

EMPLOYERS' GUIDE TO PODIATRY

Exploring career
pathways in the NHS



Navigation

This is an interactive toolkit, use the colour coded bars and sub headings at the top of each page to navigate your way around.

The arrows at the bottom of each page will take you to the next or previous page and the home icon in the centre will bring you back to this contents page.

Click on the [underlined](#) text to access useful resources and videos.



Introduction

With an ageing UK population who have increasingly complex medical and social care needs, ensuring the effective treatment of mobility-related healthcare issues to maintain health and independence is of particular importance.

By 2025 it is estimated that over five million people in the UK will have [been diagnosed with diabetes](#), 24 per cent of which (1.2 million) will require regular podiatry appointments to ensure they remain ulcer and amputation free.

Approximately 6,000 people with diabetes have a leg, foot, or toe amputation each year. With the correct and timely care, 80 per cent of these amputations could be prevented. In addition, podiatrists are an essential first port of call for patients with rheumatology, musculoskeletal conditions, vascular disease, kidney disease and immune-compromised conditions.

The [NHS Long Term Plan](#) highlights the need for expanded community multidisciplinary teams, including podiatrists and other allied health professions (AHPs). 5,000 additional undergraduate places have been allocated into AHP, nursing and midwifery courses, and £15 million has been invested in [increasing placement capacity](#).

Currently, only one in six hospitals in England have established multidisciplinary foot care teams. This increased investment in foot care, will ensure all hospitals in England provide patients with rapid access to a team of foot care specialists, including podiatrists, which is essential to the early diagnosis and treatment of foot ulcers.

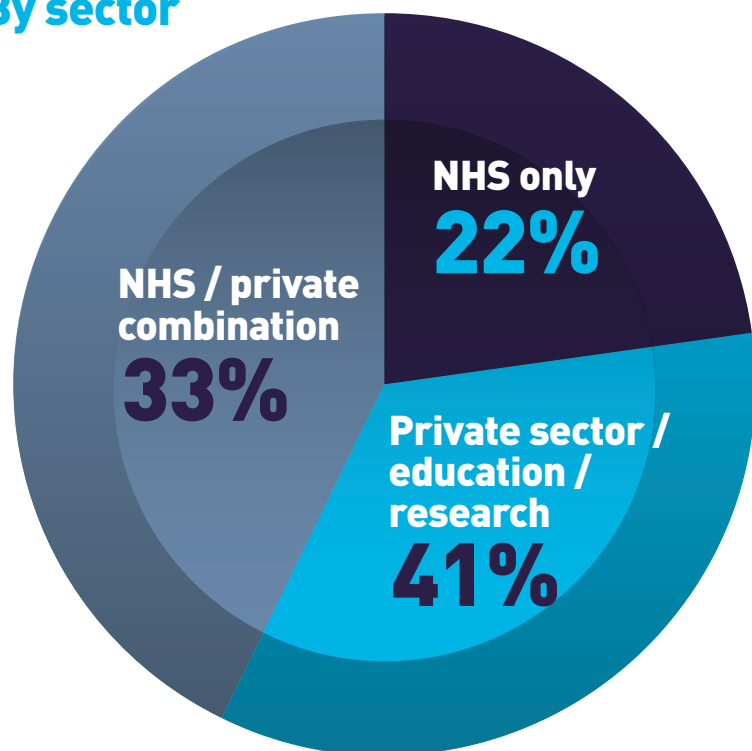
In this guide we provide an overview of the role of a podiatrist, the different education and training routes into the profession, and guidance on how to attract people into podiatry, employment opportunities, and retaining staff in this much-needed profession.

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2019 podiatry workforce statistics

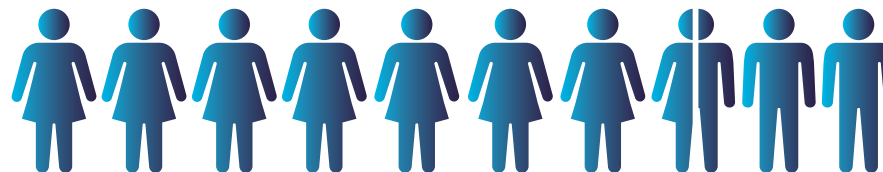
As of April 2019, there are 12,833 chiropodists/podiatrists registered with the [Health Care Professions Council \(HCPC\)](#), of which 3,000 work exclusively within the NHS.

