



# *West Coast District Health Board*

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## *Te Poari Hauora a Rohe o Tai Poutini*

Corporate Office  
High Street, Greymouth 7840

Telephone 03 769-7400  
Fax 03 769-7791

1 February 2022

9(2)(a)

### **RE Official Information Act request WCDHB 9648**

I refer to your email dated 22 December 2021 requesting a range of information under the Official Information Act from West Coast DHB regarding Diabetic Foot Care.

#### **In Response:**

We note that we have already provided many of these answers to you in our response to your email of 16 September 2021 requesting the same and very similar information on diabetic foot care under the Official Information Act. Our response **WCDHB 9606**, was sent to you 7 October 2021. Where your questions below have already been covered, we respectfully direct you back to that response, as there has been no change to services within the last four months that alter any of our earlier information. Noting this:

#### **1. Are these services funded in the DHB that you work at?**

- *Kaupapa Maori foot protection services*
- *Funded community podiatry services*
- *In-remission diabetic foot services*
- *High risk diabetic foot clinics*
- *Specialist multidisciplinary team diabetic foot clinics*
- *Designated Charcot foot clinics*
- *Hyperbaric oxygen therapy*
- *Vascular services for diabetic foot disease*
- *Revascularization*
- *Lower limb amputation*

Refer to our earlier **WCDHB 9606** response in regard to the generic diabetic foot care services that are funded and provided locally at the West Coast. People requiring advanced and tertiary level services such as hyperbaric oxygen therapy, vascular services for diabetic foot disease, revascularization, or lower limb amputation are generally referred to Canterbury DHB for review and treatment.

#### **2. If these services are funded, how many sessions are funded per year per patient for each foot risk 'category'**

- *Kaupapa Maori foot protection services*
- *Funded community podiatry services*
- *In-remission diabetic foot services*

Refer to our earlier **WCDHB 9606** response in regard to the generic services provided locally at the West Coast.

**3. Who would qualify for each of the funded services based on the NZSSD referral pathway for diabetic foot?**

- *Kaupapa Maori foot protection services*
- *Funded community podiatry services*
- *In-remission diabetic foot services*
- *High risk diabetic foot clinics*
- *Specialist multidisciplinary team diabetic foot clinics*

Refer to our earlier **WCDHB 9606** response in regard to the generic services provided locally at the West Coast.

**4. Who is able to refer to these services?**

- *Kaupapa Maori foot protection services*
- *Funded community podiatry services*
- *In-remission diabetic foot services*
- *High risk diabetic foot clinics*
- *Specialist multidisciplinary team diabetic foot clinics*
- *Designated Charcot foot clinics*

Referral to our diabetic podiatry and diabetes nurse specialist services is via local General Practices.

**5. If available, what is the number of podiatrists employed/contracted in this position?**

- *Kaupapa Maori foot protection services*
- *Funded community podiatry services*
- *In-remission diabetic foot services*
- *High risk diabetic foot clinics*

Refer to our earlier **WCDHB 9606** response in regard to the generic services provided locally at the West Coast.

**6. What is the total FTEs of diabetes podiatrists?**

- *Kaupapa Maori foot protection services*
- *Funded community podiatry services*
- *In-remission diabetic foot services*
- *High risk diabetic foot clinics*

Refer to our earlier **WCDHB 9606** response in regard to the generic services provided locally at the West Coast.

**7. Of these, what is the number of Maori podiatrists and their total FTEs?**

- *Kaupapa Maori foot protection services*
- *Funded community podiatry services*
- *In-remission diabetic foot services*
- *High risk diabetic foot clinics*

Nil.

**8. Are off-loading services provided in this setting, for example medical grade footwear, orthotics, casts, removable casts?**

- *Funded community podiatry services*
- *In-remission diabetic foot services*
- *High risk diabetic foot clinics*

West Coast DHB does have an orthotics department on site at Te Nikau Grey Hospital in Greymouth. This service provides a varied range of adjustments to footwear as well as “off-the-shelf” commercial products. Where more specialised orthotics and prosthetics may be required, people are generally referred to services provided in Christchurch.

**9. If a multidisciplinary team diabetes foot clinic is available at your DHB please list the staff (specialists) who are members of the MDT**

- *Specialist multidisciplinary team diabetic foot clinics*
- *Designated Charcot foot clinics*

Not applicable. Refer to our earlier **WCDHB 9606** response in regard to the generic services provided locally at *the West Coast*.

**10. How often are the MDT diabetic foot clinics held?**

- *Specialist multidisciplinary team diabetic foot clinics*
- *Designated Charcot foot clinics*

Not applicable.

**11. Following limb revascularization, where does physical rehabilitation occur?**

Generally initiated and delivered through services provided by Canterbury DHB.

**12. Following lower limb amputation where does physical rehabilitation occur and who is involved?**

Generally initiated and delivered through services provided by Canterbury DHB.

**13. Whether hyperbaric oxygen therapy is available or not in your DHB, are patients referred for this service/utilised by your DHB for diabetic foot ulcer treatment?**

Generally referred through services provided by Canterbury DHB for triage.

**14. How are these footcare services provided during Covid-19 restrictions?**

Our Specialist diabetes outpatient clinics, diabetes nurse specialist services, and visiting diabetic podiatry services have continued throughout most of the different Covid-19 restriction periods, following Ministry of Health guidelines for health care service delivery that were variously extant at the time. There were occasions where visiting Specialists and the visiting registered podiatrists who

provide service to our district were unable to travel due to the earlier Alert level 4 travel restrictions. Where patients booked to be seen during these periods had to have appointments deferred, they were subsequently re-booked to the next available clinics when inter-regional travel restrictions were lifted and Air New Zealand flights were recommenced as Alert Levels dropped down. West Coast DHB also made use of telehealth consultations with patients during Covid Alert level travel and assembly restriction periods where it was clinically appropriate to do so.

**15. If your DHB does not provide a high-risk foot service or diabetes community podiatry, who provides diabetic foot/wound care and how many of them provide this service? (This can include nurses and other staff)**

- **Number of non-podiatrists working in diabetic foot or wound care**
- **Who are the staff?**
- **Any additional comments**

Outside the high-risk foot services provided to people with diabetes by the visiting podiatrists, West Coast DHB have district nurses and rural nurse specialists based at 12 locations across our district who provide wound care and dressing services in amongst the wider scopes of their community nursing workload. The district and rural nurses are all registered nurses.

Refer also to our earlier **WCDHB 9606** response in regard to the generic services provided locally at the West Coast.

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



Ralph La Salle  
**Senior Manager, OIAs**  
**Planning, Funding & Decision Support**