or method of investigation or treatment with the sole purpose of deriving a profit.

53. A podiatrist must not, by any means whatsoever, engage in advertising or allow advertising that is likely to unduly influence persons who may be physically or emotionally vulnerable because of their age, state of health or personal condition.

54. A podiatrist who addresses the public must communicate factual, exact and verifiable information. The information must not contain any comparative or superlative statement belittling or

disparaging a service or product dispensed by another podiatrist or another professional.

55. A podiatrist must, in his advertising or in any other means used to offer professional services, clearly indicate his name and his podiatrist title. He may also mention the professional services he offers.

56. A podiatrist who practises within a partnership or joint-stock company of podiatrists is responsible for the content of every advertisement made on his behalf or on behalf of the partnership or joint-stock company, unless the name of the podiatrist who is responsible for the content of the advertisement is clearly indicated in the advertisement or unless the podiatrist demonstrates that the advertising was done without his knowledge and consent and in spite of the measures taken to ensure compliance with those rules.

57. A podiatrist must avoid, in advertising, all methods and attitudes likely to give a profit-seeking or commercialistic character to the profession.

58. (1) A podiatrist who includes a price in his advertising must indicate the following information –

- (a) the price of the service contemplated and, if any, the validity period;
- (b) any restrictions that apply;
- (c) any additional services or fees that might be charged and are not already included in the fee or price; and
- (d) additional fees associated with the terms of payment, if any.

(2) A podiatrist may agree with a patient to charge a lower price than that published or circulated.

59. A podiatrist must retain a complete copy of any advertisement for a period of 5 years following the date on which it was last published or circulated. The copy of the advertisement must, on request, be made available to the Allied Health Professionals Council.

60. A podiatrist who uses the graphic symbol of the Allied Health Professionals Council for advertising purposes must ensure –

- (a) that the symbol complies with the original held by the Registrar of the AHPC
- (b) that such advertising mentions that the podiatrist is a member of AHPC and
- (c) that such advertising is not interpreted as advertising for AHPC and that it does not bind AHPC in any way.

PART VII – STANDARDS OF PROFICIENCY

61. A registered chiropodist and podiatrist must –

- (a) practise safely and effectively within their scope of practice;
- (b) respect the limits of their practice and seek advice or consult another professional where and if needed;
- (c) manage their own workload and resources effectively and be able to practise accordingly.
- (d) practise within the legal and ethical boundaries of their profession and –
 - (i) act in the best interests of service users at all times;
 - (ii) comply with the requirements imposed by the Allied Health Professionals Council;
 - (iii) respect the rights, dignity, values and autonomy of service users

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- (iv) comply with the legislation applicable to their profession;
 - (v) exercise professional duty of care;
 - (e) maintain a high standard of personal and professional conduct;
 - (f) continually keeping their skills and knowledge up to date regarding any development in their profession, science and technology;
 - (g) exercise their own professional judgement –
 - (i) to assess a situation, determine the nature and severity of the problem and find a solution;
 - (ii) to make reasoned decisions to initiate, continue, modify or cease treatment or to make use of appropriate medical techniques or procedures, and record the decisions and reasoning appropriately;
 - (iii) to make and receive referrals; and
 - (iv) to participate in trainings, supervision, and mentoring;
 - (h) practise in a non-discriminatory manner;
 - (i) maintain the duty of confidentiality when handling patients' data unless otherwise required by law, a court order or to safeguard public interest; and
 - (j) have good and effective communication skills taking into account factors such as the age, capacity, learning ability, physical ability, culture, ethnicity, gender, socio-economic status and spiritual or religious beliefs of patients, including
 - (i) being able to demonstrate effective and appropriate communication skills when communicating

information, advice, instruction and professional opinion to service users, colleagues, and others;

- (ii) being able to communicate in English or in French;
- (iii) providing service users or people acting on their behalf with the necessary information to enable them to make informed decisions; and
- (iv) providing advice to patients on self-treatment where appropriate.

62. A podiatrist must –

- (a) work, where needed, in partnership with service users, other professionals and support staff;
- (b) build and sustain professional relationships both as an independent practitioner and collaboratively as a member of a team;
- (c) engage service users and carers in planning and evaluating diagnostics, treatments and interventions to meet their needs and goals; and
- (d) contribute effectively to work undertaken as part of a multi-disciplinary team.

63. A podiatrist must –

- (a) keep accurate, comprehensive and comprehensible records in accordance with applicable legislation, protocols, and guidelines; and
- (b) manage records and all other information in accordance with applicable legislation, protocols and guidelines.