By sector



Demographics

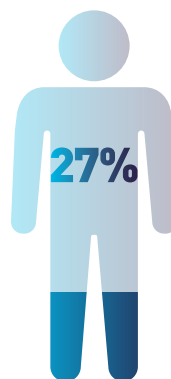
- **Age:** a third of the podiatry workforce is over 50. Only 9 per cent of the workforce falls in the 20-29 age bracket
- **Gender:** predominantly female, at 75.5 per cent of the workforce



- **Non-UK staff:** very low, at just 5 per cent

Compared to other allied health professions (AHPs), podiatry:

- **has a much older age profile:** Only 21 per cent of AHPs are over 50
- **has an average number of men in the workforce:** 27% of podiatrists and AHPs are male
- **has far fewer non-UK staff:** 9 per cent of all AHPs have non-UK nationality. It is worth bearing in mind that the scope of practice of podiatry varies slightly and only a small number of countries currently have an equivalent scope of practice to the UK.



About podiatry

Podiatrists are highly trained autonomous practitioners who assess, diagnose, and treat problems affecting the feet and lower limbs. As experts in improving people's mobility, lower limbs and general health, podiatrists are experienced in a range of advanced assessment and management techniques.

They typically work across the healthcare system with roles in primary, secondary, and community care, in a range of services and multidisciplinary teams. Employers who specialise in the following clinical areas should consider having staff who are qualified podiatrists:

- diabetes
- dermatology
- wound care
- paediatric services
- sports injuries
- gait and pressure analysis
- falls prevention
- rheumatology
- orthotic manufacture, fitting and evaluation
- minor skin and nail surgery
- foot and ankle surgery
- musculoskeletal (MSK) and neuromuscular rehabilitation
- biomechanical conditions of children and adults
- vascular services.



Podiatrists add value and improve outcomes in a number of key areas within medical, surgical and rehabilitation specialisms. Increasingly, these have a community focus in order to prevent hospital admissions, enable early discharge and maintain individuals' foot and lower limb health and mobility within primary care, even when presenting with complex multiple co-morbidities.

They have an essential role to play in the management of a range of systemic conditions that have lower limb manifestations, including arthritis, skin conditions, vascular disease, musculoskeletal problems and diabetes.

Medical	Surgical	MSK and Rehabilitation
<ul style="list-style-type: none"> • Diabetes • Vascular • Dermatology • Rheumatology • Foot ulceration • Pressure damage 	<ul style="list-style-type: none"> • Foot and ankle • Minor skin • Soft tissue • Nail 	<ul style="list-style-type: none"> • Paediatric services • Sports injuries • Gait and pressure analysis • Falls prevention • Musculoskeletal and Neuromuscular Rehabilitation • Biomechanical conditions of children and adults • Orthotic manufacture, fitting and evaluation



Understanding podiatry

For a general overview watch [this short video](#) produced by The College of Podiatry.

Routes into the profession

There are a growing number of routes into the profession and it may be that existing staff at lower grades could be supported into higher-level positions using the recent developments in apprenticeship pathways. A number of apprenticeship pathways are available, including degree level and pre-registration master's routes. Visit the [Education and training routes into podiatry](#) section for more information.

Qualifications

Qualified podiatrists will have completed a three or four-year BSc (Hons) degree or a two-year MSc degree in podiatry at a higher education institution approved by the Health and Care Professions Council (HCPC) and the College of Podiatry, after which they will register with the [HCPC](#). Visit the [Education and training routes into podiatry](#) section for more information.

Registration

In order to retain their podiatry title and remain on the [HCPC](#) register, podiatrists will be required to keep their knowledge up to date.

Administering medicine

All podiatrists have access to sell, supply and administer a limited number of medicines as part of their pre-registration training. Those that have this access will be annotated on the HCPC register as prescription only medicines – administration (POM-A) or prescription only medicines – sale and supply (POM-S).

Many also go on to undertake non-medical, independent prescriber training, allowing them to access a full formulary of medicines to treat patients with lower limb problems and to receive a further annotation on the HCPC register as an independent prescriber (IP).

Professional bodies

The [College of Podiatry](#) is the leading professional body for podiatrists in the UK. It is the largest organisation in the sector, with its own union and strong links to independent and NHS practice and all levels of education and training for the profession. The College is responsible for the quality assurance of pre-registration educational programmes in podiatry alongside the HCPC and is invited to represent the profession in government and workplace consultations. It is the only professional body that supports the training of podiatrists practising podiatric surgery in partnership with university providers.

The [Institute of Chiropodists and Podiatrists](#) (IOCP) is a membership organisation providing practical support, postgraduate CPD and a wide range of benefits and services through their insurance and trade union partners to HCPC podiatrists at all levels – from new graduate through to NHS consultant.

They liaise as a stakeholder with regulators, legislators and co-workers in projects affecting the profession. Their sister organisation the College of Foot Health, owned and operated by the IOCP, offers flexible initial and further development training courses and ongoing support for foot health practitioners.



Building the business case

Building a strong business case for podiatry will help to ensure your organisation has board-level commitment from the outset.

