

Community Health Services Foot Clinic Consultation

2018



East London Foundation Trust (ELFT), who are now responsible for running the foot clinic at the Mile End Hospital, have introduced new criteria that means only those with high clinical needs will be treated by the service.

This includes nail surgery; vascular assessments; diabetes care for higher risk feet; foot deformity, foot wear provision for high risk patients; high risk domiciliary care; rheumatoid foot care and preventative nail care for high risk patients.

The service will no longer treat all non-risk or low risk foot conditions including: Musculoskeletal /Biomechanics; sports injuries; verrucae and basic corns callous and basic nail care.

In response to these changes, Healthwatch Tower Hamlets has conducted *an independent consultation* to find out how these changes have been received by service users and other local residents.

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Summary and recommendations

- Although local residents' experience with the services provided by the foot clinic over the last 12 months has been **mixed**, they are **nearly unanimously opposed** to the recent changes to service provision implemented by ELFT; and do not see them as a solution to the challenges the foot clinic may face.
- Private chiropody services were **not seen as an acceptable alternative** to using the foot clinic by most residents who took part in the consultation, partly because of their high cost.
- The fact that nearly 30% of patients are saying that they would find it impossible to pay for private treatment suitable for their needs, and a further 50% reportedly would find it "difficult" to afford highlights a real risk of people **missing out on medically necessary treatments**.
- Older and/or disabled people from deprived background, who need services such as toenail cutting, are **disproportionately affected** by the current changes to service provision.
- The impact of the current proposed changes needs to be **adequately assessed**. If possible, patients no longer accessing services should be tracked, to see if they are more likely to develop more serious problems or use hospital-based services.
- Nearly 50% of respondents couldn't think of any services appropriate for replacing the ones no longer available at the foot clinic; which highlights a need for **better information** (including on services other than private chiropodists, as well as self-management and self-care).
- Printed brochures and video tutorials (via DVD or online) with instructions on caring for one's feet could be distributed by the foot clinic.
- Better training should be available to **paid and unpaid carers** to assist with toenail cutting and other similar routine tasks.
- We recommend examining at the potential of a community organisation or social enterprise providing a more **affordable alternative to fully private chiropody services**:
 - Ran as a standalone community service; possibly within the Foot Clinic and/or offering home visits- commissioning a small social enterprise to provide toenail cutting to individuals who are no longer eligible, for a small fee (typically between £15-£20 rather than the £50+ that private podiatrists charge).
 - Within a voluntary community sector organisation such as Age UK at the Linkage Plus Centres.
 - Linked to New City College - Tower Hamlets.
- Further consultation and public engagement is needed to assess the impact of the current changes. Moreover, a mechanism should be set up for patients **to provide feedback on podiatrists/ toenail cutting services** and to recommend them to other patients - this could be hosted on the Healthwatch site or the Community Catalogue.

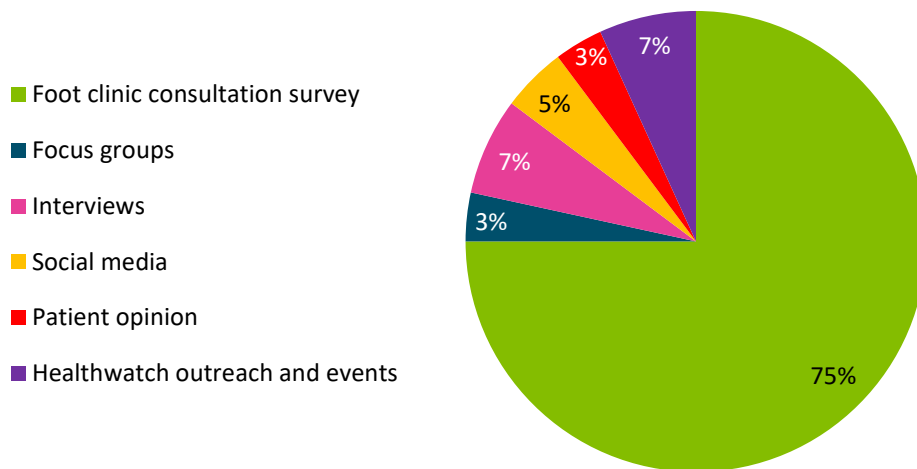
How we engaged with service users and residents

