

End Point Assessment Plan

Podiatrist

Integrated Degree Apprenticeship

Level 6

October 2018

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1. Overview

This end point assessment plan is designed to accompany the Podiatrist integrated degree apprenticeship standard.

The end point assessment plan is part of an integrated degree apprenticeship in Podiatry. Apprentices will be required to complete a Health and Care Professions Council (HCPC) approved BSc (Honours) or (where the apprentice already holds a level 6 honours degree) a pre-registration MSc in Podiatry. The apprenticeship will be delivered by apprenticeship training providers listed on the Register of Apprenticeship Training Providers (RoATP) and assessed by organisations on the Register of End-Point Assessment Organisations (RoEPAO).

The Bachelor of Science degree (BSc (hons)) / the pre-registration Masters degree (MSc) will combine on-programme academic and work based learning and assessment together with an independent end point assessment that tests the achievement of knowledge, skills and behaviours outlined in the standard. The end point assessment will contribute 20 level 6 credits to the BSc (hons) / pre-registration MSc.

This plan details the end point assessment requirements of the apprenticeship and will be of interest to apprentices, employers, HE providers and healthcare service users.

2. Apprenticeship structure

The BSc (hons) degree must comprise 360 credits. 340 credits will be dedicated to on-programme assessment. The pre-registration MSc degree must comprise 180 credits. 160 credits will be dedicated to on-programme assessment. The BSc (hons) / pre-registration MSc degree will be accredited by the College of Podiatry and the Health and Care Professions Council. The final 20 credits of the programme will be dedicated to the end point assessment. In order to gain the final 20 credits, the apprentice must pass both elements of the End Point Assessment.

2.1 Gateway to End Point Assessment

The apprentice's employer, in consultation with the training provider will confirm that the apprentice is eligible to progress to the end point assessment. Eligibility is confirmed once the apprentice has met the criteria for progression to end point assessment. In order to progress to end point assessment, apprentices must meet the criteria in Table 1

Table 1: Gateway Criteria for Podiatry

- Achievement of English and Mathematics qualification at a minimum of level 2
- Achievement of 340 credits of the Integrated BSc (hons) degree in Podiatry or 160 credits of the pre-registration MSc degree in Podiatry from the on-programme apprenticeship formally confirmed prior to the gateway

progression. The final 20 credits of the degree will be attributed to end point assessment

- Achievement of the knowledge, skills and behaviours in the standard
- Confirmation from the employer that the requirements of the apprentice standard has been met within the apprentices workplace and that they deem the apprentice ready to be put forward to end point assessment

Employers should recommend that the apprentice progress to end point assessment only when they have completed the gateway and are considered ready to undertake end point assessment. Whilst the decision to put an apprentice forward to end point assessment lies with the employer, normally this decision will be made using supporting information and feedback on the apprentices' progress from the training provider.

2.2 End Point Assessment (EPA)

The end-point assessment will provide independent synoptic assessment of the knowledge, skills and behaviours of the apprenticeship standard. The end-point assessment will deliver a valid, reliable and independent judgement that the apprentice has achieved the standard required in order to be awarded the apprenticeship as a Podiatrist. As an integrated degree apprenticeship, achievement of the end-point assessment will allow the apprentice to gain the integrated degree apprenticeship for Podiatry.

As this is an integrated degree apprenticeship, the end point assessment organisation will be the training provider responsible for delivering the Podiatry apprenticeship programme. The training provider must therefore be on the Education and Skills Funding Agency Register of End Point Assessment Organisations (RoEPAO). The training provider is termed the end-point assessment organisation and must uphold all requirements for independent assessment in the end point assessment as identified in this plan.

