

[O15] A REVIEW OF THE IMPACT OF A NEW FOOTCARE INTERVENTION PROGRAMME CARRIED OUT IN TWO HAEMODIALYSIS UNITS IN NOTTINGHAM, UK

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Aim: Each year a significant number of individuals with diabetes undergoing haemodialysis (HD) suffer foot conditions that result in a hospital admission, or at worst, amputation of a limb. In light of this, a two-part diabetic foot intervention programme was initiated on two HD units based on an acute hospital site in Nottingham, UK. This review aimed to establish whether these interventions had any effect on major and minor amputation rates, bed days/cost for foot related problems, access and frequency of preventative podiatry care and patient satisfaction. The review also aimed to assess the cost of providing the service, as well as monitor the level of referrals from the dialysis units to the local diabetic foot MDT and other specialisms for foot problems.

Method: The first intervention involved training dialysis nurses to carry out 8-weekly foot checks on the HD units. The training also provided referral details for the diabetic foot MDT, and a patient questionnaire aimed at assessing current foot health behaviour. The second intervention involved establishing a regular four-weekly podiatry service on both the HD units. Provided by specialist podiatrists, the service comprised routine podiatry care, footwear advice, self care advice, monitoring of pressure areas and ongoing vascular and neurological assessment. It also allowed for referral where necessary to other services such as vascular surgeons, orthotists, district nurses for pressure relief and the diabetic foot MDT. To measure feedback, a questionnaire was completed by the patient before and after the provision of the programme to assess whether access to podiatry and frequency of treatment had altered.

Results/Discussion: The amount of bed days and major and minor amputations for patients attending these haemodialysis units over four years is shown below:

Year	Stage of programme	No. patients admitted for foot disease	No. of bed days	Cost of bed days	Amputations during admissions
01/04/2012 – 31/03/2013	Prior to any intervention	7	152	£60,800	2 minor (forefoot)
01/04/2013- 31/03/2014	Nurse led foot checks 08/2013 - 02/2014	6	86	£34,400	1 minor (toe)
01/04/2014 – 31/03/2015	Podiatry begins 11/2014	7	377	£150,800	2 major (AKA) 3 minor (1 forefoot, 2 toe)
01/04/2015 – 31/03/2015	Ongoing Podiatry	1	8	£3,200	0

Patients reported satisfaction with the service. Referrals from the HD units to the diabetic foot MDT and other specialisms went from 0 prior to the intervention, to 35 referrals from dialysis nurses and 28 from podiatrists in the following 24 months. The staff cost of providing the service on the dialysis units per year was found to be 25% less than providing the service in the community (£2,667 compared to £3,523).

Conclusion: The foot care intervention programme appears to have resulted in a drop in amputations and bed days amongst HD patients, as well as resulting in frequent referrals to the diabetic foot MDT and other specialisms. It has been more cost effective to provide the podiatry service on the HD units than clinics and patient's homes.