- ❖ We conducted a **consultation survey**; both online and face-to-face.
 - ❖ The online version has been promoted through the Healthwatch Tower Hamlets social media accounts (Facebook, Twitter, Nextdoor) as well as through our newsletter.
 - ❖ Data was collected face-to-face by Healthwatch volunteers at the Foot Clinic in the Mile End Hospital as well as in other community locations.
- ❖ We also analysed data collected about the Mile End Hospital Foot Clinic within the last 12 months through other sources, including focus groups and interviews carried out as part of our Adult Social Care project, reviews on Patient Opinion, discussion threads on social media and Healthwatch Tower Hamlets regular outreach.

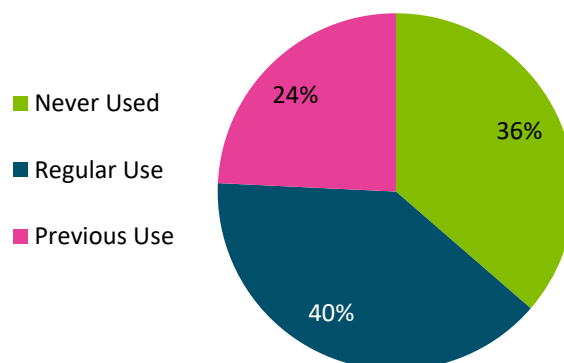


66 people answered our survey.

We analysed 22 comments from other sources.

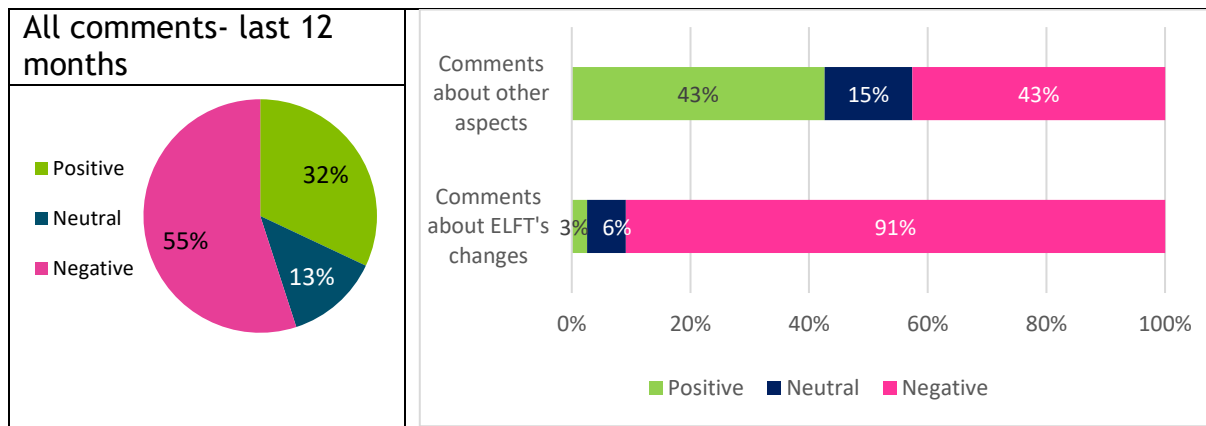


Out of the 66 survey respondents, 40% were regular users, and a further 24% had used it at least once within the last two years.