2.3 Roles and Responsibilities

Table 2: Roles and responsibilities in EPA

Role	Responsibilities
Apprentice	<ul style="list-style-type: none"> • Takes responsibility for learning independently and preparing for the EPA • Contributes to the decision on the timing of their EPA
Employer	<ul style="list-style-type: none"> • Determines when the apprentice is competent and ready to attempt the EPA • Enables the end point assessment organisation independent assessor to observe the apprentice within the workplace • Sends a representative who is occupationally competent in Podiatry to take part in the presentation panel. This person can provide context and take part in the process of arranging the end point assessment, but does not make assessment decisions related to the EPA.
Training Provider (Higher Education Institute)	<ul style="list-style-type: none"> • Advises the employer when the apprentice has achieved the on-programme requirements and is ready to undertake the EPA. • Sends a suitable representative to join the panels as an observer of due process in relation to the degree credit element of the EPA. This person should only provide context (at the request of the independent assessor) and should not be involved in making assessment decisions related to the EPA.
End Point Assessment Organisation	<ul style="list-style-type: none"> • Is the University that delivers the on-programme degree or masters degree • Is Registered on the Register of End Point Assessment Organisations • Recruits and trains independent assessor(s) to conduct the EPA • Responsible for developing EPA materials • Administers the EPA • Ensures that independent assessor(s) is occupationally competent and able to assess the performance of the apprentice using the EPA method (see Internal Quality Assurance section) • Actively participates in the quality assurance procedures described in this assessment plan
Independent Assessor	<ul style="list-style-type: none"> • Is occupationally competent in Podiatry and academically competent in degree or masters degree level assessment holding a degree, masters or equivalent knowledge and experience themselves • Observes the apprentice in the workplace • Determines the observation grade • Chairs the presentation panel • Determines the presentation grade • Determines the final apprenticeship grade • Must come from a third-party organisation separate from the employer or training provider. If this is not possible they can be sourced from within the same training provider but must not have been involved in the on-programme delivery

3. End Point Assessment Methods

The end-point assessments listed below can be taken in any order.

Table 3: Overview of methods

	Method	Duration	Assessed by	On panel
1	Observation including the question and answer session	120 minutes	Independent Assessor	<ul style="list-style-type: none"> • Independent Assessor • training provider representative
2	Presentation	45 minutes	Independent Assessor	<ul style="list-style-type: none"> • Independent Assessor • Employer Representative • training provider representative

3.1 Observation of practice

The live observation of practice is undertaken in the apprentice's workplace and must last for 90 minutes (+/- 10% at the discretion of the independent assessor to provide scope for an apprentice to demonstrate their full abilities). The apprentice will be observed in providing podiatry care to an individual or succession of individuals. As the apprentice will be carrying out their everyday work with patients, the number of patients and precise activity cannot be determined in advance. These patients will not be chosen for the end-point assessment but are part of the normal workload of the apprentice. Examples of 'workplaces' can include a hospital, community setting or private clinic. The Independent Assessor will only observe one apprentice at a time.

The assessment panel will comprise

- i) The independent assessor, who is the Chair and final decision maker
- iii) A university representative (as a silent observer)

The assessment must be terminated if at any time during the 90-minute assessment the independent assessor observes unsafe practice and the apprentice will not be permitted to continue onto the presentation. The employer will decide when the apprentice is ready to attempt the end-point assessment again. The employer may gather views from the training provider and the apprentice to inform their decision.

Should an unexpected event occur, for example a fire alarm, the observation will be paused and re-started to ensure that the apprentice is observed providing podiatry care for the full 90 minutes.

The observation must provide evidence of the apprentice demonstrating the knowledge, skills and behaviours identified in bold in Appendix A. The observation will be followed by a question and answer session to clarify what has been seen during the observation and the choices or actions taken by the apprentice. It will also cover any of the requirements that did not occur naturally during the 90 minute observation. The question and answer session is 30 minutes (+/- 10% at the discretion of the independent assessor to provide scope for an apprentice to demonstrate their full abilities).

The observation will assess the knowledge, skills and behaviours in the following domains:

- Person-centred practice
- Clinical Care
- Health, Safety and Security
- Personal and Professional Development

A breakdown listing the individual knowledge, skills and behaviours are included in Appendix 1 **in bold**. These are the higher level knowledge, skills and behaviours. Lower level knowledge, skills and behaviours are not emboldened as they will be demonstrated by the achievement of the higher ones.

3.2 Presentation

The apprentice will develop and deliver a 20-minute presentation (+/- 10% at the discretion of the independent assessor to provide scope for an apprentice to demonstrate their full abilities) to an assessment panel followed by a 25 minutes (+/- 10% at the discretion of the independent assessor to provide scope for an apprentice to demonstrate their full abilities) question and answer session to seek further clarity.

