

# Model of Care for the Diabetic Foot

National Diabetes Programme  
Clinical Strategy and Programmes Directorate  
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# The Epidemic

- 2.5 m people with Diabetes in UK, 12 m in US, 141,000 in Irl. Or 171m worldwide. To double by 2030.
- Foot ulcers occur in up to 25% of people with diabetes. Foot ulcers precede 8 out of 10 Diabetes amputations.
- Every 30 seconds a limb is amputated

# The Model of foot care

## Integrated care

- Main aim is for people to get diabetic foot care based on their level of risk by a skilled HP.
  - Yearly screen to identify risk.
  - Reduction in time for podiatric, medical and surgical intervention
- Incremental increase in patient referrals
- Coordinated plan of care along established evidence based algorithms.
- Formation of aggressive interdisciplinary hospital teams.
- Clinical trials

# Risk Categories

Risk Group	Risk category	Foot Examination Frequency	Examiner
Green	Low Risk	Annual	GP, PHN, PN
Amber	Moderate Risk	Annual and as required	Community Podiatry or GP, PHN, PN
Pink	High Risk	Annual and as required	Community Podiatry or GP, PHN, PN
Red	Active foot disease	weekly	Diabetes hospital Team/ Hospital Podiatrist

# What does the Examiner examine?

## Screening Diabetic foot

- Peripheral neuropathy
- Peripheral arterial disease
- Foot deformity
- Footwear
  
- Identify risk category, refer if required, Education, Low risk leaflets.

# Low Risk

- Screened by GP, PHN, PN annually.
- No current foot complications, No previous amputation, ulceration, no foot deformity.
- Educate/ Low risk Leaflets
- Annual screen.

# Moderate Risk

- Has one of the following
  - Peripheral neuropathy.      PAD
  - Foot deformity
- Refer to Community podiatry.
- Educate/ Moderate risk Leaflets
- Annual screening

# High Risk

- Peripheral neuropathy , PAD, Previous foot ulceration, Previous amputation , Previous charcot athropathy.
- Refer to Community podiatry
- Educate/ High risk leaflet
- Annual screening

# Active Foot Disease

- Active foot ulceration, Infection,
- Active or Suspected charcot arthropathy.
  
- Refer for rapid access to hospital MD foot care team. Refer within 24 hrs/ next working day.

Refer to appropriate Consultant in CUH/ SIVUH.  
Can request transfer of care to a Consultant in CUH if required.

# Training

- Screening tool form and foot ulcer form available for own records and referring to Community and Hospital Podiatry
- The National Diabetes Clinical Programme requests training for the Primary care nurse / GP on screening the Diabetic foot.
- Stand alone module and practical workshop/ self competency assessment/ as part of Diabetes management CPD module ( UCC) or part of Diabetes in primary care module (UCC)