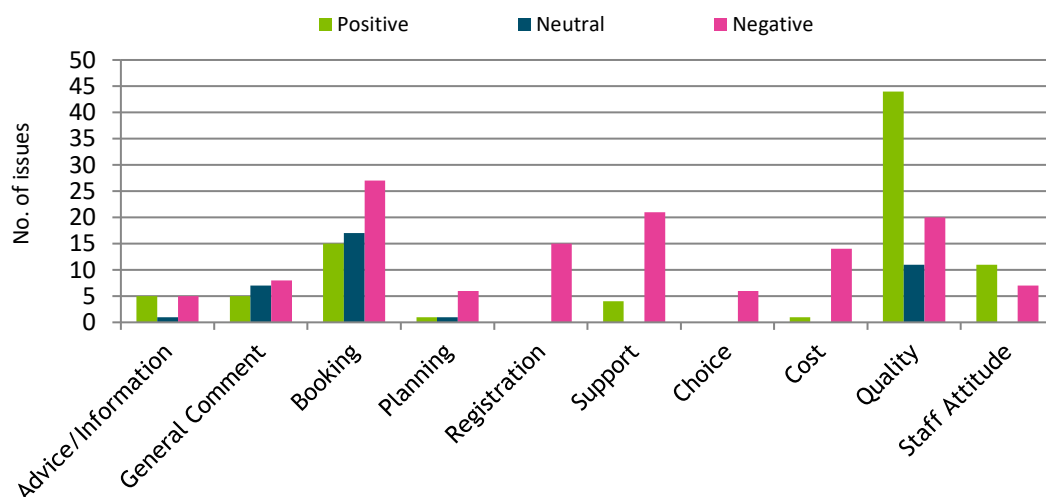
What we have learned

Opinion of the foot clinic over the last 12 months is leaning negative, and recent service changes have had a detrimental effect on patient opinion.



Service users praise the quality of service provision offered by the hospital and are generally happy with the attitude of staff members.

However, appointment booking is an issue for a number of service users; and some report a lack of support, difficulty accessing the service or incurring costs- in great part because of the recent changes.



The foot clinic is seen as a key community asset, providing high quality healthcare.

- *Great service for my daughter's ingrown toenail.*
- *It is a community asset to have the foot clinic at Mile End as a centre of excellence.*
- *It is an essential service for the elderly with long term illnesses.*
- *I had issues with foot pain caused by tight hamstrings and the clinic diagnosed and resolved the issue. I have also had successful verruca treatment there.*

Apart from merely offering treatment, the foot clinic is an important resource for self-management advice and information.

- *I saw a professional who I could trust and who gave me good advice as well as dealing with my foot problem.*

Some service users have already experienced the impact of current changes to the service provision. The feedback from them is overwhelmingly negative, with service users expressing concern over the high cost of private podiatry services and the detrimental impact lack of care may have on their health.

- *The foot service has just changed. They WERE good, now they are useless!*
- *Excellent service for orthotics and ingrown toenail surgery. However, it is now impossible to have toenails treated until after they become infected and problematic - have to go to emergency 8.30 am clinic when this happens. It would be much better to have preventative treatment at the foot clinic. I am 65 with various illnesses and feet and toenails are difficult to keep healthy when my age - can't reach them or cut them easily. This service needs to be saved!*
- *I had surgery on my feet as a child which has left a legacy of foot, hip and back pain. The mechanical foot specialists at MEH assessed me and created bespoke orthotics which have enabled me to keep walking. I even managed a pregnancy with no problems. They have written to inform me that they will no longer be treating patients with muscular skeletal issues such as myself. I'm not sure how to find someone with the necessary expertise in the private sector and as an NHS employee myself I'm worried I won't be able to afford the treatments I'll inevitably need in the future.*
- *I have had a good service but have now been discharged as my problems are considered non urgent and I now have to get private treatment.*
- *Most people over 80 have got medical problems. I can't grip, I've got arthritis in my hand, and no way I can cut my toenails. My children don't live with me. At the moment, I'm still under them [the foot clinic at Mile End, but they've sent me a letter to say that they would sling everybody off. Well, who is the person that is going to assess? How does he know how I feel?? It's not just the arthritis, I have other medical problems with my feet anyway- why should I even attempt to do my feet?*

Being referred to the foot clinic can be a lengthy process.