Presentation scope

The presentation title(s) will be set by the End Point Assessment Organisation and shared with the apprentice 6 weeks before the End Point Assessment date.

It will assess the knowledge, skills and behaviours in the following domains:

- D1. Person-centred practice
- D2. Clinical Care
- D3. Health, Safety and Security
- D4. Personal and Professional Development

A breakdown listing the individual knowledge, skills and behaviours are included in Appendix 2 **in bold**. These are the higher level knowledge, skills and behaviours. Lower level knowledge, skills and behaviours are not emboldened as they will be demonstrated by the achievement of the higher ones

This is a synoptic assessment that demonstrates the apprentice's integration of the knowledge, skills and behaviours across the Podiatrist standard. The presentation may be supported by media of the apprentice's choice e.g. poster, PowerPoint, video, flip chart etc. The presentation must be fully referenced with a copy of references used submitted to the assessment panel. Apprentices will be given details of the requirements for the presentation by the End Point Assessment Organisation and will be asked to submit their presentation to them at least two weeks before the End Point Assessment date.

Presentation assessment panel

The assessment panel will comprise

- i) The end point assessment organisation independent assessor, who is the only person able to make assessment decisions
- ii) An employer representative to set the context
- iii) A university representative as a silent observer

Video conferencing facilities can be used to enable attendance of all assessment panel members.

4. Retakes/Resits

Apprentices who fail one or more assessment method will be offered the opportunity to take a re-sit or a re-take. A re-sit does not require further learning, whereas a re-take does.

Apprentices should have a supportive action plan to prepare for the re-sit or a re-take. The apprentice's employer will need to agree that either a re-sit or re-take is an appropriate course of action.

An apprentice who fails an assessment method, and therefore the EPA in the first instance, will be required to re-sit any failed assessment methods only. Any assessment method re-sit or re-take must be taken during the maximum EPA period, otherwise the entire EPA must be taken again, unless in the opinion of the EPAO exceptional circumstances apply outside the control of the apprentice or their employer.

Where any assessment method has to be re-sat or re-taken, the apprentice will be awarded a maximum EPA grade of pass, unless the EPAO determines there are exceptional circumstances requiring a re-sit or re-take.

5. Grading

The degree will be classified in line with the awarding Higher Education Institute classifications for BSc (hons) and MSc degrees. The apprenticeship will be graded using Fail, Pass or Distinction.

5.1 Observation

The observation is not graded above pass. The observation takes place in a real work setting where it is not possible to introduce variables that could be used to determine grade above pass.

- **Fail**
The apprentice does not meet all of the requirements highlighted in bold within Appendix 1.

- **Pass**
The apprentice meets all of the requirements highlighted in bold within Appendix 1 because they:
 1. Show respect, empathy and discretion, treating the patient with dignity and respect (B1, B2 & B3)
 2. Gain informed consent (S1 & K2)
 3. Communicate using a range of verbal and non-verbal communication techniques appropriate to the patient's age, emotional or mental state or cognitive ability (S3 & K4)
 4. Work collaboratively with the patient to encourage mobility, independence and appropriate self-care (S2 and S9)
 5. Respect the patient's choices or wishes when planning or carrying out treatment (S1)
 6. Encourage informed decision making by explaining the treatment options and the risks and benefits of prognosis, including of not treating (S4 & S1)
 7. Adhere to health and safety requirements, maintaining a safe, hazard-free, clean environment including following protocols for sterilisation, infection prevention and control or disposal and using appropriate moving and handling techniques (S18, K23, K24 & K26)
 8. Observe, assess, diagnose, monitor or treat the patient's lower limb using their professional judgement in line with the HCPC standards of proficiency (S7, K11)
 9. Use and explain a range of techniques aligned to the theoretical basis of podiatry interventions and diagnosis to assess the nature and severity of the problem (S6, S8 & K12)
 10. Create, store, retrieve, share, adapt or update records and treatment plans in line with confidentiality and other legal requirements (S14 & K20)

