

ORTHOTICS COMPETENCY FRAMEWORK
FOR THE PREVENTION, TREATMENT AND
MANAGEMENT OF DIABETIC FOOT DISEASE



THE ORTHOTICS COMPETENCY FRAMEWORK FOR THE PREVENTION, TREATMENT AND MANAGEMENT OF DIABETIC FOOT DISEASE.

Diabetes foot care is complex and there is a requirement for the attainment of set levels of quality and consistency in its delivery. This Competency Framework was developed for all staff involved in the care of individuals with diabetes foot problems. It was designed as a working document to identify the practitioners learning needs and to map their progress and to improve and standardise patient care in diabetic foot disease.

The competencies within this framework are designed to encompass the wide range of knowledge and skills that are needed in order to deliver care to individuals across the spectrum of diabetes foot disease. The framework can be used as a whole document to guide the design or enhance a diabetes foot service. Conversely, the skill levels can be used in isolation to identify an individuals learning or training needs.

The dimensions and competencies have been developed in consultation with a wide range of stakeholders. The competencies have been individually matched to existing Skills for Health (SFH) 'National Occupation Standards' (NOS) indicators. The framework is multi-functional and the competencies have also been individually mapped to the NHS Knowledge and Skills Framework (KSF) and subsequent KSF levels.

Benefits for patients:

- highest quality of care is received based on level of need
- Rapid access to appropriate specialist services
- empowered to self-manage wherever possible through appropriate foot education
- better prognosis and outcomes of health

Benefits for practitioners working in diabetes foot care:

- Identify existing knowledge and skills in diabetes foot disease
- Opportunity to increase skills and knowledge in specialist area
- Support performance review and appraisal
- Increased motivation through structured career pathways and education

Benefits for diabetes foot services:

- Safe, effective and efficient use of resources
- Develop workforce planning and service development need
- Assurance that treatment is based on national standards and evidence base
- Focused diabetes foot services based on needs rather than expectation
- Staff retention through increased job satisfaction

RATIONALE FOR THE DIABETES COMPETENCY FRAMEWORK

Diabetes continues to be a challenge and a priority for the National Health Service (NHS) in Scotland. The current number of people diagnosed with diabetes in Scotland is over 200,000 which equates to about 4% of the population. It is envisaged that by 2032, one person in ten will have diabetes ⁽¹⁶⁾. NHS Quality Improvement Scotland ⁽¹²⁾ highlights that, if strategic goals are not implemented now, the NHS will be providing crisis intervention to the diabetes population, rather than active chronic disease management. 'The Scottish Diabetes Framework Action Plan' ⁽¹⁶⁾ has highlighted a number of national priorities, one of which is diabetes footcare.

Foot disease is a potentially devastating complication of diabetes and, as a consequence, a lower limb is lost every 30 seconds somewhere in the world ⁽²⁾. Multidisciplinary clinics with a podiatrist, diabetologist, and orthotist began to report the clinical effectiveness of specialist teams in reducing amputation rates ^(5,8,10,19). This model forms the basis of national guidelines and continues to be the recommended approach to diabetes footcare ^(11,14,17)

It is recognised within Orthotics that there is a need to improve multidisciplinary practice in the diabetic foot clinic.

To provide gold standard diabetic foot services it is necessary to have appropriately skilled orthotists, capable of delivering a quality assured service, with standards of proficiency and professional competency.

SCOTTISH DIABETES FOOT WORKFORCE DEVELOPMENT GROUP

The Scottish Diabetes Foot Workforce Development Group (SDFWDG) developed a framework for Podiatrists working in the field of diabetes to identify the competences of practice required at every level within the career framework. When this document was drafted, they invited colleagues working within the diabetic foot team to contribute and adapt the framework to be used as a resource and template for their professional competencies. The Orthotic Writing group would like to express their gratitude and thanks to the SDFWDG for this opportunity and to acknowledge the vast amount of work already undertaken identifying generic competencies required by clinicians working with diabetic foot disease. This work allowed the orthotics group to assimilate the main document for orthotic use. Using the generic competencies, skills could be mapped across but the level of competency altered depending on profession hence the requirement to produce a separate document for Orthotists. A section specifically on orthotics was written to enable the document to become a competency framework for Orthotists.

ORTHOTICS ADAPTATION GROUP

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CORE COMPETENCIES

In addition to the specific dimensions and competencies detailed in the framework, individuals must also demonstrate core attitudes and values in diabetes care. The following represent a set of desirable behaviours in this context.

The practitioner should display:

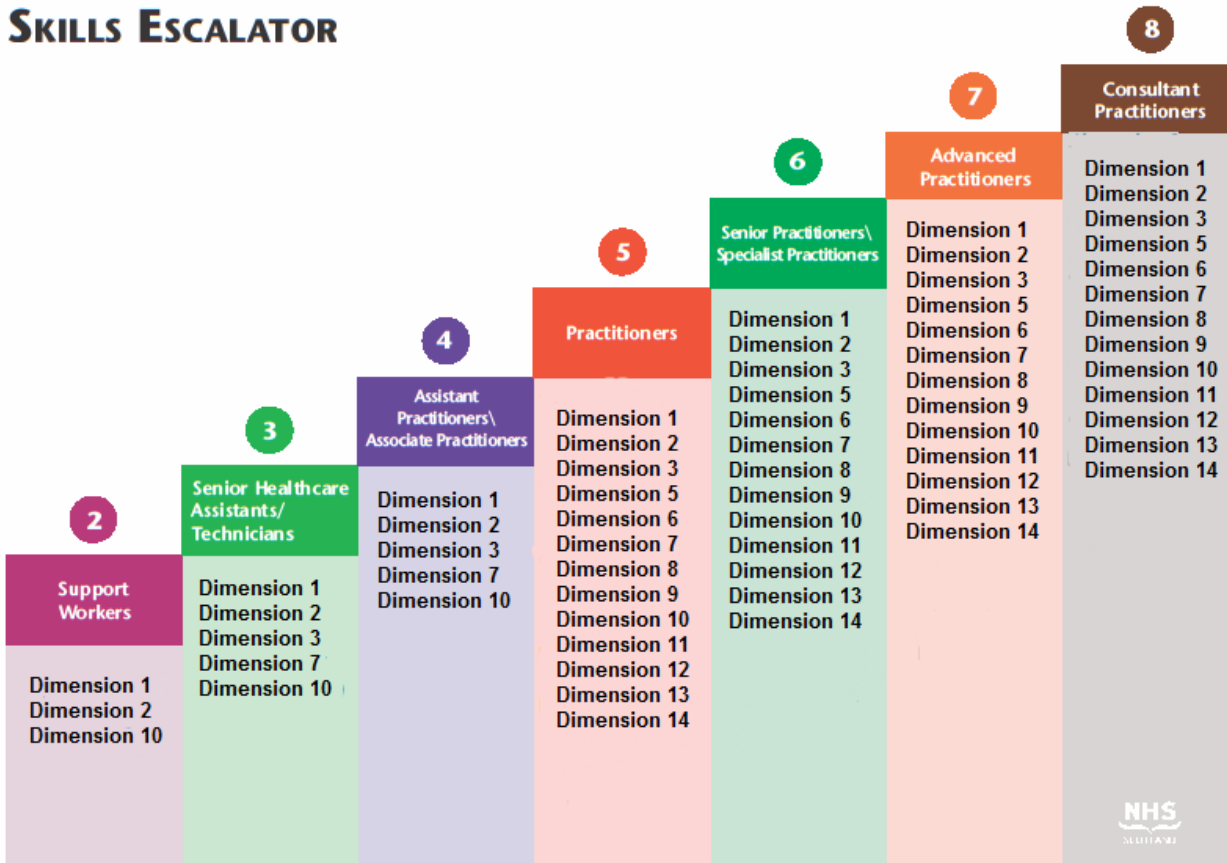
- Respect for the individual, family and carers, ensuring confidentiality at all times.
- Commitment to the delivery of evidence-based care, through reflective practice and concern for the quality of care
- Commitment to enabling patients to support their own goals, including promoting healthy lifestyles
- Commitment to being the advocate of the person with diabetes
- Understanding of individual and societal attitudes to altered body image and disability
- Concern for the safety of the person with diabetes and other healthcare workers
- Honesty and integrity when communicating with patients and carers and other healthcare workers
- Honesty and integrity when completing documentation
- Commitment to maintaining and developing his or her unique knowledge and skills base
- Commitment to working as a member of a multidisciplinary team both in hospital and community care setting

(Modified from Stroke –Core Competencies for Healthcare Staff, 2005)

THE FRAMEWORK IN PRACTICE

The dimensions and skill sets within the framework include and identify all areas of professional roles. These dimensions will not be required for all roles but they ensure that all areas of diabetes foot care and management are considered. The structure of the document reflects the Skills for Health Escalator Concept and as the escalator travels higher, the dimensions, competencies and KSF levels will increase. A number of the competencies within the dimensions are generic, therefore adaptable and transferable to other health professions.

SKILLS ESCALATOR



The 14 Dimensions of the Framework are:

- 1 Diabetes Practitioner Knowledge, Skills and Behaviours
- 2 Screening
- 3 Dermatology in Diabetes Mellitus
- 4 *Clinical and Pharmaceutical Knowledge (used within podiatry framework)*
- 5 Clinical and Radiological Knowledge
- 6 Painful Diabetic Peripheral Neuropathy (PPN)
- 7 Preventative Ulcerative Care
- 8 Wound Management
- 9 Post Ulcerative Management
- 10 Health Improvement
- 11 The Charcot Foot in Diabetes Mellitus
- 12 Research and Audit
- 13 Leadership and Service Development
- 14 Orthotic Intervention

DIMENSION 1: Diabetes Practitioner Generic Knowledge, Skills and Behaviours

Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of diabetes	Diab GA1	Core 2	1
General knowledge of the signs and symptoms of diabetes	Diab TT01	Core 2	1
Aware that national guidelines exist for treatment and management of diabetes e.g. SIGN 55, NICE, NSF'S, Clinical Governance	Diab TT01 Diab GA1 Diab GA2	Core 2	1
Generic Skills			
Competency	NOS Indicator	KSF Dimension	KSF Level
Assess through discussion the individuals understanding and reinforce the benefits of self care and monitoring to prevent complications	Diab HA13 PE8 GEN14	HWB6	1
Generic Behaviours			
Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate with the individual in an appropriate manner, recognizing the stressful nature of the potential impact of diabetes	GEN22 CHS48	Core 1	1

DIMENSION 2: Screening

Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate clearly to the individual what is involved in the screening process	GEN22	Core 1	1
Demonstrate the ability to carry out a basic diabetic foot screening and record the information on the SCI DC system where available.	Diab HA3 Diab HA3 Diab HA4	HWB6	1
Provide up to date verbal and written advice relating to the risk status resulting from foot screening.	Diab HA3 GEN14 Diab HA4	Core 1	1
Explain the results of the screening to the individual and carer in an appropriate manner and a suitable level and pace.	GEN22	Core 1	1
Arrange further assessment when required and make appropriate referral.	Diab TT01 CHS99	HWB7	1