- Use the data your organisation holds around attracting and recruiting podiatrists to demonstrate vacancies in the workforce, gaps and turnover. Sources of data include the electronic staff record (ESR), the NHS Staff Survey, and locally designed surveys.
- Showcase examples from your organisation that demonstrate how podiatrists can be of benefit to both the organisation and patients, improving services and patient care. A cost-benefit analysis is recommended.
- Highlight the fact that Health Education England (HEE) expects demand for podiatrists to increase by 9 per cent between now and 2025 to meet core service and provider demands, and by 19 per cent when other services are factored in. Outline the consequences to patient care if this demand is not met, with reference to the [NHS Long Term Plan](#).
- Aim to target a diverse cohort via apprenticeships and degree courses in order to meet increased demand. There has been a 40 per cent drop in undergraduate places between 2016 and 2019 affecting supply, 30 per cent of podiatry professionals are over the age of 50.

- Liaise with the [College of Podiatry](#) for the latest workforce statistics, useful resources and information on the benefits of employing podiatrists in your trust or service.
- Develop a strong partnership with education providers and regional HEE teams.



Attracting people into the profession

The significant current and projected workforce shortages in podiatry mean that in order to meet patient needs and provide excellent care, employers need to be thinking about how to attract more podiatrists into the profession. There are a number of ways you can do this, and employers are encouraged to liaise with the [College of Podiatry](#) and HEE to take advantage of its wide range of resources.

This section will guide you through the different ways to attract new people into podiatry and careers within the NHS through:

- engagement with schools
- working across systems
- using existing campaigns
- widening participation methods
- further resources.

Engagement with schools

Partnerships with local schools and communities can support you to strengthen your workforce supply and attract new people into careers in the NHS, inspiring them to become podiatrists.

Engaging with your local schools can help young people understand from an early age about the variety of roles available in the NHS and the different career pathways they can take. Highlighting podiatry at this stage could be really valuable in attracting new talent to the profession and into the NHS, helping to tackle the workforce shortages. It is important to include this as part of your workforce planning, as it helps you to develop a pipeline of new people.

Tips



- ✓ Offer work experience placements.
- ✓ Highlight the new T Levels as an option and entry route into a career in the NHS.
- ✓ Showcase the new podiatry apprenticeship as a different route in, alongside the traditional university degree.



Working across systems

It may be that in your organisation you do not have enough of a need to train and employ a large cohort of podiatrists. However, it is worth thinking about how you can collaborate with other organisations in your area, or across your sustainability and transformation partnership (STP) or integrated care system (ICS), so that you can train enough podiatrists in your locality to meet patient needs. [The College of Podiatry](#) and HEE are also willing to work in partnership with trusts to identify their podiatry needs and undertake a service evaluation.

By collaborating with others, you can offer apprenticeships and training opportunities with a variety of placements and help meet the workforce supply challenges of your region. NHS Employers' briefing offers more information about [collaborating regionally on apprenticeships](#).

Using existing campaigns

The [We are the NHS recruitment campaign](#) has raised awareness with the public of the breadth of roles that are available in the NHS. In early 2020, a new [We are the NHS video was launched](#), which highlights the role of the podiatrist.

The College of Podiatry created an extensive suite of resources to help attract more people into the profession. The campaign emphasises the different routes into podiatry as well as the variety of roles and careers podiatrists can have.

The College has also used staff stories to highlight the variety of careers available and inspire more people to train to become podiatrists. Employers can use these resources to help advertise podiatry as a profession and attract more people to start training, joining apprenticeship schemes or local university courses, providing a pipeline of people to join the NHS. You can find the campaign and resources on the [campaign website](#).

Other campaigns with relevant information include [I see the difference](#) which has [dedicated pages](#) to podiatry, and [The WOW Show](#) which focuses on AHP career options for teenagers.





Widening participation methods

Recruiting from your local community and widening participation can be hugely beneficial in helping you tackle your workforce supply challenges. By making sure your recruitment is as open and accessible as possible, you can recruit a diverse, innovative and creative workforce and help tackle a broad range of workforce supply issues, including attracting more people from diverse backgrounds into podiatry.

Data produced by the HCPC indicates that podiatry is not as diverse as other professions, whereas patient groups are increasingly so. It is therefore particularly important to promote podiatry to as broad a range of people as possible.

The benefits of establishing and maintaining a diverse workforce are well understood. Teams are more innovative and creative and specifically important to the NHS, it is found that patients have better experiences of care when the workforce mirrors the patient population.

It is now widely understood that within healthcare, a diverse workforce can ensure a better understanding of patients' needs, which is crucial for the delivery of joined up, personalised care and patient outcomes.

Tip

- ✓ Use widening participation methods, such as targeting specific local groups, and analyse your demographic data to help you attract a wide range of people into podiatry and allow you to tap into previously unreachable talent pools.