11. Provide verbal or written health education to the patient including preventative, palliative or curative information (S15)
12. Be able to explain their role in relation to safeguarding (S1)
13. Be able to explain the clinical reasoning they have used during the observation and how they have used a systematic approach to select an evidence-based treatment or intervention; to formulate and test a preferred diagnosis; or to resolve a problem (S8, K13)
14. Be able to explain their professional accountability and how clinical governance affects their role (S21, S24, K28)
15. Be able to explain when and how to adapt or to cease a treatment (K12)

5.2 Presentation

The presentation is considered a single assessment and is given an overall grade of Fail, Pass or Distinction by the independent assessor where:

- **Fail**
The Apprentice does not meet all of the knowledge, skill and behaviour requirements highlighted bold within Appendix 2. They fail if:
 1. They are unable to provide evidence of the identified knowledge, skills and behaviours.
 2. They are unable to articulate ideas with clear understanding of the issues.
 3. They demonstrate potentially unsafe practice.

- **Pass**
The apprentice meets all of the knowledge, skill and behaviour requirements highlighted in bold within Appendix 2 because they:
 1. Critically appraise and synthesise evidence of the identified knowledge, skills and behaviours.
 2. Articulate ideas succinctly in a way that demonstrates their understanding of the issues
 3. Evidence through the examples that they give that they demonstrate safe and evidence-based practice (S24 & B2)
 4. Show that they are familiar with the principles and applications of scientific enquiry, including a range of research methods and critical thinking and how they have applied it to their own patient care (K31)
 5. Explain how and when they should challenge areas of concern (B2)
 6. Evidence through the examples that they give about their own practice that they are reliable, consistent, adaptable and resilient (B3)
 7. Give examples that show they understand compassionate person-centred care including treating people as an individual, working in partnership with them to develop treatment plans and empowering them to make informed decisions and choices about their own care (K5)
 8. Give an example of when they have had to refer a patient to another service, including describing the processes and protocols for discharge, the types of service available and where they can seek additional help or advice from (K18)
 9. Use examples from their own practice that show they are a reflective practitioner, able to evaluate and measure their own practice and performance (S23, K36)
 10. Give an example of how they have been involved in the ongoing quality improvement of podiatry practice, showing how they have used clinical governance processes, quality, safety and effectiveness measures including feedback from patients (K35)

11. Evidence how they work as part of a multi-professional team and give an example of the ways in which they demonstrate their leadership and management skills (S22 & B3)
12. Evidence how they have developed and used podiatry treatment plans, including explaining how they have engaged with patients to be active in their own care (K5 & K6)
13. Give an example of how they have taken part in risk assessment including assessing, recording, mitigating or reviewing risks around podiatry services, treatment plans or interventions (S16)
14. Give an example of when they have managed group or individual sessions that shows they have used a range of delivery methods, engaged with public health messages in relation to podiatry and checked that the material is understood (K21)

- Distinction

As for pass plus the apprentice:

1. Critically evaluates, appraises and synthesises evidence of the identified knowledge, skills and behaviours and demonstrates the application of this within a framework of clinical accountability and responsibility.
2. Explores and evaluates a range of solutions and options and selects for implementation that which will benefit the practice and improve patient care and outcomes eg positive feedback from patient (B2)
3. Gives examples from their own practice of how they have evaluated and reflected on their practice to assess and measure and improve their own practice where appropriate using local and national standards and reflective frameworks (S23, K36)
4. Proactively lead a change process within the multi-professional team that results in either improved patient outcome or improved efficiency (S22 & B3)
5. Give examples that show they have worked with difficult patients who do not want to be empowered and take ownership of their care and onward wellbeing (K5)
6. Shows commitment to continuous CPD by changing their practice as a result of continually reflecting practice eg change their approach to dealing with patient care or change how they educate others (K21)
7. Give an example of how they have led risk assessment and or put measures in place to mitigate risks (S16)

5.3 Overall Grading

The successful apprentice receives an overall grade for the end point assessment of Fail, Pass or Distinction which is determined by the independent assessor. The apprentice must pass both elements of the assessment for a final grade to be given. Retakes/Resits are capped as a pass.