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- 64.** A podiatrist must
- (a) understand the value of reflection on practice and the need to record the outcome of such reflection; and
 - (b) recognise the value of case conferences and other methods of review.
- 65.** A podiatrist must to assure the quality of his practice by –
- (a) engaging in evidence-based practice, evaluating his practice systematically and participating in audit procedures;
 - (b) gathering information, including qualitative and quantitative data, that helps to evaluate the responses of service users to their care;
 - (c) participating in, quality assurance programmes, where appropriate;
 - (d) evaluating intervention plans using recognised outcome measures and revising the plans as necessary in conjunction with the service user; and
 - (e) monitoring and evaluating the quality of his practice.
- 66.** A podiatrist must–
- (a) be aware of the principles and applications of scientific inquiry, including the evaluation of treatment efficacy and the research process;
 - (b) recognise the role of other professions in health and social care;
 - (c) understand the structure and function of health and social care services in Mauritius;
 - (d) understand the concept of leadership and its application to practice;

- (e) understand the theoretical basis of, and the variety of approaches to, assessment and intervention;
- (f) understand the structure and function of the human body, together with knowledge of health, disease, disorder and dysfunction relevant to his profession;
- (g) understand, in the context of chiropody and podiatry –
 - (i) anatomy and human locomotion;
 - (ii) behavioural sciences;
 - (iii) foot health promotion and education;
 - (iv) histology;
 - (v) immunology;
 - (vi) pharmacology;
 - (vii) physiology;
 - (viii) podiatric orthopaedics and biomechanics;
 - (ix) podiatric therapeutic sciences; and
 - (x) systemic and podiatric pathology.

67. A podiatrist must–

- (a) conduct appropriate diagnostic or monitoring procedures, treatment, therapy, or other actions safely and effectively;
- (b) gather appropriate information;
- (c) select and use appropriate assessment techniques;
- (d) undertake and record a thorough, sensitive and detailed assessment of using appropriate techniques and equipment;
- (e) formulate specific and appropriate management plans including the setting of time scales;

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- (f) conduct neurological, vascular, biomechanical, dermatological and podiatric assessments in the context of chiropody and podiatry;
 - (g) use a systematic approach to formulate and test a preferred diagnosis;
 - (h) use basic life support skills and to deal safely with clinical emergencies;
 - (i) change his practice as needed to take account of new developments or changing contexts;
 - (j) know and be able to interpret the signs and symptoms of systemic disorders as they manifest in the lower limb and foot with particular reference to –
 - (i) cardiovascular disorders;
 - (ii) dermatological disorders;
 - (iii) developmental disorders;
 - (iv) diabetes mellitus;
 - (v) infections;
 - (vi) malignancy;
 - (vii) neurological disorders;
 - (viii) renal disorders; and
 - (ix) rheumatoid arthritis and other arthropathies.
 - (k) carry out the following techniques safely and effectively –
 - (i) administer relevant prescription-only medicines, interpret any relevant pharmacological history

- and recognise potential consequences for patient treatment;
- (ii) apply local anaesthesia techniques (for the one qualified);
 - (iii) carry out mechanical debridement of intact and ulcerated skin;
 - (iv) carry out surgical procedures for skin and nail conditions;
 - (v) manage nail disorders;
 - (vi) make and use chair-side foot orthoses;
 - (vii) prescribe foot orthoses;
 - (viii) use appropriate physical and chemical therapies.
- (l) undertake or arrange investigations as appropriate;
 - (m) analyse and critically evaluate the information collected;
 - (n) interpret physiological, medical and biomechanical data in the context of chiropody and podiatry;
 - (o) demonstrate a logical and systematic approach to problem solving;
 - (p) use research, reasoning and problem solving skills to determine appropriate actions;
 - (q) research and critically evaluate his practice;
 - (r) use a range of research methodologies;
 - (s) evaluate research and other evidence to inform his own practice; and
 - (t) use information and communication technologies appropriate to their practice.

68. A podiatrist must –

- (a) maintain the safety of both service users and those involved in his care;
 - (b) comply with applicable health and safety legislation, and any relevant safety policies and procedures in force at the workplace, such as incident reporting and act in accordance with these;
 - (c) work safely, including selecting appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation;
 - (d) use appropriate personal protective equipment correctly;
 - (e) establish safe environments for his practice, which minimise risks to service users, those treating them and others, including the use of hazard control and particularly infection control;
 - (f) know how to position or immobilise patients correctly for safe and effective interventions;
 - (g) apply the correct principles and applications of disinfectants, methods for sterilisation and decontamination, and for dealing with waste and spillages; and
 - (h) be aware of immunisation requirements and the role of occupational health.
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