

## **DIABETES UK and NHS DIABETES**

### **A survey of the diabetes specialist podiatrist workforce – UK pilot**

- How many podiatrists in the UK are specialists in managing the diabetic foot?
- What training have diabetes specialist podiatrists received?
- How intensively do diabetes specialist podiatrists work with complex foot problems?
- How many podiatrists work within dedicated multidisciplinary teams and foot protection teams?

In 2010 Diabetes UK made the first ever attempt to survey the diabetes specialist podiatrist workforce, capturing a unique picture of the diversity of roles, work settings, those working in isolation, and more.

This pilot survey provides a snapshot of those podiatrists working across all UK nations, but predominantly representing those working in England (75% of the sample). In total, 512 responded.

1. 512 podiatrists gave 233 job titles, with only 4 in 10 specifying diabetes in their job title. On average, podiatrists surveyed spent 70% of their time working with patients with diabetes and 59% of their time with high ulcer risk patients.
2. The postgraduate training routes which support podiatrists to specialist status are patchy; ranging from attendance at conferences or shadowing colleagues to ad hoc Master modules. Only 13% hold a Masters degree despite 73% having Band 7 or above status where Masters degree status is typically required. Less than half the Band 7 podiatrists surveyed hold more than 1 post-basic qualification.
3. Of those surveyed, 4 in 10 podiatrists work 75-100% of their time with patients at high ulcer risk.
4. Across all podiatrists in this survey, more than twice as many hours are spent in high ulcer risk management than are spent in low ulcer risk management, demonstrating that the survey was largely completed by specialist podiatrists.
5. The ideal diabetes specialist podiatry workforce would work across both Hospital and Community settings – 50% of this sample work across both settings.
6. 1 in every 5 of these podiatrists anticipate retirement within 10 years. In the current NHS climate, where posts are frozen and the workforce's future is uncertain, this raises concern about succession planning.
7. 1 in 10 podiatrists in this survey work in isolation from Foot Protection Teams and Multidisciplinary Teams – including 7% of those working predominantly with high ulcer risk patients. This contrasts with the 44% of this sample working in an integrated fashion across both teams.
8. The 41 vacant podiatry posts recorded by respondents were most commonly vacant due to "Cost savings". Just 2% of podiatrists in this survey were Band 5 (non-specialists); yet 27% of the vacant posts were at this level. This may indicate that podiatry services are recruiting at lower experience levels, hence lowering standards, in order to cope with efficiency savings in their teams.

The greatest obstacle to this survey, which we did not anticipate, was artificially separating podiatrists who work in diabetes from those who work with vascular and other non-diabetes related foot problems. In truth, this survey has demonstrated that most podiatrists do not work solely in diabetes: but those that do, contribute significant hours managing high ulcer risk patients or complex foot problems.

We contacted these podiatrists solely through diabetes-specialist networks - but they have no defined diabetes workforce, as there is for DSNs. Future surveys will benefit from this insight.

Many thanks to all who participated this year. We aim to repeat this survey annually, and a priority for replication would be to obtain greater engagement from all UK nations. If you have any feedback or questions about this survey, please email them to: [policy@diabetes.org.uk](mailto:policy@diabetes.org.uk).