Table 4: Apprenticeship classification

Observation	Professional Discussion	Overall Grade
Fail	Fail	Fail
Fail	Pass	Fail
Fail	Distinction	Fail
Pass	Fail	Fail
Pass	Pass	Pass
Pass	Distinction	Distinction

6. End-Point Assessment Organisation – Internal Quality Assurance

End-point assessment organisations must ensure robust internal quality assurance processes in line with the requirements of this assessment plan.

Table 5: IQA

Internal Quality Assurance – Responsibilities of the End Point Assessment Organisation
<ol style="list-style-type: none"> 1. Ensure that the end-point assessment has been accredited at 20 level 6 credits as part of the integrated degree or masters degree. 2. Apply local training provider regulations to ensure fair and reliable conduct of assessment. 3. Appoint independent assessors to conduct the end point assessment that are occupationally competent across the whole of the standard i.e. a registered Podiatrist with post-qualifying clinical experience, current registration and who holds an assessor qualification. 4. Ensure that all independent assessors are appropriately prepared to undertake their assessment and quality role including preparation, conducting and marking assessments. 5. Ensure that training provider representatives and employer representatives are briefed about their roles on the panels and are aware that they will not be making assessment decisions in relation to end point assessment. 6. Ensure that independent assessor maintains professional registration and is participating in ongoing continuing professional development. 7. Ensure that end point assessment dates and schedules, including any reassessment opportunities are clearly published to apprentices and their employers. 8. Publish detailed assessment criteria for each end point assessment method. 9. Publish detailed guidance for the end-point assessment containing clear information for independent assessors, observing assessors, employer

representatives, apprentices, employers, examiners and on-programme staff.

10. Ensure that appropriate arrangements are made to support apprentices with identified reasonable adjustments.
11. Ensure that adequate resources are available to conduct assessments, including for those requiring reasonable adjustments.
12. Provide a sample of work for independent external review in line with training provider regulations, receive and act upon reports.
13. Monitor apprentice evaluations of end point assessment process, apprentice progression and achievement in end point assessment.
14. Prepare an annual report, acting on recommendations for improvement
15. Identify areas of improvement and to report on innovative or best practice as requested by the External Quality Assurance provider.
16. Undertakes annual standardisation and moderation activities. End Point Assessors must attend once a year.

7. External Quality Assurance

To be advised - the Institute for Apprenticeships is exploring whether QAA can undertake external quality assurance for degree level standards.

8. Regulation

Podiatrists are regulated by the Health and Care Professions Council ([HCPC](#)) and the title is protected under law. Apprentices will be able to apply for registration on successful completion of their degree or masters degree.

9. Affordability

This approach to independent assessment has been tested with employers who have confirmed that it is the preferred approach.

Affordability has been built into the design of the end point assessment as it uses the employer's premises for the observation assessment method.

10. Volumes

It is anticipated that there will be 12 starts in the first year on this apprenticeship and 20 per year once established.

Appendix 1: Observation of Practice

Through the observation the apprentice must provide evidence of meeting all the requirements in bold (in the extract from the standard below). These are considered to be the higher order knowledge and skills which give assurance of lower level knowledge and skills. The training provider in its capacity as End Point Assessment Organisation is responsible for designing a structured observation process that will allow the independent assessor to record that the apprentice has showcased this knowledge, skills and behaviours.

Behaviours
B1. You will treat people with dignity , respecting individual's diversity, beliefs, culture, needs, values, privacy and preferences. B2. You will show respect and empathy for those you work with, have the courage to challenge areas of concern and work to evidence based best practice. B3. You will also be adaptable, reflective, reliable and consistent, show discretion , resilience, self-awareness and demonstrate leadership.