DIMENSION 10: Health Improvement

Level

2

Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of diabetes	PE	Core 2	1
Demonstrate a knowledge of the availability of support mechanisms such as Diabetes UK, My Diabetes My Way (www.mydiabetesmyway.org.uk) to assist the individual in managing their condition	Diab DA4 GEN14 HSC330	HWB4	1

DIMENSION 1: Diabetes Practitioner Generic Knowledge, Skills and Behaviours

Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of diabetes	Diab GA1	Core 2	1
General knowledge of the signs and symptoms of diabetes	Diab TT01	Core 2	1
Aware that national guidelines exist for treatment and management of diabetes e.g. SIGN, NICE NSF's, Clinical Governance	Diab TT01 Diab GA1 Diab GA2	Core 2	1
Generic Skills			
Competency	NOS Indicator	KSF Dimension	KSF Level
Be able to communicate with patients the benefits of good glycaemia control, self care and monitoring to prevent complications	GEN22	Core 1	1
Assess through discussion the individuals understanding and reinforce the benefits of self care and monitoring to prevent complications	Diab HA13 PE8 GEN14	HWB6	3
Generic Behaviours			
Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate with the individual in an appropriate manner, recognizing the stressful nature of the potential impact of diabetes	GEN22 CHS48	Core 1	1

DIMENSION 2: Screening

Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate clearly to the individual what is involved in the screening process	GEN22	Core 1	1
Demonstrate the ability to carry out a basic diabetic foot screening and record the information on the SCI DC system where available.	Diab HA3Diab HA3 Diab HA4	HWB6	1
Provide up to date verbal and written advice relating to the risk status resulting from foot screening.	Diab HA3 GEN14 Diab HA4	Core 1	1
Explain the results of the screening to the individual and carer in an appropriate manner and a suitable level and pace.	GEN22	Core 1	1

Arrange further assessment when required and make appropriate referral.	Diab TT01 CHS99	HWB7	1
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DIMENSION 3: Dermatology in Diabetes Mellitus

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands and recognises the need for referral when a skin abnormality is observed	TT01	Core 2	1

DIMENSION 7: Preventative Ulcerative Care

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress and how to assess its severity in relation to preventing foot ulceration.	Diab HA4 Diab HA3	HWB6	2
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of foot ulceration.	CHS48 GEN22	Core1	2
Understand the necessity for urgent treatment and referral in the event of suspected ulceration.	Diab HA4Diab HA3	HWB6	2

DIMENSION 10: Health Improvement

Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of diabetes	PE	Core 2	1
Demonstrate a knowledge of the availability of support mechanisms such as Diabetes UK, My Diabetes My Way (www.mydiabetesmyway.org.uk) to assist the individual in managing their condition	Diab DA4 GEN14 HSC330	HWB4	1

Assistant Practitioners

LEVEL 4

DIMENSION 1: Diabetes Practitioner Generic Knowledge, Skills and Behaviours

Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of diabetes	Diab GA1	Core 2	1
General knowledge of the signs and symptoms of diabetes	Diab TT01	Core 2	1
Aware that national guidelines exist for treatment and management of diabetes e.g. SIGN, NICE NSF's, Clinical Governance	Diab TT01 Diab GA1 Diab GA2	Core 2	1
Generic Skills			
Competency	NOS Indicator	KSF Dimension	KSF Level
Be able to communicate with patients the benefits of good glycaemia control, self care and monitoring to prevent complications	GEN22	Core 1	1
Generic Behaviours			
Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate with the individual in an appropriate manner, recognizing the stressful nature of the potential impact of diabetes	GEN22 CHS48	Core 1	1

DIMENSION 2: Screening

Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate clearly to the individual what is involved in the screening process	GEN22	Core 1	2
Demonstrate the ability to carry out a basic diabetic foot screening and record the information on the SCI DC system where available.	Diab HA3 Diab HA3 Diab HA4	HWB6	2
Provide up to date verbal and written advice relating to the risk status resulting from foot screening.	Diab HA3 GEN14 Diab HA4	Core 1	2
Explain the results of the screening to the individual and carer in an appropriate manner and a suitable level and pace.	GEN22	Core 1	2
Arrange further assessment when required and make appropriate referral.	Diab TT01 CHS99	HWB7	2

DIMENSION 3: Dermatology in Diabetes Mellitus

LEVEL

4

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands and recognises the need for referral when a skin abnormality is observed	TT01	Core 2	1

DIMENSION 7: Preventative Ulcerative Care

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress and how to assess its severity in relation to preventing foot ulceration.	Diab HA4 Diab HA3	HWB6	2
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of foot ulceration.	CHS48 Gen22	Core1	2
Understand the necessity for urgent treatment and referral in the event of suspected ulceration.	Diab HA4Diab HA3	HWB6	2

DIMENSION 10: Health Improvement

Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of diabetes	PE	Core 2	1
Demonstrates an understanding of the importance and effects of patient education and self management	CM D5 CHS70	Core 2	1
Demonstrate a knowledge of the availability of support mechanisms such as Diabetes UK, My Diabetes My Way (www.mydiabetesmyway.org.uk) to assist the individual in managing their condition	Diab DA4 GEN14 HSC330	HWB4	1

DIMENSION 1: Diabetes Practitioner Generic Knowledge, Skills and Behaviours

Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of the theories of the causes of diabetes	Diab GA1	Core 2	2
Understands the impact of disease progression in diabetes	Diab GA1	Core 2	2
Understands different non-pharmacological and pharmacological approaches to diabetes management	Diab HA1	HWB7	2
Knowledge of the signs and symptoms of diabetes, including WHO criteria for diagnosis	Diab TT01	Core 2	2
A knowledge of normal and abnormal blood glucose and HbA1c values and how to monitor them	CHS19 HSC224 Diab GA2	Core 2	2
Understands National Guidelines and NHS frameworks for the transfer and management of diabetes (e.g. SIGN, NICE, NSF's, Clinical Governance, IT strategy)	Diab TT01 Diab GA1 Diab GA2	Core 2	2
Generic Skills			
Competency	NOS Indicator	KSF Dimension	KSF Level
Assess through discussion the individuals understanding and reinforce the benefits of good glycaemic control, self care and monitoring to prevent complications	Diab HA13 PE8 GEN14	HWB6	3
Generic Behaviours			
Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate with the individual in an appropriate manner, recognizing the stressful nature of the potential impact of diabetes	GEN22 CHS48	Core 1	2

DIMENSION 2: Screening and Assessment

LEVEL **5**

Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate clearly to the individual what is involved in the screening process	GEN22	Core 1	2
Demonstrate the ability to carry out a basic diabetic foot screening and record the information on the SCI DC system where available.	Diab HA3 Diab HA4	HWB6	2
Communicate clearly to the individual and carer in an appropriate manner and a suitable level and pace	Diab HA3 GEN14 Diab HA4	Core 1	2
Provide up to date verbal and written advice relating to the risk status resulting from foot screening.	GEN14	Core 1	2
Carry out further assessment when required and make any appropriate referral for specialist intervention.	Diab TT01 CHS99	HWB7	2

DIMENSION 3: Dermatology in Diabetes Mellitus

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands and recognises dermato-pathologies in diabetes	CHS40	Core 2	2

DIMENSION 5: Radiological Knowledge

Competency	NOS Indicator	KSF Dimension	KSF Level
Has the ability to request and interpret relevant diagnostic tests in the management of diabetes	CHS83	HWB6	3
Understands different radiological and non-radiological methods of assessment	CHS109	HWB6	2
Has the ability to interpret radiological reports	HSC43 HSC23	Core 2	2
Keeps up-to-date with any changes in clinical practice which may influence the requesting or interpreting of radiological images	CHS83	HWB6	2

DIMENSION 6: Painful Diabetic Peripheral Neuropathy

LEVEL

5

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates a basic knowledge and recognition of: 1. The causes of painful diabetic peripheral neuropathy 2. The signs and symptoms of painful diabetic peripheral neuropathy 3. Typical progression of painful diabetic peripheral neuropathy	DF01 EUSC1	HWB6	2
Demonstrates a basic knowledge of the treatment modalities available for painful diabetic peripheral neuropathy based on the current evidence base	CHS179	HWB7	2
Is able to recognise painful diabetic peripheral neuropathy and refer appropriately	CHS40 CHS118 CHS99	HWB6	2
Demonstrates the ability to differentiate between painful diabetic peripheral neuropathy and other painful symptoms and arrange further tests if required	CHS40 CHS118 CHS99	HWB6	2

DIMENSION 7: Preventative Ulcerative Care

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress and how to assess its severity in relation to preventing foot ulceration	Diab HA4 Diab HA3	HWB6	3
Ask appropriate questions that will enable you to assess whether the individual is aware that they are at risk of developing foot ulceration.	GEN22	Core1	3
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of foot ulceration.	CHS48 Gen22	Core1	3
Demonstrate the ability to carry out an assessment of foot/feet This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma or increased pressures	Diab HA4 Diab HA3	HWB6	3
Provide up to date verbal and written advice relating to prevention of foot ulceration	GEN14 Diab HA4 Diab HA3	Core 1	2
Assess the individual's understanding of the Information that you have given them, and where necessary confirm the main areas that contribute to their risk of ulceration.	GEN22	Core1	3
Understand the necessity for urgent treatment and referral in the event of suspected ulceration.	DiabHA4 Diab HA3	HWB6	3

DIMENSION 8: Wound Management

LEVEL **5**

General			
Competency	NOS Indicator	KSF Dimension	KSF Level
A working knowledge of local/national guidelines for diabetes Wound Management	CHS 12	Core 2	3
Demonstrates a knowledge of the signs & symptoms relevant to diabetic foot ulceration	Diab DF03	HWB6 Core 2	3
Demonstrates a basic understanding of the wound healing process and potential complications	CHS40 CHS44	HWB6 Core 2	2
Demonstrates a basic understanding of the psychological impact of active diabetic foot disease	CM D5 CHS70	HWB6 Core 2	2
Demonstrate the ability to recognise and classify active foot ulceration. This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma, increased pressures, extent and degree of infection.	Diab DF02 Diab HA4 Diab HA3	HWB6	2
Debridement			
Basic understanding of the principles behind debridement and management of the wound bed to optimise the process of healing	CHS12	Core 2	2
Infection Control			
Demonstrates a clinical ability to recognise the signs and symptoms of wound infection.	PCS18 Diab DF03 CHS14	HWB6	2
Dressing			
Is able to safely remove and replace simple dressings when needed for orthotic assessment and treatment to be optimised	CHS12	HWB7	2
Demonstrate a basic knowledge of the availability of dressing products, their mode of action and appropriate usage	Diab DF03	Core 2	2

