

A multi-disciplinary footcare team

The problem:

This project was driven by a general desire to improve care and services for people with diabetes and to reduce the number of patients developing foot complications that led to amputations. A more structured and systematic approach to foot care was needed.

Aims:

The main aim of the project was to reduce the number of patients who needed an amputation, as well as to prevent foot ulcers and re-ulceration.

What did they do?

This project has been running since 1997, when the team, consisting of a consultant diabetologist, a diabetes nurse specialist and a podiatrist began to audit amputation rates. As well as prospective audits, they also looked retrospectively at rates for 1995 and 1996. The audits have continued annually, other than in 2001 when service cutbacks meant an audit was not possible. However data were collected retrospectively for that year.

The audits identified high amputation rates and poor patient outcomes.

To address these issues, the team began to raise awareness of foot health among staff across all healthcare settings by training community podiatrists, practice and community nurses, and hospital nurses.

The team also radically changed the way foot care services were delivered for people with diabetes. The existing service has been transformed from a once weekly clinic, to a five times a week open access service where, as well as being referred by healthcare professionals, patients can self refer for assessment and treatment. The service also offers specialist sessions, including foot ulcer clinics and specialist shoe fitting services.

Looking forward there is the opportunity to integrate this service with community podiatry.

What changed?

Over the 11 years that the trust has audited amputation rates, and since the new service was set up, amputation rates have fallen by 70%. Additionally, the trust has seen a reduction in lengths of stay and bed days for ulcer management and amputations. Feedback from service users and relatives has been very positive.

Importantly, during 2001, when there was no audit and subsequent feedback to staff, there was a rise in the number of minor amputations.

The cost of running the foot care clinic, including staff costs is £120,000 each year, however it is estimated that about £0.5 million is saved each year as a result of the service.



Key outcomes

- ✓ A 70% reduction in amputation rates over 11 years
- ✓ Reduction in length of stay and bed days
- ✓ Annual costs of £120,000 lead to an estimated annual saving of £0.5 million

Find out more about this case study at www.diabetes.nhs.uk