Domain	You will be able to:	You will know and understand:
D1. Person-centred practice	<p>S1. protect and keep people safe, applying current legislation to promote their rights, choices and wishes, treating them with dignity and respect, explain treatment options and risks/ benefit/ prognosis including no treatment to obtain and document informed consent for podiatry care</p> <p>S2. work collaboratively with patients and others</p> <p>S3. communicate effectively and appropriately, listening carefully to determine all the factors affecting the patient's foot health in the context of their medical and social history and ability to self-care</p> <p>S4. establish person-centred podiatry agreed treatment plans, encouraging informed decision-making</p> <p>S5. encourage and enable appropriate self-care</p>	<p>K1. legislation, policies and procedures relating to safeguarding, ethics, equality, diversity and inclusion</p> <p>K2. what is meant by informed consent and how to secure it across the age range and in line with cognitive ability</p> <p>K3. ways to work effectively with families, carers and other teams</p> <p>K4. the importance of communication in plain English using a range of verbal and non-verbal communication techniques appropriate to age, emotional or mental state or cognitive ability</p> <p>K5. what is meant by compassionate person-centred care including ways to engage people in their own care</p> <p>K6. podiatry treatment planning processes including the risks and benefits of treatment plans</p>

Domain	You will be able to:	You will know and understand:
D2. Clinical Care	<p>S6. select and use appropriate assessment and treatment techniques safely, effectively and ethically e.g. interpreting medical history; recognising potential consequences of treatment; carrying out mechanical debridement to remove painful, dead, damaged, or infected tissue of intact and ulcerated skin; taping and similar adjunctive therapies; carrying out surgical procedures for skin and nail conditions; managing nail disorders, or prescribing foot orthoses</p> <p>S7. observe, assess, diagnose, monitor and treat a patient's lower limb, reviewing, updating and adapting or ceasing treatment as required</p> <p>S8. use a systematic approach to formulate and test a preferred diagnosis</p> <p>S9. work with a range of conditions encouraging mobility and independence</p> <p>S10. perform treatments, including minor surgery under local anaesthetic</p> <p>S11. manage medicines including accessing, supplying and administering prescription-only medicines</p> <p>S12. use basic life support skills to deal safely with clinical emergencies</p> <p>S13. make and receive referrals, including being responsible for the interpretation of clinical findings in relation to the lower limb and the decision for onward referral or discharge</p> <p>S14. create, store, retrieve and update records in accordance with legislation, protocols and guidelines</p> <p>S15. provide verbal and written health education on public health, foot health, mobility and the lower limb, including preventative, palliative or curative information, in a group or one to one setting</p>	<p>K7. the structure and function of the human body including the biomechanics of the lower limb and the impact it has on the whole body</p> <p>K8. the importance of mobility and how it affects life experience</p> <p>K9. a range of clinical needs relevant to the lower limb such as acute or chronic neuropathies, long term conditions, or musculoskeletal disorders including dealing with people with a degenerative condition or whose diagnosis or prognosis is worsening</p> <p>K10. a range of screening techniques such as diabetic risk stratification, vascular and neurological assessments or the taking of swabs or tissue samples</p> <p>K11. ways to use your judgement when observing, assessing, diagnosing, monitoring and treating the patient</p> <p>K12. theoretical basis of podiatry interventions and diagnosis including when to adapt or cease treatment</p> <p>K13. clinical reasoning and the processes that underpin decision-making and problem solving</p> <p>K14. possible effects of anaesthesia including dosage calculation</p> <p>K15. when minor surgery may be required</p> <p>K16. medicines management within the limits of your competence as outlined in legislation and the HCPC requirements</p> <p>K17. current basic life support practices and how to apply them</p> <p>K18. when and where to refer</p> <p>K19. podiatry discharge procedures and protocols</p> <p>K20. how to record, report and store information in line with legislation, policy and procedures including your role in relation to audit and data management</p> <p>K21. ways to manage group dynamics or individual sessions including ways to ensure material is understood</p>