DIMENSION 9: Post Ulcerative Management

Competency	NOS Indicator	KSF Dimension	KSF Level
Ability to provide specialist education for the patient and their carers in relation to prevention of re- ulceration.	PE8 PE7 PE6 PE3	HWB1	2
Assists in the implementation of the recommended care plan to prevent recurrence of ulceration	PE4	HWB7	2
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of further foot ulceration	GEN22	Core 1	3

DIMENSION 10: Health Improvement

LEVEL **5**

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates a critical understanding of the importance and effects of patient education and self management	PE	Core 2	2
Demonstrates a knowledge of how to develop detailed personal action plans to achieve and maintain goals for individuals who have an increased risk of developing diabetic foot complications	CM D5 CHS70	Core 2	2
Demonstrate a knowledge of the availability of support mechanisms such as Diabetes UK, My Diabetes My Way (www.mydiabetesmyway.org.uk) to assist the individual in managing their condition	Diab DA4GEN14 HSC330	HWB4	2

DIMENSION 11: Charcot Neuroarthropathy

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrate the ability to recognise patients who have predisposing risk factors for Charcot foot disease	Diab HA4 Diab HA3 CHS 40	HWB6	2
Demonstrate the ability to recognise acute Charcot neuroarthropathy	Diab HA4 CHS40	HWB6	3
Demonstrate the need for appropriate further investigation and intervention of suspected Charcot neuroarthropathy	CHS99 Diab HA1 Diab HA4	HWB7	3
Demonstrates knowledge of the importance of biomechanical pressure relieving strategies in the management of Charcot Neuroarthropathy and be able to apply these.	HSC43	HWB6 Core 2	3 3
Assist in the implementation of a recommended care plan for Charcot neuroarthropathy	CHS41 Diab HA1 Diab HA4 CHS88	HWB7	3
Ability to communicate to patient and/or carer the implications of Charcot neuroarthropathy	GEN22	Core 1	4
Understands the different radiological and non radiological methods of assessment	CHS38	HWB6	4
Demonstrate the ability to make a differential diagnosis between charcot and other acute diabetic foot problems	CHS40	HWB6	3
Demonstrate the ability to select and evaluate the most appropriate technique to immobilize the affected joint(s)	CHS44	HWB7	3

Dimension 12: Research and Audit

LEVEL **5**

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates a knowledge of the current research surrounding Diabetic Foot Disease	HSC43 HSC23	Core 2	2

Dimension 13: Leadership and Service Development

Competency	NOS Indicator	KSF Dimension	KSF Level
Is aware of and works within local diabetes service requirements	GEN63 M&L B8	Core 4	1

DIMENSION 14: Orthotic Intervention

General			
Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
Knowledge of tissue mechanics and the effect of shear forces.	HSC23	HWB 6 HWB7 HWB9	2
Knowledge of footwear adaptations and how they influence biomechanics in gait	HSC23	HWB 6 HWB7 HWB9	2
Generic Skills			
Interpret the diabetic risk classification system in order to formulate an appropriate orthotic prescription.	CHS222	HWB 6 HWB9	4
Construct a care plan which will include regular review to identify patient's level of use and concordance, wear of materials and the need for replacement.	GEN39 CHS44 CHS53 HA1	HWB 6 HWB7 HWB9	4
In development of a care plan consider cosmesis of orthoses, without compromising function, and understanding its importance in achieving the best possible concordance.	GEN39 CHS44 CHS53 CHS222 HA1	HWB 6 HWB7 HWB9	4
Provide relevant and accurate verbal and written patient information with any orthosis supplied.	GEN14 CHS55	Core 1 HWB7 HWB9	2
Identify biomechanical risk factors relating to friction, shear and pressure risk and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB9	3

Prevention and Protection			
Generic Knowledge			
Knowledge of how to assess for total contact insoles	CHS120 HSC23	HWB 6	3
Generic Skills			
Use biomechanical pressure relieving strategies to minimise the risk of foot ulceration	CHS222 CHS223 Diab DF02	HWB 7 HWB9	3
Use observational gait analysis to assess total body biomechanics and to decide on the impact this may have on risk of ulceration and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB 7	2
Active Ulceration & Temporary Pressure Relief			
Generic Knowledge			
Knowledge of a wide range of pressure relieving devices and be able to choose the correct one based on patients needs, site of ulcer and mobility status.	CHS222 RT21 CHS120	HWB 7 HWB 6 HWB 9	4
Knowledge of how to refer patient to an appropriate HCP for assessment for a walking aid	GEN39 CHS99	HWB 6	2
Knowledge of the biomechanics of foot amputation, limb amputation, prosthetics and the post operative rehabilitation process.	HSC23	HWB 6 HWB 7	2
Knowledge of a matrix or algorithm for prescription of footwear in association with the patient's risk assessment.	HSC23	HWB 6 HWB 7	2
Knowledge of the components and materials associated with the manufacture of diabetic footwear and foot orthoses.	RT21 HSC23	HWB 6 HWB 7	2
Knowledge of how to refer patient to an appropriate HCP for assessment for amputation	GEN39 CHS99	HWB 6	2
Knowledge of the technology used in foot and pressure measurement.	RT21 HSC23	HWB 6	2
Generic Skills			
Assess for temporary pressure relief to offload active ulceration and optimise wound healing.	CHS222 CHS120 Diab DF02	HWB 6 HWB 7	2
Assess the patients mobility status and make decisions on ability to cope with different types of temporary pressure relief available.	CHS120	HWB 6 HWB 7	3
Provide basic gait training to make sure patient is stable on walking with temporary pressure relief orthosis.	CHS223 CHS62	HWB 7 HWB 4	3
Contribute to the decision making process for elective amputation	GEN14 CHS55 GEN39 AC3 CHS44	HWB 6 HWB 7	3

Apply appropriate pressure relieving orthoses, including the application of the varieties of total contact or wound healing casts.	CHS222 CHS120 CHS44 Diab DF02	HWB 7 HWB 6 HWB 9	3
Carry out modifications to stock or custom made orthoses as needed	RT9	HWB 7 HWB 6 HWB 9	3
Apply practical techniques for the management of pressure and shear in wound healing such as total contact casting	CHS223 GEN4 CHS44 Diab DF02	HWB 9 HWB 7	4
Formulate a prescription for footwear considering all risk factors utilising appropriate materials.	CHS222 Diab DF01 CHS120	HWB 6	4
Measure for footwear according to the British standard	CHS44	HWB 7	4
Monitor the effectiveness of temporary pressure relief and alter the care plan or orthosis as required	RT9 CHS120	HWB 9 HWB 6 HWB 7	4
Post Ulcerative Management			
Generic Knowledge			
Have knowledge of when the use of a pressure monitoring system is indicated to diagnose more complex biomechanical problems.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Develop a long term orthotic treatment plan and be able to recognise when modification to the orthotic prescription is required.	CHS120 CHS44	HWB 9 HWB 6 HWB 7	3
Identify the cause of previous ulceration and provide patient education to prevent further trauma.	GEN14 CHS55	Core 1 HWB 1 HWB 7	3
Identify wear and pressure on existing orthoses and change orthosis prescription accordingly	CHS222 CHS120 CHS44	HWB 7 HWB 6	4
Management of Charcot Foot			
Generic Knowledge			
Knowledge of identifiable biomechanical changes associated with Charcot.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Apply a cast walker with a total contact insole, make this irremovable and explain the importance of concordance with this to the patient or Apply a total contact cast to immobilise an active Charcot foot	CHS223 RT21 GEN14 CHS55	HWB 9 HWB 7	4
Develop a care plan to prevent ulceration due to altered biomechanics of the foot after Charcot	CHS44 CHS120	HWB 6 HWB 7	4
Design an orthosis to manage the biomechanical changes associated with chronic Charcot foot disorders.	CHS222	HWB 6 HWB 9	4

Senior Practitioners/Specialist Practitioners LEVEL

6

DIMENSION 1: Diabetes Practitioner Knowledge, Skills and Behaviours

Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
General knowledge of the theories of the causes of diabetes	Diab GA1	Core 2	2
Understands the impact of disease progression in diabetes	Diab GA1	Core 2	2
Understands different non-pharmacological and pharmacological approaches to diabetes management	Diab HA1	HWB7	2
Knowledge of the signs and symptoms of diabetes, including WHO criteria for diagnosis	Diab TT01	Core 2	2
A knowledge of normal and abnormal blood glucose and HbA1c values and how to monitor them	CHS19 HSC224 Diab GA2	Core 2	2
Understands National Guidelines and NHS frameworks for the transfer and management of diabetes (e.g. SIGN, NICE, NSF's, Clinical Governance, IT strategy)	Diab TT01 Diab GA1 Diab GA2	Core 2	2
Generic Skills			
Competency	NOS Indicator	KSF Dimension	KSF Level
Assess through discussion the individuals understanding and reinforce the benefits of self care and monitoring to prevent complications	Diab HA13 PE8 GEN14	HWB6	3
Generic Behaviours			
Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate with the individual in an appropriate manner, recognising the stressful nature of the potential impact of diabetes	GEN22 CHS48	Core 1	3

DIMENSION 2: Screening and Assessment

Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate clearly to the individual what is involved in the screening process	GEN22	Core 1	2
Demonstrate the ability to carry out a basic diabetic foot screening and record the information on the SCI DC system where available.	Diab A3 Diab HA3 Diab HA4	HWB6	2
Provide up to date verbal and written advice relating to the risk status resulting from foot screening.	Diab HA3 GEN14 Diab HA4	Core 1	2

Communicate clearly to the individual and carer in an appropriate manner and a suitable level and pace	GEN22	Core 1	2
Carry out further assessment when required and make any appropriate referral for specialist intervention.	Diab TT01 CHS99	HWB7	2

DIMENSION 3: Dermatology in Diabetes Mellitus

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands and recognises dermato-pathologies in diabetes	CHS40	Core 2	2

DIMENSION 5: Radiological Knowledge

Competency	NOS Indicator	KSF Dimension	KSF Level
Has the ability to request and interpret relevant diagnostic tests in the management of diabetes	CHS83	HWB6	3
Understands different radiological methods of assessment	CHS109	HWB6	2
Keeps up-to-date with any changes in clinical practice which may influence the requesting or interpreting of radiological images	HSC43 HSC23	Core 2	2
Has the ability to interpret radiological reports	CHS83	HWB6	2

DIMENSION 6: Painful Diabetic Peripheral Neuropathy

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates a basic knowledge and recognition of: 1. The causes of painful diabetic peripheral neuropathy 2. The signs and symptoms of painful diabetic peripheral neuropathy 3. Typical progression of painful diabetic peripheral neuropathy	Diab DF01 EUSC1	HWB6	2
Demonstrates a basic knowledge of the treatment modalities available for painful diabetic peripheral neuropathy based on the current evidence base	CHS179	HWB7	2
Is able to recognise painful diabetic peripheral neuropathy and refer appropriately	CHS40 CHS118 CHS99	HWB6	2
Demonstrates the ability to differentiate between painful diabetic peripheral neuropathy and other painful symptoms and arrange further tests if required	CHS40 CHS118 CHS99	HWB6	2

