

CASE STUDY

Extended Scope Practitioner Podiatrist in Acute Foot & Ankle Orthopaedic Service

At a Glance

Overview

Development of additional non-surgical capacity within acute provider foot & ankle service through developing the scope of a team based podiatrist

Approach

In-house service-led development to bring additional skills and stability to orthopaedic surgical team

Impact

Patients with long-term foot & ankle conditions that required a therapeutic conservative management were diverted from clinician clinics into therapy-led clinics;

OVERVIEW

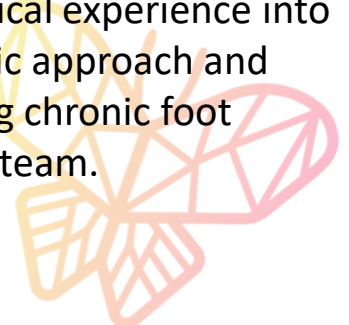
A busy Foot & Ankle service within an acute hospital trust looked to bring additional staff into the team to manage the high volume of referrals, high number of patients on conservative management pathways and reduce the impact of the variability of the junior doctor rotation gaps.

OBJECTIVES

- To bring additional clinical expertise in non surgical pathways to orthopaedic surgical team
- To bring a greater focus on conservative element of patient treatment
- Bring a therapeutic approach to long term condition management
- To provide stability in the middle grade of the team through rota variability

APPROACH

The orthopaedic team had strong links with the MSK service including physiotherapy, podiatry and OT services. To manage the high number of ongoing foot and ankle non-surgical patients, they looked to recruit this clinical experience into the team to bring a therapeutic approach and expert knowledge of managing chronic foot conditions to a surgical based team.





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RESULTS

The role now fully manages non-surgical pathways such as Achilles rupture and shockwave therapy, allowing the surgical team to focus on elective and trauma patients. It also brings additional soft skills into the team, a therapeutic and podiatric lens to patient care, and additional training and education to the junior doctor team.

LESSONS LEARNED

This is very different from an ACP role, and there is no established training programme. Development into the role is person-centred, based on the skill set of the practitioner and the place they fill in the MDT. There was no measurement of patient satisfaction or clinical impact prior to commencement to demonstrate the qualitative or quantitative contribution of the role.

RECOMMENDATIONS

Development of bespoke training programme to develop skills within podiatry for band 6/7, with mentorship and better access to training courses to build service specific training programmes

CONTACT INFORMATION

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