

Putting Our Best Feet Forward

A collaborative approach to healthy feet

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Introduction and background

The Northern Grampians Shire (NGS) Footcare Program has been developed in collaboration between Northern Grampians Shire Council (NGSC) Aged & Disability Services, Stawell Regional Health (SRH), East Wimmera Health Services (EWHS) and the Grampians HACC Project Officer.

The Development of the program was facilitated by the Cluster Coordinator of the Grampians Pyrenees Allied Health Assistant (AHA) Implementation Project and supported by Grampians Pyrenees Primary Care Partnership (GPPCP).

The AHA Implementation Project investigated the potential to extend the AHA workforce in the Grampians Pyrenees region of Western Victoria. One of the findings was that in addition to growing the AHA workforce, the existing Community Care Worker (CCW) workforce was also a valuable resource that could be further utilised.

The provision of basic foot care to personal care clients who are assessed by a podiatrist as low risk was one of the initial priorities.¹ The proposal was to educate all CCWs about supporting clients to do their own foot care and train selected CCWs to provide basic nail care to clients who require physical assistance.

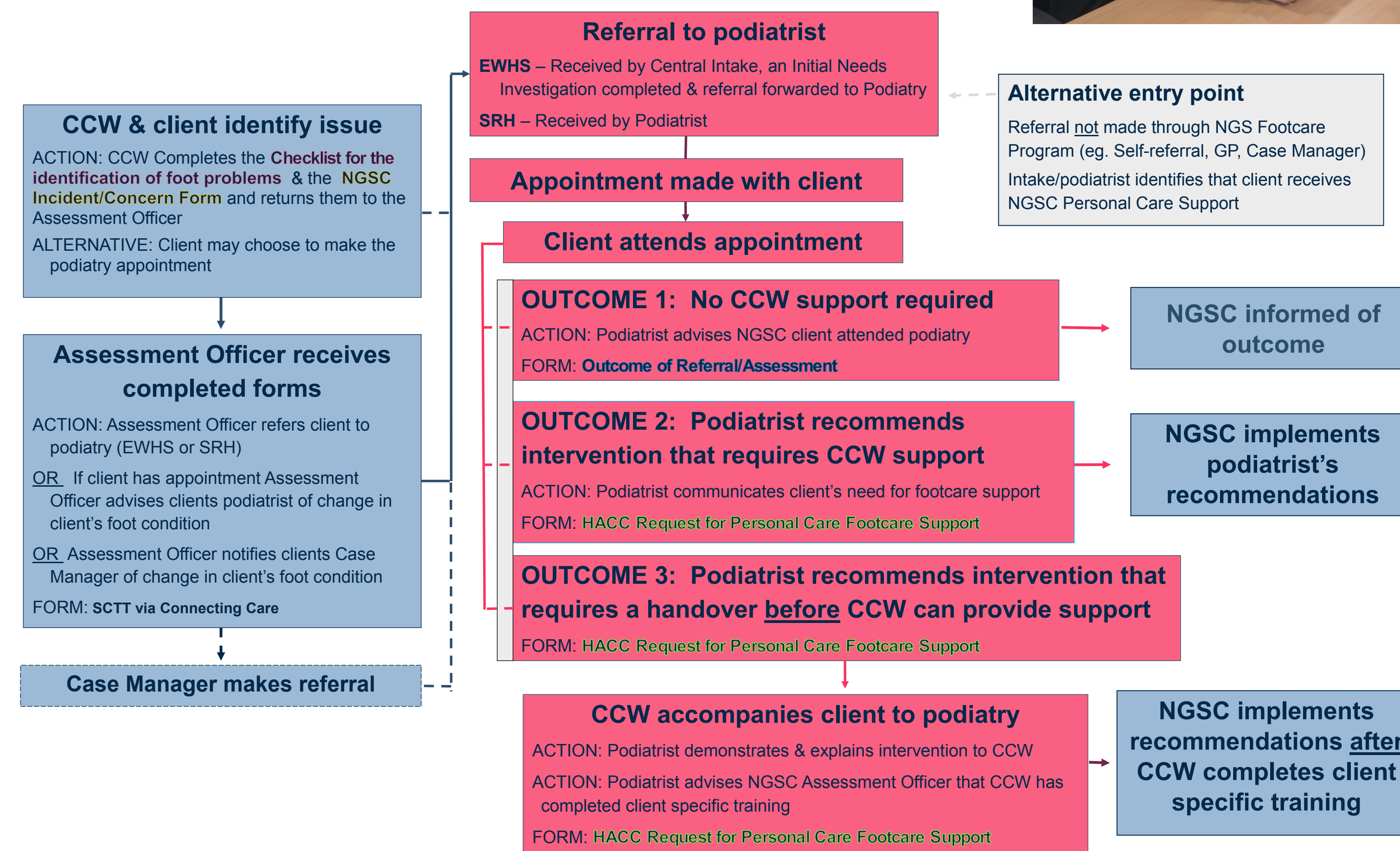
The goals of the Northern Grampians Shire Footcare project were to educate CCWs to:

1. Support personal care clients to care for their own feet
2. Recognise when a client should see a podiatrist, and
3. Offer training to selected CCWs to provide basic foot care to personal care clients that are assessed as low risk by a podiatrist.

