

Frequently Asked Questions

Why are we making this change?

At the moment we have more than 10,000 patients registered for care by the Community Podiatry service (RDUH East) and this number is projected to double over the next five years. We need to ensure our services are available for those most in need - the number of “high-risk” patients who require intensive follow-up treatment and complex wound care has increased and many of these patients are waiting longer than we would like them to be seen.

When will this change be made?

From January 2024 all new patients will be assessed against the new criteria and assigned a risk score and outcome of assessment as outlined above.

In Spring 2024 all existing patients will be assessed against the new criteria and assigned a risk score and outcome of assessment as outlined above.

What do I as a patient need to do?

As a patient you do not need to take any action at the moment. You will be contacted in due course, assessed and notified of your risk score and the most appropriate level of care for your needs. In some cases, this may mean that you will be discharged from the podiatry service.

What are the possible outcomes of my assessment?

After your assessment there will be 1 of 4 outcomes:

- 1) **Ongoing care, with regular follow up appointments**, for the most high-risk patients.
- 2) **Ongoing care on a Patient Initiated Follow Up (PIFU) pathway**, for those patients that are at risk and therefore need access to the service, but who do not need active treatment on a regular basis.

- 3) **Short course of treatment (or 1 off treatment), followed by discharge.** For example, for patients on the MSK and surgical caseload, as well as patients that have symptomatic lesions and nails (but who are not deemed to be at high risk).
- 4) **Discharge from the service, with written and verbal education,** for those with low medical need and do not need specialist podiatry care. We anticipate this will include many routine nail care patients.

I normally receive my treatment in my own home. What impact will this change on me?

All patients who currently receive treatment at home or at a community clinic will be assessed in the same way, assigned a risk score and outcome of assessment.

Those patients who are deemed at highest risk **and are unable to leave their home for any reason**, will still be able to receive care in their home.

All patients who are able to leave their home, even with assistance, will be asked to attend the clinic for their appointment. This helps make sure we can see the maximum number of patients.

What happens if I now have to come to clinic but I don't have my own transport and I can't manage public transport?

If family and friends are unable to assist with transport, the podiatry department will provide a list of local voluntary care services that may be able to help you.

Patient transport advice leaflet

If I am assessed and discharged what are my options for help with footcare?

Each patient will be given bespoke foot health education, as well as a 'discharge pack'. This will include:

- Written or digital education materials to share with patients and carers. This includes materials for those with additional communication needs
- A list of voluntary agencies and social nail cutting groups
- Signposting to HCPC registered private podiatrists.

Details of social nail-cutting training scheme can be provided, so that carers, families and residential/nursing homes can learn and be signed off as competent in simple nail care.

Can you sign post me to a private podiatrist?

We would signpost you to the Royal College of Podiatry website where you can search for podiatrist by postcode. All members are fully qualified and registered with the Health and Care Professionals Council (HCPC).

[Find a Podiatrist \(rcpod.org.uk\)](http://rcpod.org.uk)

If you need further assistance with this please call the Royal College of Podiatry on 020 7234 8620.

I have been told I am on a PIFU pathway. What is this?

Patient-initiated follow-up (PIFU) enables you to make an appointment if you develop an urgent foot problem. PIFU can help you manage your own foot care with support from friends and family, and seek help from podiatry if you were to develop a foot problem.

Community Podiatry Team Patient Initiated Follow-Up (PIFU) RDUH Eastern Locality

For all other concerns, or if you are feeling unwell, your GP will remain your first point of contact.

I need some information about taking care of my feet?

We have a range of leaflets written to help support your footcare needs, please follow this [link](#).

Can you sign post me to a social nail cutting scheme?

Nail care schemes

| |
|---|
| <p>Age UK – Exeter, East Devon, Tiverton, Tavistock</p> <p>https://www.ageuk.org.uk/devon/our-services/foot-care/ 0333 241 2340 £27pp or £53 per couple (Home Visits)</p> |
| <p>Hikmat Happy Feet - Exeter, Honiton, South Molton, Barnstaple and Torrington</p> <p>https://services.pinpointdevon.co.uk/kb5/devon/services/service.page?id=zMEcYvw2VaA 01392 757220 07923 315032 hikmathappyfeet@gmail.com £6 fingernails, £9 toe nail, £8 clippers. There will be a £5 charge for no-shows to appointment.</p> |
| <p>Estuary League of friends – Topsham, Exeter</p> <p>Run by Claire, qualified Pod at the hub. 01392 879009 Fingers/ Toes £12 or both for £17</p> |
| <p>Mid Devon Mobility - Crediton, Tiverton New service coming soon. https://www.middevonmobility.org.uk/services/foot-care-service/</p> <p>01884 242099 (Tiverton) 01363 773303 (Crediton)</p> |
| <p>Assist Teignbridge - Dawlish info@assist-teignbridge.co.uk</p> <p>01626 889288</p> |
| <p>Blackdown Support group – Hemyock 01823 681036 £5.50 per visit</p> |
| <p>Ottery help scheme info@otteryhelpscheme.org.uk</p> <p>01404 813041 £10 joining fee to enlist. £25 initial appointment includes nail cutters, £12 follow up appointments. Will only see people from Coleridge Medical Centre.</p> |
| <p>Age Concern – Crediton</p> <p>https://www.ageconcerncrediton.co.uk/foot-care/</p> <p>01363 775 008 £18.00 initial visit – subsequent £8.00 per visit (all payments go to the charity).</p> |

