

**The New Zealand podiatry profession – a workforce in crisis?  
Additional File 1 – Workforce survey questions**

- (a) If you have answered “I am” to c, d or e, please provide the approximate number of weeks practised and the average number of hours per week practised in the last APC year:

**Podiatry:** \_\_\_\_\_ weeks for \_\_\_\_\_ average hours per week

**Podiatric Surgery:** \_\_\_\_\_ weeks for \_\_\_\_\_ average hours per week

**Podiatric Radiographic Imagery:** \_\_\_\_\_ weeks for \_\_\_\_\_ average hours per week

- (b) **Are you currently a**

- Full time employee  
 Part time employee  
 Self- employed  
 Business owner/ director  
 Lecturer  
 Other

- (c) **Main workplace setting**

- Private practice  
 DHB - hospital  
 Private hospital/ rest home  
 University  
 Other

**Second main workplace setting**

- Private practice  
 DHB - hospital  
 Private hospital/ rest home  
 University  
 Other

- (d) **Work type/s in main employment setting & average hours per week for each type**

- General podiatry            hours  
 Diabetes podiatry        hours  
 Sports medicine         hours  
 Surgery                    hours  
 Teaching                  hours  
 Technical representative hours  
 Management             hours  
 Other                        hours

- (e) **Name of main workplace**

- (f) **Closest DHB (geographic area) to main place of employment**

- (g) **In what other countries have you been registered to practice podiatry**

- (h) **Postgraduate qualifications:**

- post grad certificate
- post grad diploma
- doctorate
- currently enrolled in post grad studies
- Masters
- Bachelors Honours
- Nil

(i) **I am a member of Podiatry NZ:** (Yes / No) Please cross one out

(j) **If no for above question, do you currently have professional indemnity insurance?** (Yes / No)

(k) **Are you a member of any other podiatry related professional group?**

- NZ Society for Study of Diabetes (Podiatrists Special Interest Group)
- NZ Wound Care Society
- Australasian Podiatry Council
- The Society of Chiropodists & Podiatrists
- PMPCPD Network
- British Chiropody & Podiatry Assoc
- Nil
- Other:

(l) **Peer support & supervision:** Please indicate in which option/s you are currently participating:

- Formal supervision (clinical/cultural)
- Formal clinical peer reviews
- Podiatry student placements (last 12 months)
- Regular podiatry based meetings (branch/regional/national)
- Nil
- Other:

(m) **Do you intend to continue to practice podiatry in New Zealand for**

- Less than 5 years
- Over 5 years but less than 10 years
- Over 10 years
- Unsure

(n) **Origin / Ethnicity**

Place of origin:

Ethnicity: *Please tick all relevant box/es*

- NZ European
- Māori
- Pasifika\*
- Chinese
- Korean
- Indian
- Other European
- South East Asian
- Other

\* Pasifika - indigenous people of the Pacific Islands