Diabetes Foot Screening and Risk Stratification Tool.

This tool is based on the work of the Scottish Foot Action Group (SFAG). It has been adapted (with SFAG permission) by the New Zealand Society for Study of Diabetes (NZSSD) - Podiatry Special Interest Group (PodSIG) for use in the New Zealand context. It is intended to act as a national guide for developing integrated diabetes footcare pathways and to facilitate standardised access to care for people with diabetes related foot complications. The tool is in Word format to enable localisation with the addition of relevant contact details.

SFAG have used the validated Scottish Intercollegiate Guidelines Network (SIGN) risk stratification system. It includes the five criteria of neuropathy, pulses, previous ulceration or amputation, foot deformity and ability to self-care. These areas are then combined and stratified into a low, moderate or high risk score. People with a high risk score have demonstrated an 86 fold increased risk of further ulceration and the moderate risk a 6 fold increased risk. Of particular significance was the low risk group which showed a 99.7% chance of remaining ulcer free over a 2.5 year period.[1]

In the New Zealand version, Maori ethnicity has been included as a factor in the moderate and high risk category. The relative risk for diabetes related lower extremity amputation is 6 fold and for Maori women over the age of 65 years it is 10 fold.[2] Currently the diabetes related lower extremity amputation rates do not indicate the need for the inclusions of groups based on ethnicity.

End stage renal failure has also been included. There is a strong association between renal impairment and foot complications.[3] The rate of lower limb amputations for people with chronic kidney disease and diabetes is 10 times that of the population with diabetes alone.[4] People with end stage renal failure have a four fold risk of foot complications. Further compounding this problem is a low perception of foot risk among people on haemodyalisis.[5]

Included as part of the tool is The Diabetes Foot Assessment and Risk Stratification Form. It has been developed to provide a promforma for the details required to adequately assess and triage foot risk level. The form follows the five criteria used in the stratification system. It is intended as a guide only and it is not expected that it would be implemented in its current format unless a **paper based** form is required. The information fields could be utilised in most Patient Management Systems (PMS) where the majority of the patient detail fields would automatically populate. It is recognised that many health care practitoners carrying out an assessment will not use a doppler for their vascular assessment but some will, hence the space was provided to record the details. The action plan section is to act as a prompt and in some PMS a referral would be automatically generated.

We hope you find the tool helpful

NZSSD PodSIG

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Adapted from the Foot Action Group (Scottish Diabetes Group) by PodSIG (NZSSD)

¹ Leese, G.P., et al., *Stratification of foot ulcer risk in patients with diabetes: a population-based study.* International Journal of Clinical Practice, 2006. **60**(5): p. 541-545.

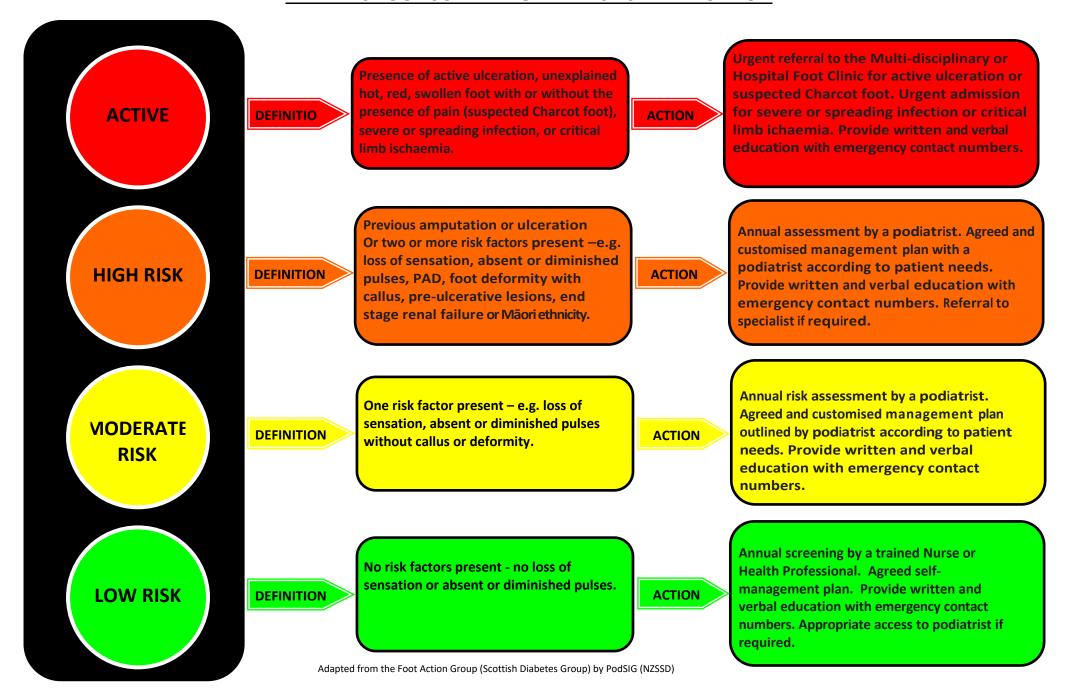
² Ministry of Health, Tatau Kahukura: Maori health chart book 2010, 2nd Edition, 2010, Ministry of Health: Wellington.