Further information and resources



The charity Education and Employers' [Inspiring the Future campaign](#) shares career-focused initiatives in schools and colleges.

Access information about the [strategic interventions in health education disciplines \(SIHED\) programme](#) by the Office for Students.

e-Learning for Healthcare has developed two interactive resources for [allied health professionals' careers](#).

The College of Podiatry has a [careers in podiatry](#) website containing a wealth of information and resources.

Podiatrists are included in the [We are the NHS campaign](#), and resources are available on the [Public Health England](#) web site.

Education and training routes

Podiatry provides an exciting and varied career for those interested in science, biology, chemistry or medicine. Anyone wishing to practise as a podiatrist must be registered with the Health and Care Professions Council (HCPC). To be eligible to apply for registration they must successfully complete a programme of training approved by the HCPC and the College of Podiatry.

To train to become a podiatrist all individuals will need basic entry requirements including GCSEs or equivalent in English, maths and science. They will also need three A levels or equivalent including a biological science. We have featured T Levels in this guide as these are a new A level equivalent pathway.

HNCs, HNDs and previous degrees can also be taken into consideration as recognition of prior learning.

This section provides an overview of the main training routes currently available for those wishing to explore a career in podiatry and includes:

- university degree courses
- degree apprenticeships
- T Levels
- pathways for podiatric surgeons.

Funding

All podiatry students will receive a £6,000 a year grant to help with living costs, as part of new plans set out by the government in January 2020, which will not have to be paid back.

Find out more on the [Department for Health and Social Care website](#).



	University degree					

University degree

The primary route for people wanting to pursue a career in podiatry is through an approved degree (BSc) or pre-registration master's programme (MSc) in podiatry or podiatric medicine. Entry requirements for the courses may vary depending on the university but often include:

- three A levels, including a biological science
- five GCSEs (grades 4 to 9/C to A*), including English language, maths and science.

Alternative qualifications are sometimes accepted so it is worth checking with each institution.

The BSc (Hons) podiatry degree courses typically take three years to complete on a full-time basis or four and a half years part time. The pre-registration MSc route takes two to three years to complete. Courses differ, but all involve a lot of practical work with patients and usually include the following areas of study:

- Whole body anatomy and physiology
- Detailed lower limb anatomy and physiology
- Pathology
- Biomechanics
- Pharmacology
- Diagnostic and assessment skills
- Medical management of the lower limb
- Podiatric practice for children through to older people
- Patient-focused clinical practice
- Health promotion and public health
- Business and leadership
- Health psychology

On successful completion of the degree course, graduates can apply to join the [HCPC register](#) as a registered podiatrist.





Degree apprenticeship

The podiatrist degree-level apprenticeship is available as a BSc (Hons) or a pre-registration MSc. Apprenticeships can appeal to those who would prefer to earn while they learn, and can attract talented candidates into professional roles that they might not have otherwise considered. This route can be used to help retain and develop talent within an organisation and achieve goals around diversity, social mobility and widening participation.

Degrees earned via the apprenticeship route are awarded by universities and are an equivalent standard to those gained using the full-time academic route and allow graduates to register with the HCPC as a registered podiatrist.

A podiatrist degree programme delivered through an apprenticeship typically takes 48 months to deliver and includes an end-point assessment. The end-point assessment provides a valid, reliable and independent judgement that the apprentice has achieved the required standard to gain the integrated degree apprenticeship for podiatry.

Tip

- ✓ Employers can use the apprenticeship levy to fund the cost of the apprenticeship training and end-point assessment up to the maximum of the assigned funding band, which is currently set at £24,000.



How do employers pick and procure a podiatry apprenticeship training provider?

Apprenticeships can only be delivered by a training provider listed on the [Register of Apprenticeship Training Providers](#) (RoATP) and the end-point assessment by an organisation on the [Register of End-Point Assessment Organisations](#) (RoEPAO).

As an integrated degree apprenticeship, the end-point assessment organisation can also be the training provider who delivers the podiatry apprenticeship programme, but they must be registered on both registers.

Further information



Information on how to find an approved apprenticeship training provider is available on [Gov.uk](#).

The Education and Skills Funding Agency (ESFA) manages the register of apprenticeship training providers. Information on how to find a training provider is available on the [ESFA website](#).

HEE has produced an [apprenticeship procurement toolkit](#) for employers, which offers support with navigating the procurement process and provides an overview of the various options for support available nationally, as well as a series of case studies.



Using apprenticeships to provide a career pathway

With the number and [range of apprenticeships now available](#), many employers are using them to support staff development and provide career pathways across the organisation and at all levels, for example from new recruits to advanced practitioners.