DIMENSION 7: Preventative Ulcerative Care

LEVEL **6**

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress and how to assess its severity in relation to preventing foot ulceration.	Diab HA4 Diab HA3	HWB6	3
Ask appropriate questions that will enable you to assess whether the individual is aware that they are at risk of developing foot ulceration.	GEN22	Core1	3
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of foot ulceration.	CHS48 Gen22	Core1	3
Demonstrate the ability to carry out an assessment of foot/feet This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma or increased pressures	Diab HA4 Diab HA3	HWB6	3
Provide up to date verbal and written advice relating to prevention of foot ulceration	GEN14 Diab HA4 Diab HA3	Core 1	2
Assess the individual's understanding of the information that you have given them, and where necessary confirm the main areas that contribute to their risk of ulceration.	GEN22	Core1	3
Understand the necessity for urgent treatment and referral in the event of suspected ulceration.	Diab HA4 Diab HA3	HWB6	3

DIMENSION 8: Wound Management

General			
Competency	NOS Indicator	KSF Dimension	KSF Level
A working knowledge of local/national guidelines for diabetes Wound Management	CHS 12	Core 2	3
Demonstrates a knowledge of the signs & symptoms relevant to diabetic foot ulceration	Diab DF03	HWB6 Core 2	3 3
Demonstrates an in-depth understanding of the wound healing process and potential complications	CHS40 CHS44	HWB6 Core 2	2 2
An understanding of the psychological impact of active diabetic foot disease	CM D5 CHS70	HWB6 Core 2	3 3
Demonstrate the ability to recognise and classify active foot ulceration. This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma, increased pressures, extent and degree of infection.	Diab DF02 Diab HA4 Diab HA3	HWB6	3
Debridement			
Understand the principles behind debridement and management of the wound bed to optimise the process of healing	CHS12	Core 2	2

Infection Control			
Demonstrates a clinical ability to recognise the signs and symptoms of wound infection	PCS18 Diab DF03 CHS14	HWB6	3
Pressure Relief			
Maintains an up-to-date knowledge of biomechanical pressure relieving strategies and their implementation	CHS12	HWB6 Core 2	3 3
Dressing			
Is able to safely remove and replace simple dressings when needed for orthotic assessment and treatment to be optimised	CHS12	HWB7	2
Demonstrate a basic knowledge of the availability of dressing products, their mode of action and appropriate usage	Diab DF03	Core 2	2

DIMENSION 9: Post Ulcerative Management

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress, pathological changes and how to assess the severity in relation to preventing foot re-ulceration.	Diab DF02 Diab HA4 Diab HA3	HWB6 Core 2	3 3
Ability to provide specialist education for the patient and their usual carers in relation to prevention of re- ulceration	PE8 PE7 PE6 PE3	HWB1	2
Assists in the implementation of the recommended care plan to prevent recurrence of ulceration.	PE4	HWB7	2
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of further foot ulceration	GEN22	Core 1	3

DIMENSION 10: Health Improvement

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates a critical understanding of the importance and effects of patient education and self management	PE	Core 2	2
Demonstrates an understanding of the psychological impact of diabetes, at diagnosis and in the long term	CM D5 CHS70	Core 2	2
Demonstrate a knowledge of the availability of support mechanisms such as Diabetes UK, My Diabetes My Way (www.mydiabetesmyway.org.uk) to assist the individual in managing their condition	DiabA4 GEN14 HSC330	HWB4	2

DIMENSION 11: Charcot Neuroarthropathy

LEVEL

6

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrate the ability to recognise patients who have predisposing risk factors for Charcot foot disease	Diab HA4 Diab HA3 CHS 40	HWB6	2
Demonstrate the ability to recognise the acute Charcot neuroarthropathy	Diab HA4 CHS40	HWB6	3
Demonstrate the need for appropriate further investigation and intervention of suspected Charcot neuroarthropathy	CHS99 Diab HA1 Diab HA4	HWB7	3
Demonstrates knowledge of the importance of biomechanical pressure relieving strategies in the management of Charcot neuroarthropathy	HSC43	HWB6 Core 2	3 3
Assist in the implementation of the recommended care plan for Charcot neuroarthropathy	CHS41 Diab HA1 Diab HA4 CHS88	HWB7	3
Ability to communicate to patient and/or carer the implications of Charcot neuroarthropathy	GEN22	Core 1	4
Understands the different radiological and non radiological methods of assessment	CHS38	HWB6	4
Demonstrate the ability to make a differential diagnosis between charcot and other acute diabetic foot problems	CHS40	HWB6	4
Demonstrate the ability to select and evaluate the most appropriate technique to immobilize the affected joint(s)	CHS44	HWB7	3

Dimension 12: Research and Audit

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates a knowledge of the current research surrounding Diabetic Foot Disease	HSC43 HSC23	Core 2	3

Dimension 13: Leadership and Service Development

Competency	NOS Indicator	KSF Dimension	KSF Level
Is aware of and works within local diabetes service requirements	GEN63 M&L B8	Core 4	2

DIMENSION 14: Orthotic Intervention

LEVEL **6**

General			
Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
Knowledge of tissue mechanics and the effect of shear forces.	HSC23	HWB 6 HWB7 HWB9	2
Knowledge of footwear adaptations and how they influence biomechanics in gait	HSC23	HWB 6 HWB7 HWB9	2
Generic Skills			
Interpret the diabetic risk classification system in order to formulate an appropriate orthotic prescription.	CHS222	HWB 6 HWB9	4
Construct a care plan which will include regular review to identify patient's level of use and concordance, wear of materials and the need for replacement.	GEN39 CHS44 CHS53 HA1	HWB 6 HWB7 HWB9	4
In development of a care plan consider cosmesis of orthoses, without compromising function, and understanding its importance in achieving the best possible concordance.	GEN39 CHS44 CHS53 CHS222 HA1	HWB 6 HWB7 HWB9	4
Provide relevant and accurate verbal and written patient information with any orthosis supplied.	GEN14 CHS55	Core 1 HWB7 HWB9	2
Identify biomechanical risk factors relating to friction, shear and pressure risk and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB9	3
Prevention and Protection			
Generic Knowledge			
Knowledge of how to assess for total contact insoles	CHS120 HSC23	HWB 6	3
Generic Skills			
Use biomechanical pressure relieving strategies to minimise the risk of foot ulceration	CHS222 CHS223 Diab DF02	HWB 7 HWB9	3
Use observational gait analysis to assess total body biomechanics and to decide on the impact this may have on risk of ulceration and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB 7	2
Active Ulceration & Temporary Pressure Relief			
Generic Knowledge			
Knowledge of a wide range of pressure relieving devices and be able to choose the correct one based on patients needs, site of ulcer and mobility status.	CHS222 RT21 CHS120	HWB 7 HWB 6 HWB 9	4
Knowledge of how to refer patient to an appropriate HCP for assessment for a walking aid	GEN39 CHS99	HWB 6	2

Knowledge of the biomechanics of foot amputation, limb amputation, prosthetics and the post operative rehabilitation process.	HSC23	HWB 6 HWB 7	2
Knowledge of a matrix or algorithm for prescription of footwear in association with the patient's risk assessment.	HSC23	HWB 6 HWB 7	2
Knowledge of the components and materials associated with the manufacture of diabetic footwear and foot orthoses.	RT21 HSC23	HWB 6 HWB 7	2
Knowledge of how to refer patient to an appropriate HCP for assessment for amputation	GEN39 CHS99	HWB 6	2
Knowledge of the technology used in foot and pressure measurement.	RT21 HSC23	HWB 6	2
Generic Skills			
Assess for temporary pressure relief to offload active ulceration and optimise wound healing.	CHS222 CHS120 DF02	HWB 6 HWB 7	2
Assess the patients mobility status and make decisions on ability to cope with different types of temporary pressure relief available.	CHS120	HWB 6 HWB 7	3
Provide basic gait training to make sure patient is stable on walking with temporary pressure relief orthosis.	CHS223 CHS62	HWB 7 HWB 4	3
Contribute to the decision making process for elective amputation	GEN14 CHS55 GEN39 AC3 CHS44	HWB 6 HWB 7	3
Apply appropriate pressure relieving orthoses, including the application of the varieties of total contact or wound healing casts.	CHS222 CHS120 CHS44 Diab DF02	HWB 7 HWB 6 HWB 9	3
Carry out modifications to stock or custom made orthoses as needed	RT9	HWB 7 HWB 6 HWB 9	3
Apply practical techniques for the management of pressure and shear in wound healing such as total contact casting	CHS223 GEN4 CHS44 Diab DF02	HWB 9 HWB 7	4
Formulate a prescription for footwear considering all risk factors utilising appropriate materials.	CHS222 DF01 CHS120	HWB 6	4
Measure for footwear according to the British standard	CHS44	HWB 7	4
Monitor the effectiveness of temporary pressure relief and alter the care plan or orthosis as required	RT9 CHS120	HWB 9 HWB 6 HWB 7	4

Post Ulcerative Management			
Generic Knowledge			
Have knowledge of when the use of a pressure monitoring system is indicated to diagnose more complex biomechanical problems.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Develop a long term orthotic treatment plan and be able to recognise when modification to the orthotic prescription is required.	CHS120 CHS44	HWB 9 HWB 6 HWB 7	3
Identify the cause of previous ulceration and provide patient education to prevent further trauma.	GEN14 CHS55	Core 1 HWB 1 HWB 7	3
Identify wear and pressure on existing orthoses and change orthosis prescription accordingly	CHS222 CHS120 CHS44	HWB 7 HWB 6	4
Management of Charcot Foot			
Generic Knowledge			
Knowledge of identifiable biomechanical changes associated with Charcot.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Apply a cast walker with a total contact insole, make this irremovable and explain the importance of concordance with this to the patient or Apply a total contact cast to immobilise an active Charcot foot	CHS223 RT21 GEN14 CHS55	HWB 9 HWB 7	4
Develop a care plan to prevent ulceration due to altered biomechanics of the foot after Charcot	CHS44 CHS120	HWB 6 HWB 7	4
Design an orthosis to manage the biomechanical changes associated with chronic Charcot foot disorders.	CHS222	HWB 6 HWB 9	4

DIMENSION 1: Diabetes Practitioner Knowledge, Skills and Behaviours

Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
In-depth knowledge of the theories of causes of diabetes	Diab GA1	Core 2	2
In-depth understanding of the impact of disease progression in diabetes	Diab GA1	Core 2	2
Understanding of different non-pharmacological and pharmacological approaches to diabetes management	Diab HA1	HWB7	2
In-depth knowledge of the signs and symptoms of diabetes, including WHO criteria for diagnosis	Diab TT01	Core 2	2
A knowledge of normal and abnormal blood glucose and HbA1c values and how to monitor them	HSC224 Diab GA2	Core 2	2
Understands National Guidelines and NHS frameworks for the transfer and management of diabetes (e.g. SIGN, NICE, NSF's, Clinical Governance, IT strategy)	Diab TT01 Diab GA1 Diab GA2	Core 2	2
Generic Skills			
Assess through discussion the individuals understanding and reinforce the benefits of self care and monitoring to prevent complications	Diab HA13 PE8 GEN14	HWB6	3
Generic Behaviours			
Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate with the individual in an appropriate manner, recognising the stressful nature of the potential impact of diabetes	GEN22 CHS48	Core 1	3