³ Margolis, D.J., Hofstad, O., Feldman, H.I., Association between renal failure and foot ulcer or lower patients with diabetes. *Diabetes Care*, 31(7), 1331-1336 extremity amputation in

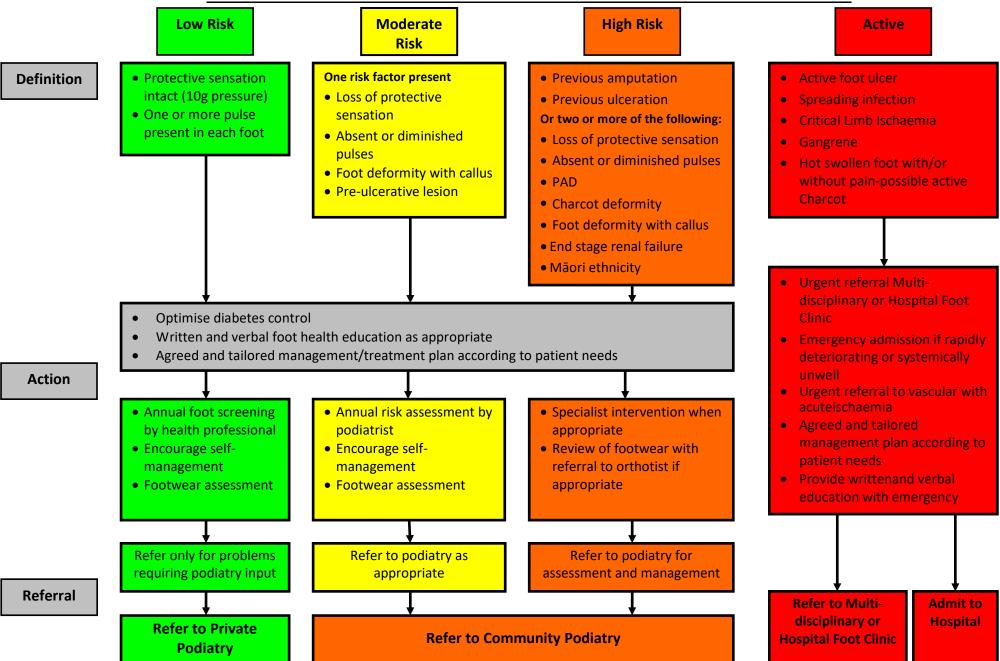
⁴ Eggers,P.W., Ghodes,D., Pugh,J. (1999) Non traumatic lower extremity amputations in Medicare end-stage renal disease population. *Kidney International*, 56, 1524-1533

⁵ Yumang M J, et al., *Perceptions of risk for foot problems and foot care practices of patients on hemodialysis.* Nephrology Nursing Journal, 2009. **36**(5): p. 509-516.

DIABETES FOOT SCREENING AND RISK STRATIFICATION



REFERRAL PATHWAY FOR DIABETES FOOT SCREENING AND ASSESSMENT



REFERRAL PATHWAY FOR ACTIVE DIABETIC FOOT DISEASE

