

Using NICE guidance to transform access to podiatry services in Birmingham

Faced with growing numbers of people with type 2 diabetes, long waiting times for clinical assessment and lacking an agreed referral process for diabetic foot problems, Birmingham's podiatry team used NICE guidance to turn a failing service around and significantly improve the quality of care for their patients.

"Putting the NICE recommendations at the heart of a new pathway for podiatry services enabled us to bring our waiting times down, manage referrals more effectively and provide better quality care for our patients."

Amanda Cadge, Podiatry Clinical and Professional Lead, Birmingham Community Healthcare.



The pressure on podiatry services and the need for service change

In Birmingham, the prevalence of type 2 diabetes is approximately 75,000 per one million of population. With around 120 new appointments to podiatry clinics every week and 18 month waiting times for new assessments, at any one time the podiatry service could have up to 6,000 people on its waiting list.

Analysing referrals, the podiatry team found that GP practices in the area were referring almost every patient with diabetes to the service. With increasing numbers of patients, the pressure on the service was unsustainable and there needed to be a radical rethink about how the caseload was managed and how patients were referred. The team decided the NICE guideline on managing and preventing foot problems for type 2 diabetes (CG10) could be used to develop a new pathway for the service, which would:

- improve the overall quality of care for patients
- reduce waiting times
- manage waiting lists and referrals more effectively
- save costs for podiatry care and across the wider system

Designing the new referral pathway

Senior staff in the podiatry service and clinicians from neighbouring trusts worked together to develop a new referral pathway. Using the NICE guideline, the multidisciplinary team devised a new pathway for patients which included:

- risk assessment for diabetes patients
- new referral criteria for all patients with foot problems
- a guide to podiatry referrals for all healthcare practitioners
- a podiatry score card to identify if patients were high or low risk

The risk assessment enabled a review of patients on the waiting list to manage them more effectively. The referral criteria and the scorecard helped them identify low risk patients for safe discharge back to primary care. This reduced overall waiting times and ensured patients with acute or high risk problems could be seen more quickly for specialist care.

The new pathway was communicated among GPs and community nursing teams. Training was offered to show how to use the new resources for risk assessment and referrals. Podiatrists were also trained to manage patients' expectations to help them understand why they might not need specialist care. A new non-NHS Nail Care Service was developed for those patients with low levels of need and risk.

Benefits of using NICE guidance innovatively

The service has seen a significant reduction in waiting times. Routine appointments are now seen in 4-6 weeks and urgent referrals for wounds and infections are seen within a week. Estimated cost savings are around £180,000 per year.

Podiatrists in the service feel less pressured and more valued. The improvement in staff morale and quality of patient care is reflected in low levels of sickness and staff turnover and the low number of formal complaints from patients. The non-NHS Nail Care Service has also provided opportunities for independent employment for over 120 carers across the city.

The new pathway enabled the team to use the NICE guidance in a practical way to inform new referral criteria and improve risk assessment of patients. They used the NICE guidance for a particular condition as a tool for a range of professionals to make system-wide improvements. They also found the costing tools, which accompanied the guideline, could be used to show the value of using NICE guidance.

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