



Proposals to introduce independent prescribing by podiatrists **Response from the Royal College of Surgeons of England**

The Royal College of Surgeons welcomes the opportunity to respond to proposals to introduce independent prescribing by podiatrists.

The College recognises the demands and expectations of patients to access medication at the time of their treatment. However we would urge for caution in areas of podiatry involving invasive surgical procedures. Regarding this latest Department of Health consultation document, we remain concerned that the document still does not present an adequate discussion of the risks to patient safety in more complex areas of podiatry such as foot surgery. We believe that the potential for absence of direct involvement of medical doctors in patient medication may affect patient safety.

We would like to highlight the following key points that we believe should be considered for the current proposals.

1. In order to realise some of the patient benefits outlined in the document whilst ensuring patient safety, we would support independent prescribing under specified conditions from a specified formulary (option 2). We believe that prescribing rights specifically in the areas of anaesthetics, antibiotics and analgesics should not be extended further than current regulations allow. In these areas, input from a doctor is often required to take into account the complete medical history of the patient in order to assess for example the potential for drug interactions with medication prescribed for co-morbidities. (Q1*)
2. The College believes the current supplementary prescribing arrangements that exist for podiatrists to prescribe controlled drugs are fit for purpose and allow patients access to these drugs should they require them. We support the statement in the consultation document that such drugs should only be administered in the appropriate multi-disciplinary environment. We believe that any change to the current arrangements may lead to increased use outside the appropriate setting and team arrangements. (Q2*)
3. We support the mixing of medicines only for which independent prescribing rights are given and where it is considered safe to do so. (Q3*)
4. We support the development of the outline curriculum framework as an essential tool to ensure a high standard of training and patient safety is achieved. It should also be obligatory for individuals with prescribing rights to meet the Health Professions Council requirements on continuing professional development and provide evidence that this has been accomplished. (General Comments*)

Mr John Getty
Vice President
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* Number in bracket relates to the question in the engagement exercise