Each apprenticeship could be an end in itself to help build the podiatry support workforce, or it can be a step into training as a qualified podiatrist, as many courses will allow students or apprentices to accredit prior learning, which shortens their course. This might help attract more people from a variety of backgrounds into the profession of podiatry, as they do not need to follow the traditional training route.

An example career pathway for podiatry:

Level 2 – Healthcare support worker (HCSW) Typical length: 12-18 months. Levy funding available = £3,000

Healthcare support workers (HCSWs) work as part of a team and may carry out clinical and non-clinical duties depending on where they work. HCSWs work in a range of healthcare settings and with colleagues from both health and social care, they are supervised by a registered healthcare practitioner. This apprenticeship might enable apprentices to see the benefits of working in the NHS and become more interested in pursuing a career in healthcare.

Level 3 – Senior healthcare support worker (SHSW) Typical length: 18-24 months. Levy funding available = £5,000

Senior healthcare support workers help registered practitioners deliver healthcare services and often carry out a range of clinical and non-clinical healthcare or therapeutic tasks within the limits of their competence. They work under the direct or indirect supervision of the registered healthcare practitioner and can be based in a range of services such as hospital, community, GP surgeries, or in partnership with individuals, families and other service providers.

Level 5 – Assistant practitioner Typical length: 18-24 months. Levy funding available = £12,000

An assistant practitioner is a non-occupational specific role with profession specific clinical competencies that has been developed to assist organisations to deliver high-quality, patient-centred care with patients, service users or clients in a variety of settings. Although they are not registered practitioners, they have a high level of skill and an in-depth understanding of the factors that influence health and ill-health through their experience and training, and work under the direction of registered healthcare professionals including registered podiatrists. Some level 5 assistant practitioner programmes allow for accreditation of prior learning (APEL) onto podiatry BSc programmes.

Level 6 – Podiatrist degree

Typical length: 36-48 months. Levy funding available = £24,000

The degree leads to an individual becoming a registered podiatrist who specialises in the lower limb, for example, feet, ankles, or legs. Podiatrists provide preventative advice, care, assessment, diagnosis, and treatment. They also aim to reduce the impact of disability and dysfunction and have a role in rehabilitation. In addition, they play a pivotal part in reducing the risk of amputation, infection, pain, deformity, and hospital admissions.

Level 7 – Advanced clinical practitioner

Typical length: 36 months. Levy funding available = £12,000

Advanced clinical practitioners (ACPs) are experienced clinicians who demonstrate expertise in their scope of practice. ACPs manage defined episodes of clinical care independently, from beginning to end, including admission, referral or discharge, and carry out their full range of duties in relation to individuals' physical and mental healthcare in acute, primary, urgent and emergency settings.

Apprentices complete a master's degree in advanced clinical practice and combine expert clinical skills with research, education and clinical leadership within their scope of practice.

Further information



Visit NHS Employers' [apprenticeships web pages](#) to access more information and to find out how your organisation may benefit.

As an integrated degree apprenticeship, the end-point assessment organisation can also be the training provider who delivers the podiatry apprenticeship programme, but they must be registered on both registers.

More detailed information on apprenticeship standards can be accessed by visiting [Healthcare Apprenticeships Online](#).



				T Levels	Pathways into podiatric surgery	Training routes into podiatric surgery

T Levels

T Levels are two-year technical courses available from September 2020 for young people aged 16 to 19. They are new and are one of the main options for students after studying GCSEs, alongside apprenticeships and A levels. Each T Level is equivalent to three A levels and provides an alternative route into health and care.

T Levels are designed with employers and delivered by further education providers such as schools and colleges, with 80 per cent of the students' time based in the classroom. The other 20 per cent of the programme is spent in an industry placement with an employer which last a minimum of 315 hours (approximately 45 days). While completing the industry placement the students are not employed and therefore are not required to be paid.

T Level programmes give students a real understanding of what it is like to work in the sector and enables them to gain knowledge, skills, and behaviours necessary for employment in their field of study before they go on to train for a specific role through one of the degree options outlined above.

The T Levels for health and healthcare science are now available. They deliver the essential knowledge and skills to work in health or healthcare science and can provide a pathway for those interested in pursuing a career in podiatry.

Further information

Visit the [T Levels website](#) and the [Institute for Apprenticeships & Technical Education](#) to learn more.



Pathways into podiatric surgery

Podiatric surgery is a specialist field of practice within the podiatry profession. Podiatric surgeons are podiatrists who have had extensive postgraduate training in the surgical management of foot and ankle problems. They are independent clinicians in the field of foot surgery and are not medical doctors.

Podiatric surgeons are valued members of the healthcare team and receive referrals from a range of health professionals seeking their expert opinion. For example, GPs, other consultants, podiatrists, practice nurses and physiotherapists.

