

Indian Health Diabetes Best Practices —



Foot Care

Indian Health Service Division of Diabetes Treatment and Prevention
5300 Homestead Road NE, Albuquerque, New Mexico 87110
(505) 248-4182 www.ihs.gov/medicalprograms/diabetes



Is a Best Practice Foot Care Program right for your diabetes program?

➔ Do you want your diabetes program to be better at:

1. Conducting annual foot exams?

Yes No

What you will be doing: Using a monofilament exam to test sensation ♦ Inspecting the foot for deformities and altered biomechanics ♦ Conducting a vascular assessment of the foot ♦ Reviewing the chart and asking the patient about prior ulceration or non-traumatic amputations

Who will be doing it: Health care providers

2. Providing patient education?

Yes No

What you will be doing: Offering foot care self-care education annually ♦ Reinforcing education during follow-up visits ♦ Basing the goal and content of education on the patient's risk status

Who will be doing it: Community health programs ♦ Health care providers

3. Providing podiatry care?

Yes No

What you will be doing: Including nail trimming, callus reduction, skin care, and reinforcement of education principles in basic podiatry care ♦ Providing a baseline podiatry assessment and basing follow-up care on clinical findings ♦ Seeing patients with sensory loss, but otherwise normal feet, every six months ♦ Following-up with patients with callus and nail deformities every one to three months ♦ Providing expertise in footwear selection and modification

Who will be doing it: Health care providers

4. Providing care to people with foot ulcers?

Yes No

What you will be doing: Assessing the ulcer ♦ Classifying the wound as simple or complex based on clinical findings ♦ Managing simple and complex ulcers in accordance with the *Indian Health Diabetes Best Practice for Foot Care and Diabetes*

Who will be doing it: Health care providers

5. Recognizing when to refer patients for vascular assessment and augmentation procedures?

Yes No

What you will be doing: Generally limiting referral to patients with rest pain, night pain, or claudication that limits the quality of life

Who will be doing it: Health care providers

➔ If you answered "Yes" to many of these questions, go to page 2 to learn how a Best Practice Foot Care Program can benefit your diabetes program!

What is diabetes foot care?

People with diabetes have special issues with their feet. Diabetes can cause nerve damage that reduces sensation in the feet and blood flow to the feet and legs. This can make it harder for cuts or sores to heal. For these reasons, foot care is an essential element of a diabetes program.

Why is diabetes foot care important to American Indian and Alaska Native communities?

- Foot ulcers and amputations are a major cause of complications and disability for people with diabetes. However, they are among the most common *preventable* complications from diabetes.
- Approximately 40% of patients with diabetes will develop peripheral neuropathy.
- Approximately 20% of patients with diabetes have acute foot problems when they come in for a routine clinical exam.
- Nearly 15% of patients with diabetes will develop foot ulcers during their lifetime.
- Most foot and lower limb amputations begin with foot ulcers. Between 5% and 10% of patients who develop a diabetes foot ulcer will experience an amputation in their lifetime.

The good news about diabetes foot care...

More than half of diabetes foot complications are *preventable* through primary care interventions.



"When I first started working here, I saw so many foot wounds. Now, only a few people have wounds. The number keeps going down."

—Charmaine Branchaud, Red Lake PHS Indian Hospital

A Best Practice Foot Care Program will require a coordinated approach. Here are some tips on how health care providers, community programs, health care administrators, and tribal leadership can work together.

➔ Working together to improve foot care:

1. Who can help?

Ask for and enlist support from: Podiatrists and other health care providers with an interest and expertise in foot care ♦ Community programs, such as senior centers, walking and running groups, and recreation centers ♦ Local businesses, such as shoes stores and fitness clubs ♦ Companies that may be able to donate shoes and socks

2. Why is it important to work together?

Working with clinic, community, and leadership partners will help you: Leverage resources ♦ Avoid duplicating services ♦ Share staff, ideas, and resources ♦ Get support for your common goal of improving the health of your community

3. How can you work together?

Work with your partners to: Share what you are doing ♦ Determine what each partner will do ♦ Assign tasks and timelines ♦ Plan and establish programs and activities ♦ Develop and implement goals and objectives ♦ Design evaluation plans ♦ Maintain regular contact with each other