DIMENSION 2: Screening and Assessment

Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate clearly to the individual what is involved in the screening process	GEN22	Core 1	2
Demonstrate the ability to carry out a basic diabetic foot screening and record the information on the SCI DC system where available.	Diab A3 Diab HA3 Diab HA4	HWB6	2
Provide up to date verbal and written advice relating to the risk status resulting from foot screening.	Diab HA3 GEN14 Diab HA4	Core 1	2
Explain the results of the screening to the individual and carer in an appropriate manner and a suitable level and pace.	GEN22	Core 1	2

Carry out further assessment when required and make any appropriate referral for specialist intervention.	Diab TT01 CHS99	HWB7	2
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DIMENSION 3: Dermatology in Diabetes Mellitus

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands and recognises dermato-pathologies in diabetes	CHS40	Core 2	2

DIMENSION 5: Radiological Knowledge

Competency	NOS Indicator	KSF Dimension	KSF Level
Has the ability to request and interpret relevant diagnostic tests in the management of diabetes	CHS83	HWB6	3
Has completed an IRMER course	HSC23	HWB3	3
Understands different radiological methods of assessment	CHS38	HWB6	3
Demonstrates the ability to request a radiological examination with adequate, up-to-date knowledge of its actions, indications, contra-indications, interactions, cautions, dose and side-effects	CHS99	HWB7	3
Develops and works within local frameworks for radiological requests and uses as appropriate (e.g. PGDs, protocols and guidelines)	GEN59	HWB6	3
Has the ability to interpret radiological reports	CHS83	HWB8	3
Demonstrates the ability to explain the nature of the patient's condition and the rationale behind, potential risks and benefits, of the radiological test	GEN22	HWB1	3
Demonstrates the ability to communicate the result of the test in terms the patient can understand	GEN22	Core 1	3
Makes radiological requests often enough to maintain confidence and competence	GEN63	Core 2	3
Keeps up-to-date with any changes in clinical practice which may influence the requesting or interpreting of radiological images	HSC23 HSC43	Core 2	3

DIMENSION 6: Painful Diabetic Peripheral Neuropathy

Level

7

Competency	NOS Indicator	KSF Dimension	KSF Level
Knowledge of the causes of painful diabetes peripheral neuropathy	DF01 EUSC1	HWB6	3
Knowledge of the signs and symptoms of painful diabetic peripheral neuropathy	CHS40 DF01 EUSC1	HWB6	3
Knowledge of the typical progression of painful diabetic peripheral neuropathy	CHS40	HWB6	3
Knowledge of the treatment modalities available that are based on the current evidence base	CHS62 CHS120 CHS179	HWB7	3
Demonstrates the ability to differentiate between painful diabetic peripheral neuropathy and other painful symptoms	CHS40	HWB6	3
Help the individual and their carer(s) understand what specific actions they can take to manage symptoms of painful diabetic peripheral neuropathy	CHS179 GEN14 GEN22 GEN62	HWB1	3
Provide information on painful diabetic peripheral neuropathy in a suitable form for the individual and carer, to ensure their understanding and engagement in their treatment	CHS179 GEN14 GEN62	Core 1	3

DIMENSION 7: Preventative Ulcerative Care

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress and how to assess its severity in relation to preventing foot ulceration.	Diab HA4 Diab HA3	HWB6	4
Ask appropriate questions that will enable you to assess whether the individual is aware that they are at risk of developing foot ulceration.	GEN22	Core1	3
Explain clearly to the individual what is involved in the assessment and obtain the individual's informed consent to the assessment process.	GEN22 CHS76	Core 1	4
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of foot ulceration.	CHS48 Gen22	Core1	3
Demonstrate the ability to carry out an assessment of foot/feet in order to determine the underlying cause of ulceration. This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma or increased pressures	Diab HA4 Diab HA3	HWB6	3
Provide up to date verbal and written advice relating to prevention of foot ulceration	GEN14 Diab HA4 Diab HA3	Core 1	2

Assess the individual's understanding of the information that you have given them, and where necessary confirm the main areas that contribute to their risk of ulceration.	GEN22	Core1	3
Understand the necessity for urgent treatment and referral in the event of suspected ulceration.	Diab A4 Diab HA3	HWB6	3

DIMENSION 8: Wound Management

General			
Competency	NOS Indicator	KSF Dimension	KSF Level
Has a working knowledge of national guidelines for diabetes Wound Management	CHS 12	Core 2	3
Demonstrates a knowledge of the signs & symptoms relevant to diabetic foot ulceration	Diab DF03	HWB6 Core 2	3
Demonstrates an in-depth understanding of the wound healing process and potential complications	CHS40 CHS44	HWB6 Core 2	2
An in-depth understanding of the psychological impact of active diabetic foot disease	CM D5 CHS70	HWB6 Core 2	3
Demonstrate the ability to recognise and classify active foot ulceration. This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma, increased pressures, extent and degree of infection.	Diab DF02 Diab HA4 Diab HA3	HWB6	3
Debridement			
Understand the principles behind debridement and management of the wound bed to optimise the process of healing	CHS12	Core 2	2
Basic knowledge of advanced Wound Management techniques including larva and hydro surgical debridement.	CHS12	Core 2	2
Infection Control			
Demonstrates a clinical ability to recognise the signs and symptoms of wound infection	PCS18 Diab DF03 CHS14	HWB6	3
Dressing			
Is able to safely remove and replace simple dressings when needed for orthotic assessment and treatment to be optimised	CHS12	HWB6 Core 2	3
Demonstrate a basic knowledge of the availability of dressing products, their mode of action and appropriate usage	CHS12	Core 2	3

DIMENSION 9: Post Ulcerative Management

Level **7**

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress, pathological changes and how to assess the severity in relation to preventing foot re-ulceration.	Diab DF02 Diab HA4 Diab HA3	HWB6 Core 2	3 3
Ability to provide specialist education for the patient and their carers in relation to prevention of re- ulceration	PE8 PE7 PE6 PE3	HWB1	3
Establish the cause of previous ulceration to develop a care plan and implement preventative strategies	PE4	HWB7	3
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of further foot ulceration	GEN22	Core 1	3

DIMENSION 10: Health Improvement

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates a critical understanding of the importance and effects of patient education and self management	PE	Core 2	2
Demonstrates an understanding of the psychological impact of diabetes, at diagnosis and in the long term	CM D5 CHS70	Core 2	2
Demonstrate a knowledge of the availability of support mechanisms such as Diabetes UK, My Diabetes My Way (www.mydiabetesmyway.org.uk) to assist the individual in managing their condition	Diab DA4 GEN14 HSC330	HWB4	2

DIMENSION 11: Charcot Neuroarthropathy

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrate the ability to recognise patients who have predisposing risk factors for Charcot foot disease	Diab HA4 Diab HA3 CHS 40	HWB6	2
Demonstrate the ability to recognise the acute Charcot neuroarthropathy	Diab HA4 CHS40	HWB6	3
Demonstrate the need for appropriate further investigation and intervention of suspected Charcot neuroarthropathy	CHS99 Diab HA1 Diab HA4	HWB7	3
Demonstrates knowledge of biomechanical pressure relieving strategies and their implementation in the management of Charcot neuroarthropathy	HSC43	HWB6 Core 2	3 3

Ability to communicate to the patient and/or carer the nature and implications of Charcot neuroarthropathy	GEN22	Core 1	4
Understands the different radiological and non radiological methods of assessment	CHS38	HWB6	4
Demonstrate the ability to make a differential diagnosis between charcot and other acute diabetic foot problems	CHS40	HWB6	4
Demonstrate the ability to select and evaluate the most appropriate technique to immobilize the affected joint(s)	CHS44	HWB7	3
Demonstrate knowledge of the most up to date pharmacological therapy for Charcot neuroarthropathy	HSC43 HSC23	HWB7	4
Demonstrate the ability to monitor the effectiveness of treatment and make changes where appropriate through the stages of the Charcot process	CHS47	HWB7	4
Demonstrate the ability to implement strategies for long term management of the stable Charcot neuroarthropathy	CHS173 CHS85	HWB7	4

Dimension 12: Research and Audit

Competency	NOS Indicator	KSF Dimension	KSF Level
Designs and runs clinical audits and contributes to current research on Diabetic foot disease where available	HSC43 HSC23	Core 2	4

Dimension 13: Leadership and Service Development

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates clinical leadership on Diabetes footcare within local Diabetes foot services	M&L B5 M&L B6	Core 4	3
To contribute to developing local diabetes services in line with local and national requirements	GEN63 M&L B8 M&L B1	Core 4	3
Awareness of resource limitations for local diabetes services	GEN55 M&L E1 M&L E2 M&L D6	Core 4	3

DIMENSION 14: Orthotic Intervention

Level **7**

General			
Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
Knowledge of tissue mechanics and the effect of shear forces.	HSC23	HWB 6 HWB7 HWB9	2
Knowledge of footwear adaptations and how they influence biomechanics in gait	HSC23	HWB 6 HWB7 HWB9	2
Generic Skills			
Interpret the diabetic risk classification system in order to formulate an appropriate orthotic prescription.	CHS222	HWB 6 HWB9	4
Construct a care plan which will include regular review to identify patient's level of use and concordance, wear of materials and the need for replacement.	GEN39 CHS44 CHS53 HA1	HWB 6 HWB7 HWB9	4
In development of a care plan consider cosmesis of orthoses, without compromising function, and understanding its importance in achieving the best possible concordance.	GEN39 CHS44 CHS53 CHS222 HA1	HWB 6 HWB7 HWB9	4
Provide relevant and accurate verbal and written patient information with any orthosis supplied.	GEN14 CHS55	Core 1 HWB7 HWB9	2
Identify biomechanical risk factors relating to friction, shear and pressure risk and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB9	3
Prevention and Protection			
Generic Knowledge			
Knowledge of how to assess for total contact insoles	CHS120 HSC23	HWB 6	3
Generic Skills			
Use biomechanical pressure relieving strategies to minimise the risk of foot ulceration	CHS222 CHS223 Diab DF02	HWB 7 HWB9	3
Use observational gait analysis to assess total body biomechanics and to decide on the impact this may have on risk of ulceration and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB 7	2
Active Ulceration & Temporary Pressure Relief			
Generic Knowledge			
Knowledge of a wide range of pressure relieving devices and be able to choose the correct one based on patients needs, site of ulcer and mobility status.	CHS222 RT21 CHS120	HWB 7 HWB 6 HWB 9	4
Knowledge of how to refer patient to an appropriate HCP for assessment for a walking aid	GEN39 CHS99	HWB 6	2