Podiatric surgery is only offered in sites that meet Care Quality Commission standards. This may be in an acute or community NHS trust or within a private hospital setting.

Training routes into podiatric surgery

A podiatric surgeon initially undertakes a three to four-year honours degree in podiatric medicine, followed by a two to three-year masters in the theory of podiatric surgery. As a podiatric surgical trainee, they will undergo a minimum three-year consultant-supervised training, followed by a final surgical examination.

On qualification as a specialist registrar in podiatric surgery, they will have to commence three years of specialist training to consolidate their surgical skills. Once they have achieved competency in all aspects of podiatric surgery, developed an extensive surgical portfolio and attained a certificate of completion of podiatric surgery training, they will be eligible to apply to be an NHS consultant podiatric surgeon. This training takes a minimum of 11 years.

Employment

In this section you will find information on where you can employ podiatrists once they have completed their training and become qualified professionals.

Local decisions about the deployment of registered professionals are informed by the range of experience and capabilities of those staff, and the same principle should also apply to this role.

Deployment

Most podiatrists begin their professional life working in general clinics and offer a broad range of services as part of their role, from sport injuries to treatment associated with long-term conditions. The clinics may be attached to a hospital, health centre or GP surgery or require treating patients in their own homes or in residential and nursing homes.

To work in the profession, podiatrists must be registered with the [Health and Care Professions Council \(HCPC\)](#) and must continue to meet the [the standards of proficiency](#) that are relevant to their scope of practice. Registration is renewed every two years at a dedicated time set in the year for each profession.

It's also worth checking whether they're a member of one of the following organisations:

- [The College of Podiatry](#)
- [The Institute of Chiropodists and Podiatrists](#)



Tips



- ✓ If you are looking to employ a qualified podiatrist and are thinking about how you may use them in your service, it is also worth noting that they can supervise podiatry assistants and can work independently or as part of a multidisciplinary team with other health professionals, such as nurses, pharmacists, other AHPs, orthopaedic specialists, doctors and health visitors.
- ✓ If you don't already use a team-based approach to meet your patients' needs, this may be something you wish to consider. Identifying who you might want in your team should start by looking at the skills you need to deliver the various aspects of care, and then identifying which roles have those skills.



Deployment

As their clinical skills develop, podiatrists may choose to specialise in a particular area of practice as they explore their career opportunities. Podiatrists can be found working in the following areas:

- Clinician or manager in an NHS hospital or community setting.
- NHS consultant podiatrist.
- Specialist practitioner working in a range of specialist fields including:
 - podiatric surgery
 - dermatology
 - high-risk lower limb care
 - vascular disease
 - musculoskeletal care
 - sports medicine
 - falls prevention
 - children's care
 - forensics
 - private practice or as a self-employed locum.
- ACP in a related field such as general practice, accident and emergency or acute services.
- Educator, researcher or as a clinical academic.

Some practitioners may work in a combination of these different areas to give them greater job satisfaction and more flexible working.

What a podiatrist can bring to your team or service

More than ever, employers are looking to develop a flexible workforce to keep pace with developments in treatments and interventions, and the podiatrist role can add to the skill mix of a multidisciplinary team.

A registrant's scope of practice will change over time and experienced practitioners may become more focused or specialised in a certain area, or with a particular client group. They may also move into a role in management, education or research. Some podiatrists will undertake further training to become podiatric surgeons.

To help retain those podiatrists wishing to progress within their careers and reap the benefits for your service, you may want to consider how you can provide opportunities to support their development. For example, the following demonstrate a potential career path that can be offered within an NHS setting or other clinical working environments:

- Entry-level podiatrist
- Specialist podiatrist
- Team leader, advanced podiatrist
- Surgical trainee
- Specialist registrar in podiatric surgery
- Consultant podiatrist/podiatric surgeon

Things to consider

- How are the health and care services structured in your area - is there scope to include ways to work across teams or settings?
- Do you provide leadership and management opportunities, including ways to supervise and mentor others?



					Retention	
Supporting new staff	Preceptorships					

Retention

There are some general principles that employers can follow to improve the retention of podiatry staff, these include:

- supporting new staff
- flexible working
- career development
- health and wellbeing.

Supporting new staff

New starters and newly qualified staff require dedicated support if they are to progress within and beyond their first year of employment. Employers can maximise their retention levels by considering the following areas of good practice.

Preceptorships

A preceptorship is a period of structured transition for the newly registered practitioner. During this time, staff will be supported by a preceptor to develop their confidence as an autonomous professional, refine skills, values and behaviours and to continue on their journey of lifelong learning.

The potential benefits of preceptorship for new registrants include developing confidence; positive socialisation into the working environment; increased job satisfaction; feeling valued, respected and invested in by their employer; increased commitment to the employer and profession. All of these are linked to patient satisfaction, quality of care, retention, and enhanced recruitment.