Domain	You will be able to:	You will know and understand:
D3. Health Safety and Security	<p>S16. assess, record, mitigate and review risks around podiatry services or treatments</p> <p>S17. move and position people and podiatry equipment safely</p> <p>S18. keep the environment clean and safe from hazards</p> <p>S19. order, store, sterilise and dispose of equipment and other stock used in podiatry services</p> <p>S20. incident reporting and follow on protocols when a safety risk has been breached</p>	<p>K22. health and safety legislation, policies and procedures including how to assess risks that ensures safety and security and promotes recovery, mobility or independence</p> <p>K23. a range of moving and handling techniques</p> <p>K24. ways to ensure infection prevention and control</p> <p>K25. ways to keep yourself, patients and colleagues safe including lone working, ways to reduce occupational stress and the importance of maintaining your own health and well-being</p> <p>K26. processes for ordering and storing stock including cost-effectiveness, sterilisation and disposal protocols and the safe storage of prescription-only medicines</p> <p>K27. when and how to escalate issues and incidents that will impact on your work environment</p>
D4. Personal and Professional Development	<p>S21. work within the scope of practice for podiatrists, including being professionally accountable and adhering to clinical governance</p> <p>S22. work as part of a multi-professional team, demonstrating leadership and management skills</p> <p>S23. evaluate and measure your own practice and performance and that of those you work with, using clinical governance processes to improve podiatry practice and overall standards in healthcare</p> <p>S24. demonstrate evidence-based practice</p>	<p>K28. the limits of your scope of practice as a podiatrist including the legislation, standards and codes of conduct that apply</p> <p>K29. what is meant by clinical governance and accountability in relation to your role</p> <p>K30. the importance of participating in appraisal, training and development</p> <p>K31. a range of research methods used in podiatry including the principles and applications of scientific enquiry to podiatry and lower limb function</p> <p>K32. how health and care services are structured and function including ways to work across boundaries</p> <p>K33. a range of leadership and management techniques including ways to supervise and mentor others</p> <p>K34. ways to evaluate your own performance and that of others, including giving and receiving feedback</p> <p>K35. the role of outcome measures in evaluating the efficacy of treatments and interventions including ways of improving podiatry practice</p> <p>K36. critical reflection and its academic basis including models of critical reflection and how to apply it to patient care</p>

Appendix 2: Presentation

Through the presentation the apprentice must provide evidence of meeting all the requirements in bold (in the extract from the standard below). These are considered to be the higher order knowledge and skills which give assurance of lower level knowledge and skills. The training provider in its capacity as End Point Assessment Organisation is responsible for designing the structured template that will allow the apprentice to showcase this knowledge, skills and behaviour outcomes.

Behaviours

B1. You will treat people with dignity, respecting individual's diversity, beliefs, culture, needs, values, privacy and preferences. B2. You will show respect and empathy for those you work with, **have the courage to challenge areas of concern and work to evidence based best practice.** B3. **You will also be adaptable, reflective, reliable and consistent, show discretion, resilience, self-awareness and demonstrate leadership.**

Domain	You will be able to:	You will know and understand:
D1. Person-centred practice	S1. protect and keep people safe, applying current legislation to promote their rights, choices and wishes, treating them with dignity and respect, explain treatment options and risks/ benefit/ prognosis including no treatment to obtain and document informed consent for podiatry care S2. work collaboratively with patients and others S3. communicate effectively and appropriately, listening carefully to determine all the factors affecting the patient's foot health in the context of their medical and social history and ability to self-care S4. establish person-centred podiatry agreed treatment plans, encouraging informed decision-making S5. encourage and enable appropriate self-care	K1. legislation, policies and procedures relating to safeguarding, ethics, equality, diversity and inclusion K2. what is meant by informed consent and how to secure it across the age range and in line with cognitive ability K3. ways to work effectively with families, carers and other teams K4. the importance of communication in plain English using a range of verbal and non-verbal communication techniques appropriate to age, emotional or mental state or cognitive ability K5. what is meant by compassionate person-centred care including ways to engage people in their own care K6. podiatry treatment planning processes including the risks and benefits of treatment plans