Knowledge of the biomechanics of foot amputation, limb amputation, prosthetics and the post operative rehabilitation process.	HSC23	HWB 6 HWB 7	2
Knowledge of a matrix or algorithm for prescription of footwear in association with the patient's risk assessment.	HSC23	HWB 6 HWB 7	2
Knowledge of the components and materials associated with the manufacture of diabetic footwear and foot orthoses.	RT21 HSC23	HWB 6 HWB 7	2
Knowledge of how to refer patient to an appropriate HCP for assessment for amputation	GEN39 CHS99	HWB 6	2
Knowledge of the technology used in foot and pressure measurement.	RT21 HSC23	HWB 6	2
Generic Skills			
Assess for temporary pressure relief to offload active ulceration and optimise wound healing.	CHS222 CHS120 Diab DF02	HWB 6 HWB 7	2
Assess the patients mobility status and make decisions on ability to cope with different types of temporary pressure relief available.	CHS120	HWB 6 HWB 7	3
Provide basic gait training to make sure patient is stable on walking with temporary pressure relief orthosis.	CHS223 CHS62	HWB 7 HWB 4	3
Contribute to the decision making process for elective amputation	GEN14 CHS55 GEN39 AC3 CHS44	HWB 6 HWB 7	3
Apply appropriate pressure relieving orthoses, including the application of the varieties of total contact or wound healing casts.	CHS222 CHS120 CHS44 Diab DF02	HWB 7 HWB 6 HWB 9	3
Carry out modifications to stock or custom made orthoses as needed	RT9	HWB 7 HWB 6 HWB 9	3
Apply practical techniques for the management of pressure and shear in wound healing such as total contact casting	CHS223 GEN4 CHS44 Diab DF02	HWB 9 HWB 7	4
Formulate a prescription for footwear considering all risk factors utilising appropriate materials.	CHS222 Diab DF01 CHS120	HWB 6	4
Measure for footwear according to the British standard	CHS44	HWB 7	4
Monitor the effectiveness of temporary pressure relief and alter the care plan or orthosis as required	RT9 CHS120	HWB 9 HWB 6 HWB 7	4

Post Ulcerative Management			
Generic Knowledge			
Have knowledge of when the use of a pressure monitoring system is indicated to diagnose more complex biomechanical problems.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Develop a long term orthotic treatment plan and be able to recognise when modification to the orthotic prescription is required.	CHS120 CHS44	HWB 9 HWB 6 HWB 7	3
Identify the cause of previous ulceration and provide patient education to prevent further trauma.	GEN14 CHS55	Core 1 HWB 1 HWB 7	3
Identify wear and pressure on existing orthoses and change orthosis prescription accordingly	CHS222 CHS120 CHS44	HWB 7 HWB 6	4
Management of Charcot Foot			
Generic Knowledge			
Knowledge of identifiable biomechanical changes associated with Charcot.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Apply a cast walker with a total contact insole, make this irremovable and explain the importance of concordance with this to the patient or Apply a total contact cast to immobilise an active Charcot foot	CHS223 RT21 GEN14 CHS55	HWB 9 HWB 7	4
Develop a care plan to prevent ulceration due to altered biomechanics of the foot after Charcot	CHS44 CHS120	HWB 6 HWB 7	4
Design an orthosis to manage the biomechanical changes associated with chronic Charcot foot disorders.	CHS222	HWB 6 HWB 9	4

DIMENSION 1: Diabetes Practitioner Knowledge, Skills and Behaviours

Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
In-depth knowledge of the theories of causes of diabetes	Diab GA1	Core 2	3
In-depth understanding of the impact of disease progression in diabetes	Diab GA1	Core 2	3
Understanding of different non-pharmacological and pharmacological approaches to diabetes management	Diab HA1	HWB7	3
Knowledge of the signs and symptoms of diabetes, including WHO criteria for diagnosis	Diab TT01	Core 2	3
In-depth knowledge of normal and abnormal blood glucose and HbA1c values and how to monitor them	HSC224 Diab GA2	Core 2	3
Provides leadership in the formation and delivery of National Guidelines and NHS frameworks (e.g. SIGN, NICE, NSFs, Clinical Governance, IT strategy)	Diab GA1 Diab GA2 B1 B6	Core 2	4
Generic Skills			
Competency	NOS Indicator	KSF Dimension	KSF Level
Assess through discussion the individual's understanding and reinforce the benefits of self care and monitoring to prevent complications	Diab HA13 PE8 GEN14	HWB6	4
Generic Behaviours			
Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate with the individual in an appropriate manner, recognising the stressful nature of the potential impact of diabetes	GEN22 CHS48	Core 1	4

DIMENSION 2: Screening and Assessment

Competency	NOS Indicator	KSF Dimension	KSF Level
Communicate clearly to the individual what is involved in the screening process	GEN22	Core 1	2
Demonstrate the ability to carry out a basic diabetic foot screening and record the information on the SCI DC system where available.	Diab HA3 Diab HA3 Diab HA4	HWB6	2

Provide up to date verbal and written advice relating to the risk status resulting from foot screening.	Diab HA3 GEN14 Diab HA4	Core 1	2
Explain the results of the screening to the individual and carer in an appropriate manner and a suitable level and pace.	GEN22	Core 1	2
Carry out further assessment when required and make any appropriate referral for specialist intervention.	Diab TT01 CHS99	HWB7	2

DIMENSION 3: Dermatology in Diabetes Mellitus

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands and recognises dermato-pathologies in diabetes	CHS40	Core 2	3

DIMENSION 5: Radiological Knowledge

Competency	NOS Indicator	KSF Dimension	KSF Level
Has the ability to request and interpret relevant diagnostic tests in the management of diabetes	CHS83	HWB6	3
Has completed an IRMER course	CHS83	HWB6	3
Understands different radiological methods of assessment	HSC23	HWB3	3
Demonstrates the ability to request a radiological examination with adequate, up-to-date knowledge of its actions, indications, contra-indications, interactions, cautions, dose and side-effects	CHS38	HWB6	4
Develops and works within local frameworks for radiological requests and uses as appropriate (e.g. PGDs, protocols and guidelines)	CHS99	HWB7	3
Has the ability to interpret radiological reports	GEN59	HWB6	4
Demonstrates the ability to explain the nature of the patient's condition and the rationale behind, potential risks and benefits, of the radiological test	CHS83	HWB8	4
Demonstrates the ability to communicate the result of the test in terms the patient can understand	GEN22	HWB1	4
Makes radiological requests often enough to maintain confidence and competence	GEN22	Core 1	4
Keeps up-to-date with advances in radiological practice	GEN63	Core 2	4

DIMENSION 6: Painful Diabetic Peripheral Neuropathy

LEVEL

8

Competency	NOS Indicator	KSF Dimension	KSF Level
In-depth knowledge of the causes of painful diabetes peripheral neuropathy	DF01 EUSC1	HWB6	4
In-depth knowledge of the signs and symptoms of painful diabetic peripheral neuropathy	CHS40 DF01 EUSC1	HWB6	4
In-depth knowledge of the typical progression of painful diabetic peripheral neuropathy	CHS40	HWB6	4
In-depth knowledge of the treatment modalities available that are based on the current evidence base	CHS62 CHS120 CHS179	HWB7	4
Demonstrates the ability to differentiate between painful diabetic peripheral neuropathy and other painful symptoms	CHS40	HWB6	4
Help the individual and their carer(s) understand what specific actions they can take to manage symptoms of painful diabetic peripheral neuropathy	CHS179 GEN14 GEN22 GEN62	HWB1	4
Provide information on painful diabetic peripheral neuropathy in a suitable form for the individual and carer, to ensure their understanding and engagement in their treatment	CHS179 GEN14 GEN62	Core 1	4

DIMENSION 7: Preventative Ulcerative Care

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress and how to assess its severity in relation to preventing foot ulceration.	Diab HA4 Diab HA3	HWB6	4
Ask appropriate questions that will enable you to assess whether the individual is aware that they are at risk of developing foot ulceration.	GEN22	Core1	3
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of foot ulceration.	GEN22 CHS76	Core 1	4
Demonstrate the ability to carry out an assessment of foot/feet in order to determine the underlying cause of ulceration. This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma or increased pressures	CHS48 Gen22	Core1	4
Review and revise where necessary up to date verbal and written advice relating to prevention of foot ulceration	Diab HA4 Diab HA3	HWB6	3
Assess the individual's understanding of the information that you have given them, and where necessary confirm the main areas that contribute to their risk of ulceration.	GEN14 Diab HA4 Diab HA3	Core 1	3

Understand the necessity for urgent treatment and referral in the event of suspected ulceration.	GEN22	Core1	4
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DIMENSION 8: Wound Management

General			
Competency	NOS Indicator	KSF Dimension	KSF Level
Contributes to the development of local/national guidelines for diabetes Wound Management	CHS 12	Core 2	3
Demonstrates a knowledge of the signs & symptoms relevant to diabetic foot ulceration	Diab DF03	HWB6 Core 2	3
Demonstrates an in-depth understanding of the wound healing process and potential complications	CHS40 CHS44	HWB6 Core 2	2
An in-depth understanding of the psychological impact of active diabetic foot disease	CM D5 CHS70	HWB6 Core 2	3
Demonstrate the ability to recognise and classify active foot ulceration. This should include identification of vascular insufficiency, neurological deficit, significant foot deformity, trauma, increased pressures, extent and degree of infection.	Diab DF02 Diab HA4 Diab HA3	HWB6	3
Debridement			
Understand the principles behind debridement and management of the wound bed to optimise the process of healing	CHS12	Core 2	2
Basic knowledge of advanced Wound Management techniques including larva and hydro surgical debridement.	CHS12	Core 2	2
Infection Control			
Demonstrates a clinical ability to recognise signs and symptoms of wound infection	PCS18 Diab DF03 CHS14	HWB6	3
Awareness of local antibiotic guidelines	CHS12	Core 2	3
Dressing			
Demonstrate a wide knowledge of the availability of modern dressing products, their mode of action and appropriate usage	CHS12	HWB7	2

DIMENSION 9: Post Ulcerative Management

LEVEL

8

Competency	NOS Indicator	KSF Dimension	KSF Level
Understands diabetes, its natural progress, pathological changes and how to assess the severity in relation to preventing foot re-ulceration.	Diab DF02 Diab HA4 Diab HA3	HWB6 Core 2	3 3
Evaluate and provide specialist education for the patient and their usual carers in relation to prevention of re-ulceration	PE8 PE7 PE6 PE3	HWB1	3
Establish the cause of previous ulceration to develop a plan and implement preventive strategies	PE4	HWB7	4
Communicate with the individual in an appropriate manner, recognizing the stressful nature of informing the patient that they are at risk of further foot ulceration	GEN22	Core 1	4