The length of preceptorship may be flexible for some in terms of individual needs or organisational requirements, but the recommended length of a preceptorship programme is 12 months from the date of joining the organisation. Some organisations may choose to include preceptorship as part of a postgraduate training programme, which offers structured development for up to two years, post-registration.

Tips

- ✓ The organisation should have an appointed preceptorship lead who is responsible for overseeing the preceptorship programme.
- ✓ Protected time should be allocated for both the preceptor and the preceptee, which should be supported by the organisation.



Typical areas of learning during a preceptorship are:

- clinical practice
- communication
- teamwork
- leadership
- professionalism and integrity
- research and evidence
- safety and quality
- facilitated learning
- development of self and others.

For guidance on good preceptorship practice, [HEE](#) has developed a range of resources.

		RePAIR	Flexible working			

RePAIR

The Reducing Pre-registration Attrition and Improving Retention (RePAIR) project has examined the factors impacting healthcare student attrition and the retention of the newly qualified workforce in the early stages of their careers. A copy of the report and other relevant resources are available through [HEE](#).

HEE's latest RePAIR Implementation programme has a focus on podiatry and the regionally based RePAIR Fellows work closely with NHS providers. If you wish to contact your local RePAIR fellow please get in touch with your local HEE office.

Flexible working

Recent data studies have shown that 33 per cent of HPCP-registered podiatrists are working for a combination of NHS and private employers, which also indicates a need for a flexible approach to working arrangements.

The NHS Employers guide to [embedding flexible working for nurses](#) shares further insights on how to support flexible working in practice. Additional support has also been published by [NHS England and NHS Improvement](#).



				Career development	Health and wellbeing	

Career development

Ensuring that staff feel like they have a future with your organisation is key to retaining them. Initiatives relating to career progression appeared in **83.5 per cent** of direct support programme trust retention plans.

It is important to consider staff development needs at all career levels, from new starters during their preceptorship to well-established staff who have ambitions beyond their current role.

Providing career pathway information that is specific to different podiatry roles will enable staff to engage with learning and training opportunities.

Health and wellbeing

Without staff who are well and at work, the NHS could not deliver quality and effective care to patients. We need to ensure that staff are provided with an environment and opportunities that encourage and enable them to lead healthy lives and make choices that support their wellbeing.

NHS Employers’ **health and wellbeing network** provides an opportunity for health and wellbeing leads to connect with one another. In addition, a suite of guidance, toolkits and resources can be found on NHS Employers’ **health and wellbeing web pages**.

Further information

- Visit the **15 Seconds 30 Minutes website** for information, resources and videos on wellbeing and efficiency at work.
- You can access a range of policy and guidance to support you and your organisation with diversity and inclusion issues on our **web pages**.



Podiatry in practice - case studies

Adding value to user experience

David Wylie, Head of Podiatry, NHS Greater Glasgow and Clyde (NHSGGC)

Alongside colleagues from a range of medical and surgical services, David works with patients of all ages and with a wide range of conditions. David's team are continually looking at ways to add unique value to the services they offer and to improve all aspects of the service user experience.

Podiatry in NHSGGC takes responsibility for all foot and ankle referrals, seeing patients within four weeks. David's team has integrated the vascular and diabetes podiatry offering a single foot protection service, managing all foot ulcers and critical limb ischaemia.

They also support pressure reduction on wards and in care homes.



“We have been very fortunate to have benefited from excellent leadership across our team.

Leadership is key to service development. Also important is the basic desire to be constantly curious about what is possible to improve, embrace change and progress.

Using data to demonstrate health, economic and cost benefits also helps to demonstrate the unique selling points and added value of podiatric interventions.”

Skill mix within the team

Skill mix within the team

Angie Abbott, Head of Podiatry and Orthotics Services
(acute and community), South Devon NHS Foundation Trust

Angie and her team delivers cradle to grave services from nail surgery, high risk foot protection, wound care and musculoskeletal foot and ankle service as part of an orthopaedic foot and ankle pathway.

There is a broad skill mix of staff which has enabled Angie to maximise the use of their podiatrist, which in turn makes for an effective and efficient service. Support workers assist in nail surgery, wound and assessment clinics.

Level 5 foundation degree trained assistant practitioners provide home visiting service to redress foot wounds, doppler and vascular testing and scalpel debridement of corns and calluses on high risk feet.

Skill-mixing within the team has cleared their waiting list; enabled delivery of a NICE-compliant diabetic foot service; enhanced podiatry roles enabling non-medical prescribing, research, ultrasound imaging, injection therapy, shockwave and other innovative practice; plus an income-generating private patient scheme.

Recruitment challenges and increase in demand and complexity led Angie to review the tasks that podiatrists undertook.



