

Diabetic Foot Emergency Early Triage.

Project Background:

The growing burden of diabetes and its complications is acknowledged by Welsh Government.

In 2019 it was estimated Wales had nearly 200,000 people diagnosed with diabetes and evidence demonstrates between 2-2.5% of the diabetes population has a diabetic foot ulcer (DFU) at any given time.

The cost of diabetic foot disease in England is almost 1% of the health service budget, which would be comparable in Wales.

Since 2018 Cardiff and Vale (CAV) has offered a 'Walk in clinic' (WIC) for patients with diabetes and a foot emergency. However, audit and feedback from patients and staff has identified that the current set up of WIC is not equitable or sustainable.

Project Aims/Objectives:

Primary aim - To reduce the number of patients waiting longer than 3 days for their first expert assessment.

Secondary aim - To prevent inappropriate A&E attendance and GP contact for diabetic foot emergencies.

Longer term - To offer phone first contact to foot wounds of all aetiologies.

Long term- To spread and scale the tried and tested model across all health boards in Wales.

Project Approach:

DFEET will be carried out by CAV UHB Podiatry staff. All stakeholders in primary care would be notified of the changes to the service delivery. Documents and publications such as posters, email and letters sent to make HCPs and patients aware of the change will be spread across the health service. A months grace given for patients/ HCPs still referring to the old system has been factored in.

Project Outcome:

The adaptation of an existing service into the delivery of a new enhanced product to be implemented in the centre of podiatry excellence in Cardiff Royal Infirmary.

Project Impact:

In total, 320 patients referred into the DFEET service in a 7-month period between July and January, out of the 320 patients, 299 patients were seen within 3 days of referral, this equates to 93.4% of patients all meeting our primary aim of reducing the number of patients waiting longer than 3 days.

The average healing rates of all ulcerations nationally was 26%, since DFEET commenced we are surpassing the national average and now have a **50%** healing rate.

Out of 324 virtual appointments, 103 of these patients were booked outside of emergency wound clinics, this concludes that the **virtual appointments reduced unneeded wound appointments by 31%**.

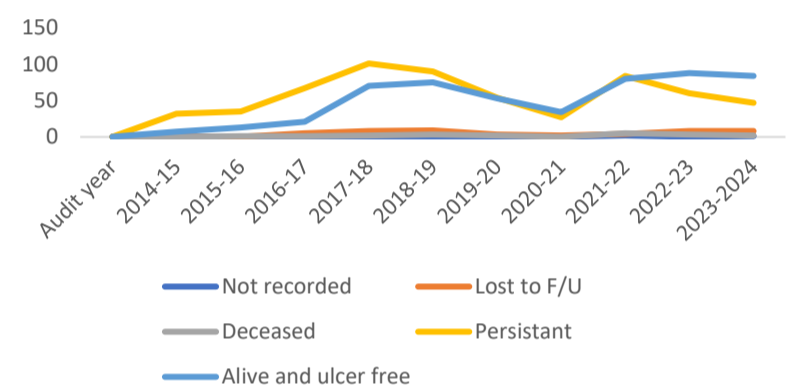
When analysing the data 240 patients said they would've attended a GP appointment if DFEET didn't exist, this corresponds to 59% of our data sample. Additionally, 21 patients admitted they would have attended A and E services, this corresponds to 5% of our data sample.

Key Conclusions:

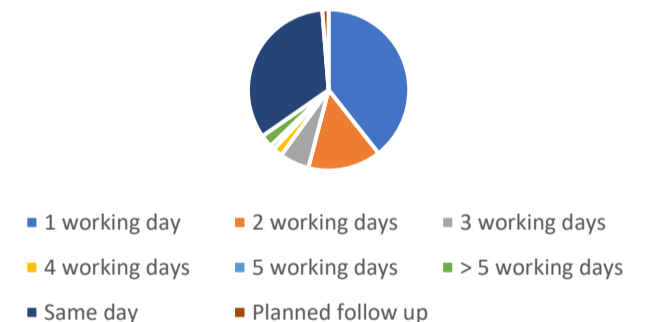
- The data collected demonstrated a positive correlation between prompt access into the service and wound size reduction and ulcer healing.
- The Project signified a desired impact on the utilisation of essential digital healthcare facilities to appropriately manage capacity in high-risk clinics
- Further work is needed to embed the appropriate publication across the primary care sector to ensure that patients who are eligible for the service present to the diabetic foot emergency early triage service at the earliest convenience
- Cost benefit analysis showed DFEET will decrease money spent on diabetic foot ulcers in Primary care.



NDAFA CAV UHB Outcome at 12 Weeks



How long between referral date and virtual call (Working days)?



Next Steps:

- The expansion of the Diabetic foot early emergency triage service to a 5-day working week for all pathologies.
- Further evaluation of patient experience is planned and will continue throughout the year.
- Further healthcare promotion advice to the primary care sector will continue to reduce the duplication of appointments.
- Cardiff and Vale Podiatry have future ambitions to spread and scale the tried and tested DFEET model across all health boards in Wales and possibly link with health boards in England.