# Improving the quality of inpatient referrals to the multidisciplinary diabetic foot service in an acute care hospital in England



Dr Akos Marton<sup>1,4</sup>, Dr Kyi Pyar Than Yu<sup>2,4</sup>, Dr Saleheen Huq<sup>2,4</sup>, Dr Jeyanthy Rajkanna<sup>3,4</sup>

<sup>1</sup>Clinical Teaching Fellow; <sup>2</sup>Specialty Registrars in Diabetes & Endocrinology; <sup>4</sup>Peterborough City Hospital, North West Anglia NHS Foundation Trust, Peterborough, UK

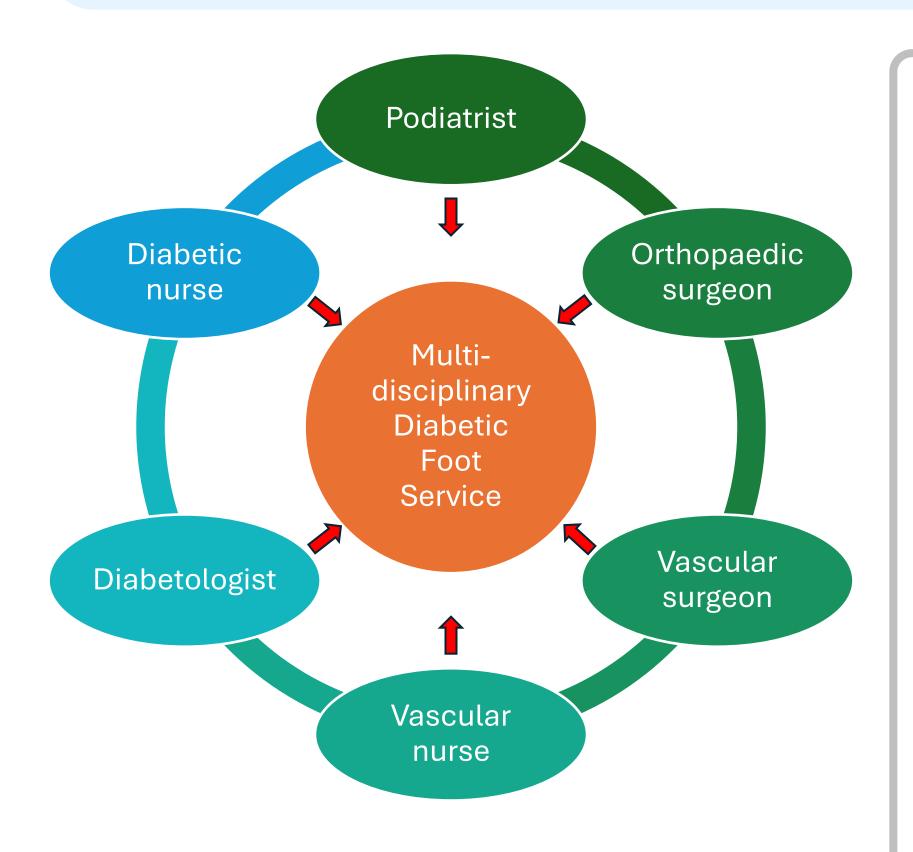


Figure 1. Members of the diabetic foot service

#### Introduction

- Diabetic foot disease is common, carries a high risk of morbidity and mortality, and often requires hospital admission (1,2,3)
- Every hospital is advised to provide a multidisciplinary diabetic foot service (MDFS) (4,5). Figure 1.
- Some MDFS referrals are inappropriate or incomplete, delaying triage and planning
- In this quality improvement project, we aimed to streamline our inpatient MDFS referral process through introduction of a structured questionnaire

# Methods

(1) Plan: Are referrals complete? MDFS referrals were reviewed for the inclusion

of ten key parameters (28/01/2022 to 11/04/2022)

(2) <u>Do</u>: Change electronic referral form to a two-part questionnaire. First part: diabetic foot ulcer confirmation and risk assessment;