Communication and referral pathway

The priority for the NGS Footcare Program communication and referral pathway was to ensure that the processes for the foot care program aligned with any existing referral processes and communication tools so the program could be implemented effectively without any unnecessary duplication of tasks.

The working group collaborated with the regional HACC Project Worker to develop the pathway. The pathway utilises existing tools including the Service Coordination Tool Templates (SCTT), the NGSC Incident or Concern Form and the HACC Outcome of Referral/Assessment.



Checklist for the Identification of Foot Problems prompts CCWs to report changes in the condition of the client's feet.

The NGSC Incident or Concern Form is a tool that CCWs use to report any concerns that they have about a client's health or safety.

Outcome of Referral/Assessment is a communication tool used by HACC funded service providers in the Grampians Region (Western Victoria).

Request for Personal Care Foot Care Support was developed by the working group for the podiatrist to request CCW support for a specific client.

Outcomes

The Northern Grampians Footcare Program has achieved:

- An increased awareness & understanding of the role of Podiatry by Community Care Workers (CCWs)
- Increased confidence in CCWs to talk with their clients about basic foot care

Process

- The development and use of the Checklist for the identification of Foot Problems to facilitate referrals to podiatry
- Guidelines and guidance notes (policy & procedures) have been developed for the program
- The implementation of the NGS Footcare Program in Stawell and St Arnaud

Education & Training

- Eleven CCW completed the Foot, Skin & Nail Care unit, another 10 CCWs have indicated that they would like to do the unit
- Five CCWs have met the nail care competencies and will complete client specific training as potential clients are identified

Collaboration

- The active involvement of the two health services (EWHS & SRH), NGSC and Grampians Regional HACC throughout the project

Regional Uptake

- The Request for Personal Care Foot Care Support has been adopted for use as part of the HACC Grampians Region Personal Care Protocol
- The program has been replicated in Ballarat & the Wimmera

Resources

- A resource has been developed to assist others to establish foot care programs.

The Process

Phase 1: What's possible?

"We don't do toenails" Assessment Officer

The initial phase of the project was to determine what was within the scope of the CCW role

HACC Policy & Guidelines - CCWs can only provide basic foot care (cut & file nails) after the successful completion of the unit Provide Basic Foot Skin & Nail Care (CHCIS306A) and Client Specific Training²

Active Service Model - Promotes client engagement and participation. The priority is for CCW support clients to complete their own foot care tasks "Do With, Not For".³

Phase 2: The working group

The formation of the NGS Foot Care Project working group quite literally brought the NGSC Assessment Officers and the podiatrists from East Wimmera Health Service (EWHS) and Stawell Regional Health (SRH) together.

"I had never met the podiatrist at EWHS before, I had no idea about the podiatrist's role." Assessment Officer

The initial focus of the working group was on the:

- Development of the Foot Problem Checklist
- Delivery of education to the CCWs, and
- Development of the Communication & Referral Pathway.

Phase 3: CCW education

The podiatrists from EWHS (St Arnaud) and SRH (Stawell) presented information sessions to all the CCWs employed by NGSC.

The session was about foot care and podiatry and the ways that CCWs can support their clients. Topics included:

- Supporting clients to complete foot care tasks
- Local options for clients with healthy feet to get assistance with basic foot care (cutting & filing)
- Changes in a client's foot condition that should be seen by a podiatrist
- Using the Foot Problem Checklist & reporting concerns

Eleven CCWs then chose to do Provide Basic Foot, Skin & Nail Care with Chisholm (the Victorian HACC Training Provider).

Phase 4: Evaluating the process

Aside from two initial referrals there were no more coming through. We needed to know if the Checklist was being used and if it was effective in identifying issues that need to be seen by a podiatrist

After 6 months the checklist and reporting process was evaluated.

Findings

- CCWs were using the checklist accurately to determine if the client needed to see a podiatrist
- Two thirds of the clients monitored were seeing a podiatrist, and
- The communication and referral pathway needed to be modified to accommodate variations in the way clients were referred to podiatry

Phase 5: Train selected CCWs to cut & file nails

CCWs who successfully completed Provide Foot Skin & Nail Care had the opportunity to learn to cut and file nails under the direction of local podiatrists.

Five CCWs who have met these competencies. They are required to do client specific training at a 'handover' appointment before they begin providing basic foot care.



References:

- ¹ Richie, J (2013). Grampians Pyrenees strategic allied health workforce strategic plan, East Grampians Health Service, Ararat, Australia.
- ² Grampians HACC (2009). Grampians Region personal care protocol, accessed 26 August 2014, <http://www.wimmerapcp.org.au/wp-gidbox/uploads/2014/02/Grampians-Region-Personal-Care-Protocol-October-2009.pdf>.
- ³ Home & Community Care (2014). Active service model, Department of Victoria, accessed 26 August 2014, <http://www.health.vic.gov.au/hacc/projects/asm_project.htm>.



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Resources are available online at:

<http://wimmerapcp.org.au/hacc-and-community-aged-care/grampians-region/foot-care-program/>