DIMENSION 10: Health Improvement

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates and manages psychological impact of patients presenting with diabetic complications.	CHS61 CM D5 CHS70	Core 2	4
Influences the design and use of relevant information in suitable formats for prevention and management diabetic foot disease.	HP8 PE2	Core 1	4
Demonstrate a knowledge of the availability of support mechanisms such as Diabetes UK, My Diabetes My Way (www.mydiabetesmyway.org.uk) to assist the individual in managing their condition	Diab DA4 Diab PE01 HSC330	HWB4	3

DIMENSION 11: Charcot Neuroarthropathy

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrate the ability to recognise patients who have predisposing risk factors for Charcot neuroarthropathy	Diab HA4 Diab HA3 CHS 40	HWB6	2
Demonstrate the ability to recognise acute Charcot neuroarthropathy	Diab HA4 CHS40	HWB6	3
Demonstrate the need for appropriate further investigation and intervention of suspected Charcot neuroarthropathy	CHS99 Diab HA1 Diab HA4	HWB7	3
Ability to communicate to patient and/or carer the implications of Charcot neuroarthropathy	HSC43	HWB6 Core 2	3 3

Understands the different radiological and non radiological methods of assessment	GEN22	Core 1	4
Demonstrate the ability to make a differential diagnosis between charcot and other acute diabetic foot problems	CHS38	HWB6	4
Demonstrate the ability to select and evaluate the most appropriate technique to immobilize the affected joint(s)	CHS40	HWB6	4
Demonstrate knowledge of the most up to date pharmacological therapy for Charcot neuroarthropathy	CHS44	HWB7	3
Demonstrate the ability to monitor the effectiveness of treatment and make changes where appropriate through the stages of the Charcot process	HSC43 HSC23	HWB7	4
Demonstrate the ability to implement strategies for long term management of the stable Charcot neuroarthropathy	CHS47	HWB7	4

DIMENSION 12: Research and Audit

Competency	NOS Indicator	KSF Dimension	KSF Level
Leads on the development and implementation on current research on diabetic foot disease	R&D 10,14,8,7 6,3,15	Core 2	4
Demonstrates a knowledge of the current research surrounding Diabetic Foot Disease	HSC43 HSC23	Core 2	4

DIMENSION 13: Leadership and Service Development

Competency	NOS Indicator	KSF Dimension	KSF Level
Demonstrates clinical leadership on Diabetes foot care on a local, national and international level	M&L B5 M&L B6	Core 4	4
Take responsibility for developing diabetic foot services in line national requirements	GEN63 M&L B8 M&L B1	Core 4	4
Awareness of resource limitations for local diabetes services	GEN55 M&L E1 M&L E2 M&L D6	Core 4	4

DIMENSION 14: Orthotic Intervention

LEVEL

8

General			
Generic Knowledge			
Competency	NOS Indicator	KSF Dimension	KSF Level
Knowledge of tissue mechanics and the effect of shear forces.	HSC23	HWB 6 HWB7 HWB9	2
Knowledge of footwear adaptations and how they influence biomechanics in gait	HSC23	HWB 6 HWB7 HWB9	2
Generic Skills			
Interpret the diabetic risk classification system in order to formulate an appropriate orthotic prescription.	CHS222	HWB 6 HWB9	4
Construct a care plan which will include regular review to identify patient's level of use and concordance, wear of materials and the need for replacement.	GEN39 CHS44 CHS53 HA1	HWB 6 HWB7 HWB9	4
In development of a care plan consider cosmesis of orthoses, without compromising function, and understanding its importance in achieving the best possible concordance.	GEN39 CHS44 CHS53 CHS222 HA1	HWB 6 HWB7 HWB9	4
Provide relevant and accurate verbal and written patient information with any orthosis supplied.	GEN14 CHS55	Core 1 HWB7 HWB9	2
Identify biomechanical risk factors relating to friction, shear and pressure risk and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB9	3
Prevention and Protection			
Generic Knowledge			
Knowledge of how to assess for total contact insoles	CHS120 HSC23	HWB 6	3
Generic Skills			
Use biomechanical pressure relieving strategies to minimise the risk of foot ulceration	CHS222 CHS223 DF02	HWB 7 HWB9	3
Use observational gait analysis to assess total body biomechanics and to decide on the impact this may have on risk of ulceration and alter care plan as appropriate.	CHS120 CHS222	HWB 6 HWB 7	2
Active Ulceration & Temporary Pressure Relief			
Generic Knowledge			
Knowledge of a wide range of pressure relieving devices and be able to choose the correct one based on patients needs, site of ulcer and mobility status.	CHS222 RT21 CHS120	HWB 7 HWB 6 HWB 9	4
Knowledge of how to refer patient to an appropriate HCP for assessment for a walking aid	GEN39 CHS99	HWB 6	2

Knowledge of the biomechanics of foot amputation, limb amputation, prosthetics and the post operative rehabilitation process.	HSC23	HWB 6 HWB 7	2
Knowledge of a matrix or algorithm for prescription of footwear in association with the patient's risk assessment.	HSC23	HWB 6 HWB 7	2
Knowledge of the components and materials associated with the manufacture of diabetic footwear and foot orthoses.	RT21 HSC23	HWB 6 HWB 7	2
Knowledge of how to refer patient to an appropriate HCP for assessment for amputation	GEN39 CHS99	HWB 6	2
Knowledge of the technology used in foot and pressure measurement.	RT21 HSC23	HWB 6	2
Generic Skills			
Assess for temporary pressure relief to offload active ulceration and optimise wound healing.	CHS222 CHS120 DF02	HWB 6 HWB 7	2
Assess the patients mobility status and make decisions on ability to cope with different types of temporary pressure relief available.	CHS120	HWB 6 HWB 7	3
Provide basic gait training to make sure patient is stable on walking with temporary pressure relief orthosis.	CHS223 CHS62	HWB 7 HWB 4	3
Contribute to the decision making process for elective amputation	GEN14 CHS55 GEN39 AC3 CHS44	HWB 6 HWB 7	3
Apply appropriate pressure relieving orthoses, including the application of the varieties of total contact or wound healing casts.	CHS222 CHS120 CHS44 Diab DF02	HWB 7 HWB 6 HWB 9	3
Carry out modifications to stock or custom made orthoses as needed	RT9	HWB 7 HWB 6 HWB 9	3
Apply practical techniques for the management of pressure and shear in wound healing such as total contact casting	CHS223 GEN4 CHS44 Diab DF02	HWB 9 HWB 7	4
Formulate a prescription for footwear considering all risk factors utilising appropriate materials.	CHS222 Diab DF01 CHS120	HWB 6	4
Measure for footwear according to the British standard	CHS44	HWB 7	4
Monitor the effectiveness of temporary pressure relief and alter the care plan or orthosis as required	RT9 CHS120	HWB 9 HWB 6 HWB 7	4

Post Ulcerative Management			
Generic Knowledge			
Have knowledge of when the use of a pressure monitoring system is indicated to diagnose more complex biomechanical problems.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Develop a long term orthotic treatment plan and be able to recognise when modification to the orthotic prescription is required.	CHS120 CHS44	HWB 9 HWB 6 HWB 7	3
Identify the cause of previous ulceration and provide patient education to prevent further trauma.	GEN14 CHS55	Core 1 HWB 1 HWB 7	3
Identify wear and pressure on existing orthoses and change orthosis prescription accordingly	CHS222 CHS120 CHS44	HWB 7 HWB 6	4
Management of Charcot Foot			
Generic Knowledge			
Knowledge of identifiable biomechanical changes associated with Charcot.	HSC23	HWB 6 HWB 9	2
Generic Skills			
Apply a cast walker with a total contact insole, make this irremovable and explain the importance of concordance with this to the patient or Apply a total contact cast to immobilise an active Charcot foot	CHS223 RT21 GEN14 CHS55	HWB 9 HWB 7	4
Develop a care plan to prevent ulceration due to altered biomechanics of the foot after Charcot	CHS44 CHS120	HWB 6 HWB 7	4
Design an orthosis to manage the biomechanical changes associated with chronic Charcot foot disorders.	CHS222	HWB 6 HWB 9	4

Glossary

National Occupational Standards (NOS) – Skills for Health

Key: LLUK – Lifelong Learning UK sector skills council
M&L – Management and Leadership standards developed by Management Standards Centre
CfA – Council for Administration standards setting body
CJ – Community Justice suite, Skills for Justice sector skills council
HSC – Health and Social Care, jointly owned by Skills for Health and Skills for Care
All other NOS have been developed by Skills for Health

Diab

DA4 – Assist individuals with diabetes to help and support each other

DF01 - Undertake advanced examination and risk assessment of the feet of an individual with diabetes

DF02- Implement specialist foot treatment for an individual with diabetes

DF03 - Provide wound care to treat an ulcerated foot of an individual with diabetes

GA1 - Assess and advise individuals with suspected diabetes

GA2 - Assess and investigate individuals with suspected diabetes

HA1 – Assess the healthcare needs of individuals with diabetes and agree care plans

HA2 - Work in partnership with individuals to sustain care plans to manage their diabetes

HA3 – Examine the feet of an individual with diabetes and advice on care.

HA4 – Assess the feet of individuals with diabetes and provide advice on maintaining healthy feet and managing foot problems

HA13 – Provide information and advice to enable an individual with diabetes to minimise the risks of hypoglycaemia

HSC23 – Develop your knowledge and practice

HSC43 – Take responsibility for the continuing professional development of self and others

HSC224 – Observe, monitor and record the conditions of individuals

HSC241 – Contribute to the effectiveness of teams

HSC330 – Support individuals to access and use services and facilities

TT01 – Identify symptoms of diabetes and refer individuals for further assessment

GEN

- 12 – Reflect on and evaluate your own values, priorities, interests and effectiveness
- 13 – Synthesise new knowledge into the development of your own practice
- 14 - Provide advice & information to individuals on how to manage their own condition
- 18 – Give presentations to groups
- 20 - Enable carers to support individuals
- 22 – Communicate effectively with individuals
- 27 – Develop, sustain and evaluate collaborative working with other organisations
- 31 – Initiate and participate in networks and discussion groups
- 32 – Search information, evidence and knowledge resources and communicate the results
- 39 – Contribute to effective multidisciplinary team working
- 40 – Contribute to the development of the multidisciplinary team and its members
- 44 – Liaise between primary, secondary and community teams
- 55 – Obtain and monitor the use of the funds required to implement plans to meet local needs for health care service
- 59 - Direct requests for assistance, care or treatment using protocols and guidelines
- 63 – Act within the limits of your competence and authority

HSC

23 - Develop your knowledge and practice

43 - Take responsibility for the continuing professional development of self and others

224 - Observe, monitor and record the conditions of individuals

241 - Contribute to the effectiveness of teams

CHS

4 – Undertake tissue viability risk assessment for individuals

5 – Undertake agreed pressure area care

7 – Obtain and test specimens from individuals

12 – Undertake treatments and dressings related to the care of lesions and wounds.