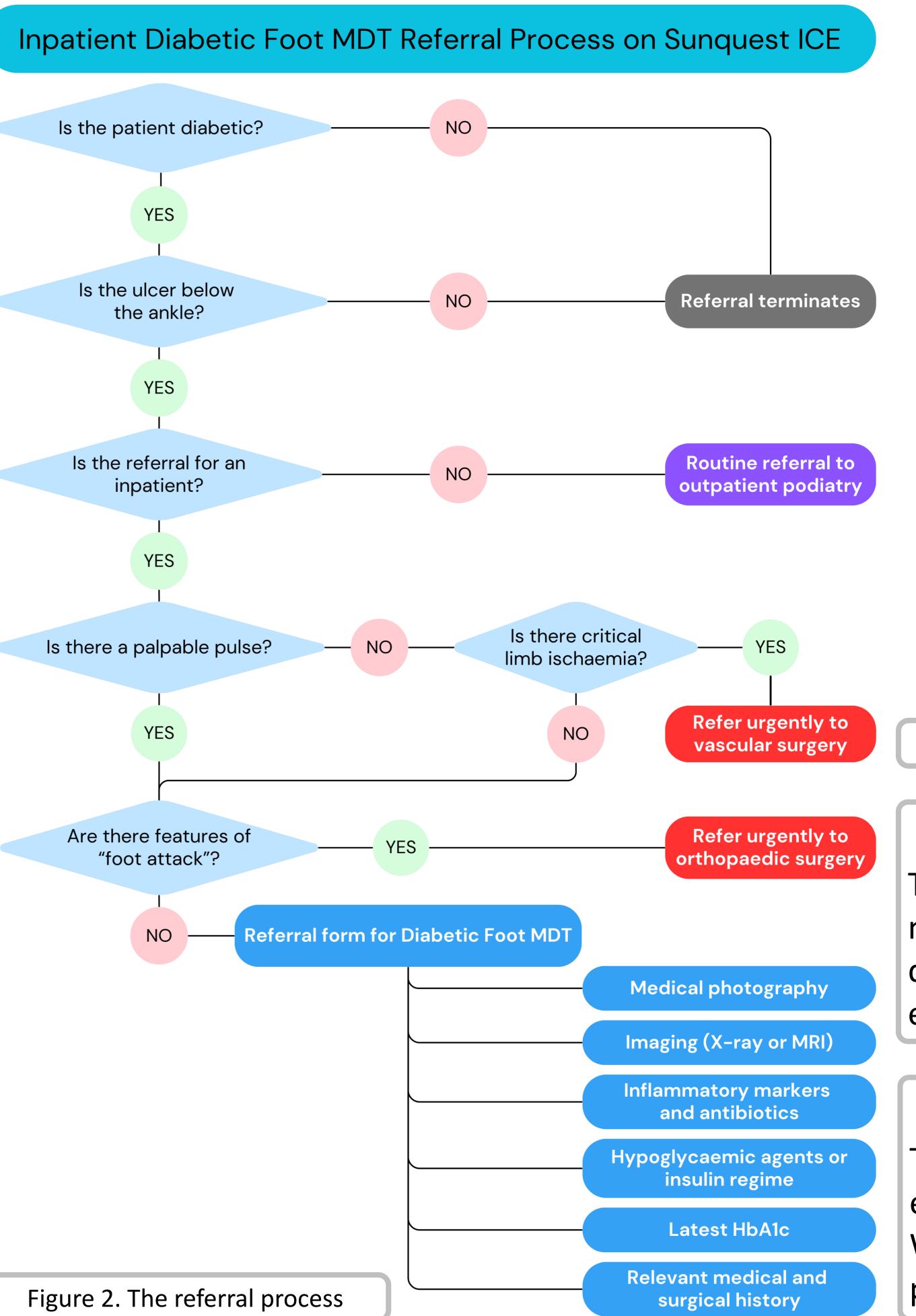
Second part: direct questionnaire of desired parameters. Figure 2.

(3) <u>Study</u>: Review MDFS referrals again after clinical teams got used to the new form (01/07/2024 to 24/09/2024) and compare with first cycle.

(4) Act: Identify parameters with low compliance and plan referral form update.

## Results

In the first data collection cycle, 50 referrals were identified. In the second cycle, 51 referrals were identified. The proportion of referrals with the given parameters are illustrated in Figure 3. Statistical comparison was made using Fisher's Exact Test, in individual contingency tables for each parameter.



