



West Coast District Health Board

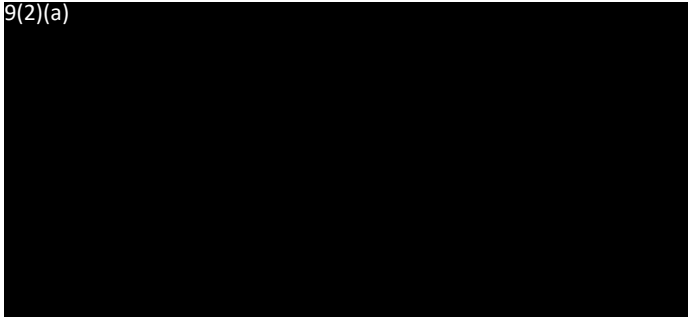
Te Poari Hauora a Rohe o Tai Poutini

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7 October 2021

9(2)(a)



RE Official Information Act request WCDHB 9606

I refer to your email dated 16 September 2021 requesting the following information under the Official Information Act from West Coast DHB for a research project regarding the provision of diabetic foot services. Specifically:

To assist us in ascertaining the distribution of treatment available within each DHB, it would be greatly helpful to us if you would be able to answer the following questions about the treatments for diabetic foot services that are available within your DHB.

- 1. Community podiatry services for diabetic foot**
 - a. Whether this is funded or unfunded**
 - b. If funded the number of sessions that are funded per year and who qualifies**
- 2. High risk foot clinics**
 - a. If available, the number of podiatrists who are available and the FTEs**

West Coast DHB does not provide nor fund general community podiatry. The DHB does fund and provide free diabetic podiatry outpatient service for people with Level 3 and 4 diabetes high risk foot and active foot disease. Our DHB funds an indicative volume of up to 1049 outpatient attendances per annum for patients in these clinical level categories. In 2020/21, there were 971 such attendances (not including patients who did not show for their booked appointments). Please see **Appendix 1** below that outlines the Diabetic Foot Assessment and Risk Stratification criteria for access to this service. This criteria was developed by the New Zealand Society for the Study of Diabetes (NZSSD) and the Podiatrists Specialist Interest Group (PodSIG).

There are no resident podiatrists living on the West Coast. West Coast DHB engages the services of two podiatrists who visit to our district to provide DHB-funded diabetic podiatry outpatient clinics at the main town centres. One podiatrist conducts a one-day clinic 12 times per year to provide services in Hokitika. The other podiatrist provides a series of 5-day clinics 11 times per year to provide services in Greymouth, Westport and Reefton. The DHB-funded podiatry services work with other specialist services (e.g.: Diabetes Nurse Educators, dietitians, orthotics, specialist diabetes and general medicine physicians, vascular and orthopaedic surgeons). The services also have referral links to the infectious diseases unit and hyperbaric medicine unit in Christchurch.

One of the visiting podiatrists operates a private community podiatry service in their own capacity, based out of local general practice. These services are not co-funded by the DHB.

3. *Specialist MDT clinics*

a. *If these do occur, how frequently they occur*

West Coast DHB does not provide specific specialist MDTs in respect of its diabetic foot services.

4. *Charcot foot clinics*

West Coast DHB does not provide specific clinics for Charcot foot disorders. Such cases can be referred to the DHB's diabetes podiatry outpatient clinic services for assessment and treatment.

5. *Surgical care services for diabetic foot*

a. *Following surgical care, where physical rehabilitation occurs*

Depending on the nature of the surgery required, a range of rehabilitation services following diabetic foot surgery may at Te Nikau Grey Hospital in Greymouth. Those cases requiring more intensive and longer-term rehabilitation are primarily provided with the services at Burwood Hospital in Christchurch through the Canterbury DHB.

6. *Hyperbaric oxygen therapy*

West Coast DHB does not provide hyperbaric oxygen therapy locally. Patients requiring these services are referred to tertiary service hospitals; principally in Christchurch for residents of our district.

I trust that this satisfies your interest in this matter.

Please note that this response, or an edited version of this response, may be published on the West Coast DHB website after your receipt of this response.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Tracey Maisey', with a stylized, flowing script.

Tracey Maisey
Executive Director
Planning, Funding & Decision Support

APPENDIX 1: Diabetic Foot Assessment and Risk Stratification criteria for High Risk and Active foot disease *

Risk stratification and triage | Diabetic Podiatry Service

Level 4: Active foot disease

Any or all of the following:

- ✓ Active ulceration
- ✓ Unexplained hot, red, swollen foot with or without pain
- ✓ Suspected Charcot foot
- ✓ Severe or spreading infection or critical limb ischaemia

Action:

1. Urgent referral to High Risk Foot Clinic for active ulceration and suspected Charcot Foot
2. Urgent admission for severe or spreading infection and critical limb ischaemia
3. Provide written and verbal education with emergency contact numbers

Level 3: High risk foot

Any or all of the following:

- ✓ Previous amputation or ulceration
- ✓ More than one risk factor present (e.g. loss of sensation or signs of peripheral arterial disease, foot deformity with significant callus formation or pre-ulcerative lesions)

Action:

1. Develop an agreed, tailored management and treatment plan according to patient needs
2. Annual podiatrist assessment
3. Provide written and verbal education
4. Refer to specialist intervention when required

Level 2: At risk foot

- ✓ One risk factor present (e.g. loss of sensation or signs of peripheral arterial disease without callus or deformity)

Action:

1. Develop an agreed, tailored management and treatment plan according to patient needs
2. Annual podiatrist assessment
3. Provide written and verbal education
4. Refer to specialist intervention when required

Level 1: Low risk foot

- ✓ No risk factors present (e.g. no loss of protective sensation, no signs of peripheral arterial disease and no other risk factors)

Action:

1. Develop an agreed, tailored, self-management plan according to patient needs
2. Annual assessment by a suitable trained nurse or health professional
3. Provide written and verbal education with emergency contact numbers. Appropriate access to podiatrist if required

*As developed by the New Zealand Society for the Study of Diabetes (NZSSD) - Podiatrists Specialist Interest Group (PodSIG).