14 – Remove wound closure materials from individuals

38 – Plan assessment of an individual's health status

40 – Determine a diagnosis of an individual's health condition

44 – Plan activities, interventions and treatments to achieve specified health goals

45 – Agree courses of action following assessment to address health and wellbeing needs of individuals

46 – Undertake a risk assessment in relation to a defined health need

47 – Monitor and assess patients following treatments

48 – Communicate significant news to individuals

56 – Provide clinical information to individuals

58 – Provide information and support to carers of individuals with long term conditions

61 – Co-ordinate the care of individuals with long term conditions

62 – Provide interventions to individuals with long term conditions

70 – Support individuals with long term conditions to optimise their psychological functions

74 – Manage an individual's medication to achieve optimum outcomes

- 76 – Obtain informed consent for interventions or investigations
- 83 – Interpret and report on the findings of investigations
- 85 – Review and evaluate care management plans with individuals diagnosed with long term conditions
- 99 – Refer individuals to specialist sources of assistance in meeting their health care needs
- 105 – Agree the nature and purpose of investigation into an individual's health status
- 106 – Request imaging investigations to provide information on an individual's health status and needs
- 120 – Establish an individual's suitability to undergo an intervention.
- 140 – Authorise assistive devices to meet the individual's needs
- 173 – Develop care pathways for patient management
- 179 – Advise on requirements for choice of therapeutic intervention
- 185 – Perform basic specimen/sample preparation

PE

- 1 – Enable individuals to make informed health choices and decisions
- 2 – Manage information and materials for access by patients and carers
- 3 – Work with individuals to evaluate their health status and needs
- 4 – Agree a plan to enable individuals to manage their health condition
- 5 – Develop relationship with individuals that support them in addressing their health needs
- 6 – Identify the learning needs of patients and carers to enable management of a defined condition
- 7 – Develop learning tools and methods for individuals and groups with a defined health condition
- 8 – Enable individuals to manage their defined health condition

R&D

- 3 – Design and formulate a research and development proposal
- 6 – Produce a detailed research and development plan
- 7 – Direct and manage research and development activities
- 8 – Conduct investigations in selected research and development topics
- 10- Interpret results of research and development activities
- 13 – Present findings of research and development activities orally
- 14 – Translate research and development findings into practice
- 15 – Evaluate and report on the application of research and development findings within practice

LLUK

L1 – Develop a strategy and plan for learning and development

L4 – Design learning programmes

L10 – Enable learning through presentations

L17 – Evaluate and improve learning and development programmes

L19 – Provide learning and development in international settings

CDE

4 – Develop people skills and ideas within community groups/networks

M&L

B1 – Develop and implement operational plans for your area of responsibility

B4 – Put the strategic business plan into action

B5 – Provide leadership for your team

B6 – Provide leadership in your area of responsibility

B8 – Ensure compliance with legal, regulatory, ethical and social requirements

D1 – Develop productive working relationships with colleagues

D2 – Develop productive working relationships with colleagues and stakeholders

D6 – Allocate and monitor the progress and quality of work in your area of responsibility

D7 – Providing learning opportunities for colleagues

E1 – Manage a budget

E2 – Manage finance for your area if responsibility

HI 16 – Facilitate and clinically validate the implementation, evaluation and improvement of communication, information and knowledge systems to meet the needs of clinicians, patient and the public

HI 19 – Critically appraise clinical information and evidence

PCS 18 – Prepare, apply and attach dressing, wound supports and drains to patients

EUSC19 – Administer pharmaceutical interventions

CFA410 - Create and manage information systems

PHP15 – Encourage behavioural change in people and agencies to promote health and well being

PHS07 – Assess the evidence and impact of health and healthcare interventions, programmes and services and apply the assessments to practice

HP8 – Develop materials for information and education for specific audiences to support their engagement and participation in health protection processes

CJHF27 – Evaluate, prioritise and review demands for service

HT2 – communicate with individuals about promoting their health and wellbeing

DANOS AC3 – Contribute to the development of the knowledge and practice of others

KSF Dimension & Levels

Core 1

Level 1 – Communicate with a limited range of people on day to day matters

Level 2 - Communicate with a range of people on a range of matters

Level 3 – Develop and maintain communication with people about difficult matters and/or in difficult situations

Level 4 – Develop and maintain communication with people on complex matters, issues and ideas and/or in complex situations

Core 2

Level 1 – Contribute to own development

Level 2 – Develop own knowledge and skills and provide information to others to help their development

Level 3 – Develop oneself and contribute to the development of others

Level 4 – Develop oneself and others in areas of practice

Core 3

Level 1 – Assist in maintaining own and others' health, safety and security

Level 2 – Monitor and maintain health, safety and security of self and others

Level 3 – promote, monitor and maintain best practice in health, safety and security

Level 4 – Maintain and develop an environment and culture that improves health, safety and security

Core 4

Level 1 – Make changes in own practice and offer suggestions for improving services

Level 2 – Contribute to the improvement of services

Level 3 – appraise, interpret and apply suggestions, recommendations and directives to improve services

Level 4 – Work in partnership with others to develop, take forward and evaluate direction, policies and strategies

Core 5

Level 1 – Maintain the quality of own work

Level 2 – Maintain quality in own work and encourage others to do so

Level 3 – Contribute to improving quality

Level 4 – Develop a culture that improves quality

Core 6

Level 1 – Act in ways that support equality and value diversity

Level 2 – Support equality and value diversity

Level 3 – Promote equality and value diversity

Level 4 – Develop a culture that promotes equality and values diversity

HWB1

Level 1 – Contribute to promoting health and wellbeing and preventing adverse effects on health and wellbeing

Level 2 – Plan, develop and implement approaches to promote health and wellbeing and prevent adverse effects on health and wellbeing

Level 3 – Plan, develop, implement and evaluate programmes to promote health and wellbeing and prevent adverse effects on health and wellbeing

Level 4 – Promote health and wellbeing and prevent adverse effects on health and wellbeing through contributing to the development, implementation and evaluation of related policies

HWB3

Level 1 – Recognise and report situations where there might be a need for protection

Level 2 – Contribute to protecting people at risk

Level 3 – Implement aspects of a protection plan and review its effectiveness

Level 4 – Develop and lead on the implementation of an overall protection plan

HWB4

Level 1 – Help people meet daily health and wellbeing needs

Level 2 – Enable people to meet ongoing health and wellbeing needs

Level 3 – Enable people to address specific needs in relation to health and wellbeing

Level 4 – Empower people to realise and maintain their potential in relation to health and wellbeing

HWB6

Level 1 – Undertake tasks related to the assessment of physiological and/or psychological functioning

Level 2 – Contribute to the assessment of physiological and/or psychological functioning

Level 3 – Assess physiological and/or psychological functioning develop, monitor and review related treatment plans.

Level 4 – Assess physiological and/or psychological functioning when there are complex and/or undifferentiated abnormalities, diseases and disorders and develop, monitor and review related treatment plans.

HWB7

Level 1 – Assist in providing interventions and/or treatments

Level 2 – Contribute to planning, delivering and monitoring interventions and/or treatments

Level 3 – Plan, deliver and evaluate interventions and/or treatments

Level 4 – Plan, deliver and evaluate interventions and/or treatments when there are complex issues and/or serious illness

HWB8

Level 1 – Undertake tasks to support biomedical investigations and/or interventions

Level 2 – Undertake and report on routine biomedical investigations and/or interventions

Level 3 – Plan, undertake, evaluate and report biomedical investigations and/or interventions

Level 4 – Plan, undertake, evaluate and report complex/unusual biomedical investigations and/or interventions

General 2

Level 1 – Appraise concepts, models, methods, practices, products and equipment developed by others

Level 2 – Contributing to developing, testing and reviewing new concepts, models, methods, practices, product and equipment

Level 3 – Test and review new concept, models, methods, practices, products and equipment

Level 4 – Develop new and innovative concepts, models, methods, practices, products and equipment

References

- Apelqvist, J., Ragnarson Tennvall, G. (2005) Counting the costs of the diabetic foot. *Diabetes Voice*, 50, 8-10.
- Boulton, A J. (2005b) The global burden of diabetic foot disease. *The Lancet*, 366, 9498, 1719-1724.
- Carrington, A.L., Mawdsley, S.K., Morley, M. (1996) Psychological status of diabetic people with or without lower limb disability. *Diabetes Res Clinical Practice*, 32, 19-25.
- Cavanagh., P. R. et al (2005). Treatment for diabetic foot ulcers. *The Lancet*. November 12. Vol 366. No 9498: 1725 – 1735.
- Edmonds, M.E., Blundell, M.P., Morris, M.E. (1986) Improved Survival of the Diabetic Foot: The Role of the Specialised Foot Clinic. *Quarterly Journal of Medicine*, 232, 763-771.
- Gordois, A., Scuffham, P., Shearer, A. (2003) The healthcare costs of diabetic peripheral neuropathy in the UK. *The Diabetic Foot*, 6, 62-73.
- Leese GP, Reid F., Green V., McAlpine R. (2006) Stratification of foot ulcer risk in patients with diabetes: a population-based study. *International Journal of Clinical Practice*, 60, 541–545.
- McCormick, Keith., (2007) Course Review for Proposed Post Registration Competency Based Course in the Clinical Management of Diabetic Foot Disease. University of Southampton. 1 – 9.
- McInnes, A., Booth, J., Birch, I. (1998) Multidisciplinary diabetic foot care teams: professional education. *The Diabetic Foot*, 1, 109-115.
- Moriarty., K. T. (1993). The economics of setting up a diabetic foot clinic. *Practical Diabetes*. May/June. Vol 10. No 3: 102 – 104.
- National Institute for Clinical Excellence. (2004) Prevention and management of foot problems. www.nice.org.uk/CG10NICEguidelines, (accessed 10th July 2008)
- NHS Quality Improvement Scotland (2002) Diabetes Report
- NHS Scotland (2008) The Scottish Diabetes Survey- 2006. Edinburgh.
- Roundtable Consensus (2007) Best practice pathway of care for people with diabetic foot problems, A Roundtable Discussion. *The Diabetic Foot*, 10(1), 42-46.
- Scottish Diabetes Foot Workforce Development Group (SDFWDG) Competency Framework for the Prevention, Treatment and Management of Diabetic Foot disease (Draft 2010)
- Scottish Executive, (2005) Delivering for Health. Edinburgh: Scottish Executive.
- Scottish Executive, (2006) Scottish Diabetes Framework Action Plan. Edinburgh: Scottish Executive.
- Scottish Intercollegiate Guidelines Network, (2001) Clinical Guideline 55: Management of Diabetes-a national clinical guideline, www.sign.ac.uk (accessed July 8th 2008)

Sutton, M. (2000) The phenomenological experience of having chronic diabetic foot ulceration: implication for education and care. *Diabetic Medicine*, 17 (1), 54.