Domain	You will be able to:	You will know and understand:
D2. Clinical Care	<p>S6. select and use appropriate assessment and treatment techniques safely, effectively and ethically e.g. interpreting medical history; recognising potential consequences of treatment; carrying out mechanical debridement to remove painful, dead, damaged, or infected tissue of intact and ulcerated skin; taping and similar adjunctive therapies; carrying out surgical procedures for skin and nail conditions; managing nail disorders, or prescribing foot orthoses</p> <p>S7. observe, assess, diagnose, monitor and treat a patient's lower limb, reviewing, updating and adapting or ceasing treatment as required</p> <p>S8. use a systematic approach to formulate and test a preferred diagnosis</p> <p>S9. work with a range of conditions encouraging mobility and independence</p> <p>S10. perform treatments, including minor surgery under local anaesthetic</p> <p>S11. manage medicines including accessing, supplying and administering prescription-only medicines</p> <p>S12. use basic life support skills to deal safely with clinical emergencies</p> <p>S13. make and receive referrals, including being responsible for the interpretation of clinical findings in relation to the lower limb and the decision for onward referral or discharge</p> <p>S14. create, store, retrieve and update records in accordance with legislation, protocols and guidelines</p> <p>S15. provide verbal and written health education on public health, foot health, mobility and the lower limb, including preventative, palliative or curative information, in a group or one to one setting</p>	<p>K7. the structure and function of the human body including the biomechanics of the lower limb and the impact it has on the whole body</p> <p>K8. the importance of mobility and how it affects life experience</p> <p>K9. a range of clinical needs relevant to the lower limb such as acute or chronic neuropathies, long term conditions, or musculoskeletal disorders including dealing with people with a degenerative condition or whose diagnosis or prognosis is worsening</p> <p>K10. a range of screening techniques such as diabetic risk stratification, vascular and neurological assessments or the taking of swabs or tissue samples</p> <p>K11. ways to use your judgement when observing, assessing, diagnosing, monitoring and treating the patient</p> <p>K12. theoretical basis of podiatry interventions and diagnosis including when to adapt or cease treatment</p> <p>K13. clinical reasoning and the processes that underpin decision-making and problem solving</p> <p>K14. possible effects of anaesthesia including dosage calculation</p> <p>K15. when minor surgery may be required</p> <p>K16. medicines management within the limits of your competence as outlined in legislation and the HCPC requirements</p> <p>K17. current basic life support practices and how to apply them</p> <p>K18. when and where to refer</p> <p>K19. podiatry discharge procedures and protocols</p> <p>K20. how to record, report and store information in line with legislation, policy and procedures including your role in relation to audit and data management</p> <p>K21. ways to manage group dynamics or individual sessions including ways to ensure material is understood</p>

Domain	You will be able to:	You will know and understand:
D3. Health Safety and Security	<p>S16. assess, record, mitigate and review risks around podiatry services or treatments</p> <p>S17. move and position people and podiatry equipment safely</p> <p>S18. keep the environment clean and safe from hazards</p> <p>S19. order, store, sterilise and dispose of equipment and other stock used in podiatry services</p> <p>S20. incident reporting and follow on protocols when a safety risk has been breached</p>	<p>K22. health and safety legislation, policies and procedures including how to assess risks that ensures safety and security and promotes recovery, mobility or independence</p> <p>K23. a range of moving and handling techniques</p> <p>K24. ways to ensure infection prevention and control</p> <p>K25. ways to keep yourself, patients and colleagues safe including lone working, ways to reduce occupational stress and the importance of maintaining your own health and well-being</p> <p>K26. processes for ordering and storing stock including cost-effectiveness, sterilisation and disposal protocols and the safe storage of prescription-only medicines</p> <p>K27. when and how to escalate issues and incidents that will impact on your work environment</p>
D4. Personal and Professional Development	<p>S21. work within the scope of practice for podiatrists, including being professionally accountable and adhering to clinical governance</p> <p>S22. work as part of a multi-professional team, demonstrating leadership and management skills</p> <p>S23. evaluate and measure your own practice and performance and that of those you work with, using clinical governance processes to improve podiatry practice and overall standards in healthcare</p> <p>S24. demonstrate evidence-based practice</p>	<p>K28. the limits of your scope of practice as a podiatrist including the legislation, standards and codes of conduct that apply</p> <p>K29. what is meant by clinical governance and accountability in relation to your role</p> <p>K30. the importance of participating in appraisal, training and development</p> <p>K31. a range of research methods used in podiatry including the principles and applications of scientific enquiry to podiatry and lower limb function</p> <p>K32. how health and care services are structured and function including ways to work across boundaries</p> <p>K33. a range of leadership and management techniques including ways to supervise and mentor others</p> <p>K34. ways to evaluate your own performance and that of others, including giving and receiving feedback</p> <p>K35. the role of outcome measures in evaluating the efficacy of treatments and interventions including ways of improving podiatry practice</p> <p>K36. critical reflection and its academic basis including models of critical reflection and how to apply it to patient care</p>