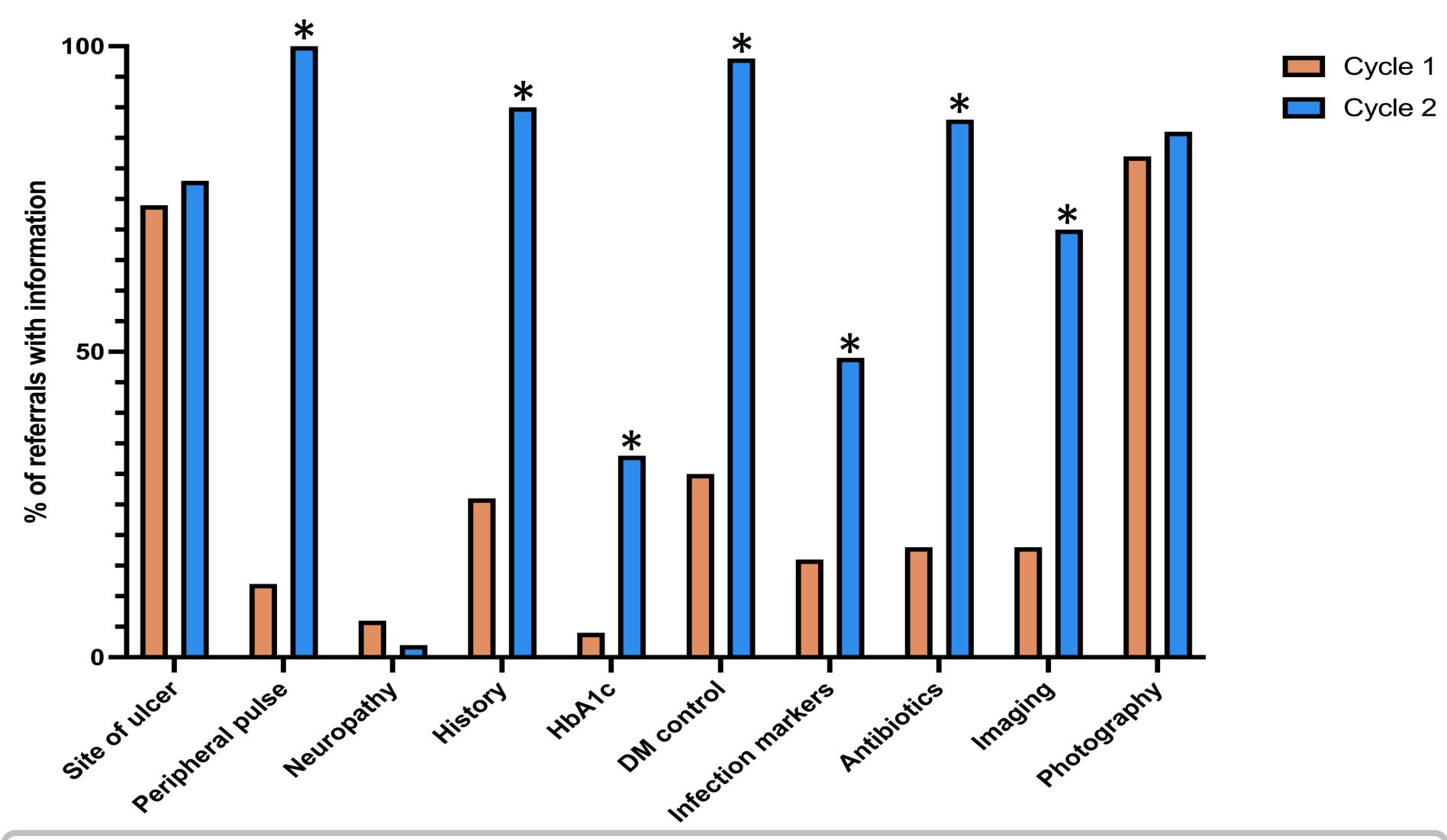


Figure 3. Proportion of referrals including each parameter in cycles 1 and 2. (\*Significant difference at p < 0.05)

### Discussion

The referral questionnaire is based on our internal guidelines for diabetic foot disease management. For the referrer, it provides instructions on performing a thorough diabetic foot assessment and advises how to act on red flag signs. For the MDFS, it ensures all essential information is included for a prompt first expert assessment.

#### Conclusion

The new referral form improved the quality of referrals, but some parameters, for example HbA1c and neuropathy, require further improvement.

We need to assess the new form's effect on efficiency of triage and management planning, and its direct effect on patient care.