“We worked in partnership with our local college and university to develop a course that trained staff to Level 5 foundation degree with APEL opportunity onto podiatry degree programme. This course is available nationally via distance learning or an apprenticeship route.”

		How assistant practitioners support foot health			

How assistant practitioners support foot health

Ruth Clausen, Assistant Practitioner in Podiatry, Torbay and South Devon NHS Foundation Trust

Having gained level 5 foundation degree training, Ruth works under the direction of the registered podiatrist, this enables the podiatrists to use their skills for more complex activities and decision making.

Ruth works with service users whose feet are at risk. Her activities include routine standard care using scalpels; neurovascular and doppler foot checks; and full assessment of the foot; patient education on smoking, weight management and exercise; referral to healthy lifestyles teams or the podiatrist for vascular services; and some extended roles such as casting.

Assistant practitioners are trained in health and social care, using the Skills for Health framework and the first year of the podiatry degree programme. The assistant practitioner role helps to alleviate the pressures of podiatry by taking on certain tasks to ensure the high-risk patients are seen in a timely manner.



“Due to the population expansion in both numbers and complexity of needs, the demand for registered practitioners increases.

Upskilling existing staff can help to offset changes in the workforce such as retirement, fewer school leavers joining the health profession, and increased public demand.”

			Advanced clinical practice in primary care		

Advanced clinical practice in primary care

Helen Beaumont-Waters, Advanced Clinical Practitioner, GP Surgery, Bradford

The practice trained and supported Helen to complete an ACP masters. Her role involves working independently to assess, diagnose and treat patients with undifferentiated and undiagnosed conditions, requesting appropriate investigations when necessary. Home visits, pathology interpretation and contributing to the quality improvement activities of the practice are also part of her role.

The practice is situated in a low socio-economic area with a high degree of poverty, which has an additional impact on many of their service users who often have co-morbidities with complex needs.

Her team is one of the largest in the area with nine qualified ACPs and four in training. Coming from a diverse background including podiatrists, paramedics and nurses, the team bring a unique skill set to the practice with everyone having speciality training and interests which benefit patient care. The ACP team can see most patients within general practice and have a GP nominated as daily lead to assist with patients who may present with conditions outside of the ACP individual competencies. Having the ACP team enables the GPs to deal with very complex cases and run specialist clinics.



“Having a podiatry background has enabled me to develop my musculoskeletal skill set to include the skeletal system as a whole, rather than being restricted to the lower limb.

My diabetes and wound care competences enable me to advise and support the practice and district nursing teams with more complex cases. I use my transferable podiatry skills to manage these successfully, and I would urge all employers to consider podiatrists to progress into ACP roles.”

				Children and podiatry	

Children and podiatry

Nina Davies, Lead Children's Podiatrist, Leeds Community Trust

Nina helps children and families overcome concerns that affect the lower limb so children can stay active, happy and included. She sees all age groups from babies to teenagers.

Children can present with concerns ranging from pain, skin and nail conditions, infections, musculoskeletal and neuromuscular problems, and challenges with functional skills.

Podiatrists can provide nail surgery, exercise and movement programmes, strapping, and casting or splinting to overcome pain and improve function. They can also provide advice and prescriptions for footwear.



“A large part of the role is prevention: helping to motivate children and families to change health behaviours and to support self-management to maintain good lower limb health.”

					Podiatric surgeon

Podiatric surgeon

Suzanne Taylor, Podiatric Surgeon, Musculoskeletal Services, Sussex NHS Trust

Suzanne's role is to keep people mobile and active and out of hospital, working alongside her other colleagues in physiotherapy and pain management.

One of the reasons Suzanne loves podiatry is that she can see how foot surgery can help people in pain every day. The job is very varied, and every person who comes in has a different complication, she sometimes describes her role as a detective, having to unpick all the clues as to which exact complex structure in the foot or lower leg is causing the pain or the deformity.

Several investigations are in her toolbox as a podiatric surgeon, from using a doppler to assessing whether the patient has adequate circulation for ulcer healing, from MRI scans to investigating a deeper foot or joint problem, such as septic arthritis or Charcot neuroarthropathy. Suzanne prescribes for her patients without needing them to visit their GP.



“Many of my colleagues work in A&E, minor injury units, ulcer clinics, vascular surgery departments and limb salvage services.

Other services thinking of developing a podiatric surgery service could look at some of the innovative ways that podiatric surgeons and podiatrists can contribute to the multi-disciplinary team to improve the foot health and activity of the nation.”

Health Education England exists for one reason only: to support the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place.

The most important resource the NHS has is its people. Without a skilled workforce there is no NHS. There are few careers that are as rewarding as one in the NHS, or that provides the opportunity to work with such a variety of people and make a difference to them.

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