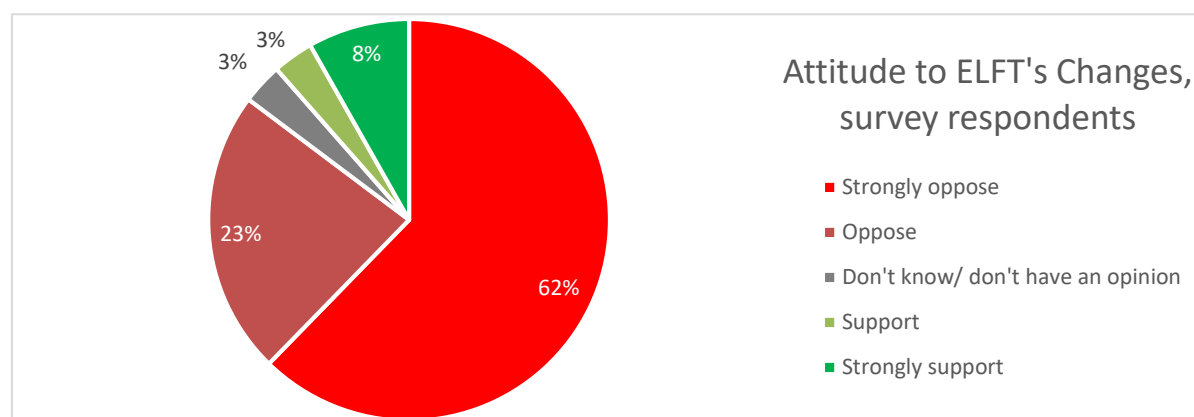
- *GP referred to the mile end hospital- it took almost a year to get an appointment with the hospital. Very happy with the treatment and the staff.*

The booking experience varies between patients: some have an easier time booking than others, depending on their circumstances.

- *[How easy or difficult is it to make appointments?] It varies.*
- *Very helpful, reasonable to schedule an appointment, good service.*
- *They're OK, a lot of new people. The only problem is they only send you appointments by post- so they dictate the date when you're seen, you don't get to choose. I missed one appointment because the letter was lost in the mail and they didn't send a reminder. Most other services do this- only they don't.*
- *It was frustrating not being able to make an appointment and have to be seen as an emergency but (apart from the grumpy receptionist) they were brilliant.*
- *Great service, just a nightmare getting an appointment!*

According to our survey, opposition to the changes recently implemented by ELFT was nearly universal.

While some comments about appointment booking seem to indicate a busy service, patients and service users did not see the present changes to service provision as a legitimate solution for relieving pressure on the service. Out of the 66 survey respondents, 85% “opposed” or “strongly opposed” the changes, while only 11% “supported” or “strongly supported” them.



The largest recurring theme in the answers of service users who opposed the changes was the fact that the foot clinic is a **key community service**, that is now being taken away from **people who need it and rely on it**.

Many respondents were particularly concerned about how changes to service provision will impact **the elderly and the vulnerable**; such as pensioners on low incomes who would have difficulty affording private podiatry services.

- *I need care for my feet. My toe nails in particular. Why should this service not be free? I am also completely shocked at the removal of necessary services for people in obvious need of support, e.g. the elderly having their toe nails cut. What if they have no one to do this for them and they can't afford private care?*
- *This is a vital service for older people who can't reach feet easily because of arthritis, can't cut nails easily because of normal age-related nail thickening, plus for those with diabetes, ingrown toenails and flat feet.*
- *It is yet another reduction in the level of service offered by the NHS, to be suffered by those least able to cope with it.*
- *These services are needed by older people in this deprived borough*
- *[I oppose the changes to service provision] because [the foot clinic is] needed for those who are really needy. If NHS can do for them, it is a great help.*
- *It is an effective service; I don't think that somebody should miss out on this service.*
- *[These changes are] taking away from people who need it most.*
- *It is an essential service for the elderly with long term illnesses.*
- *Vital for the community and another example of piecemeal privatisation of NHS*

It has also been pointed out that previous cuts to community health services have already made it harder to access appropriate healthcare.

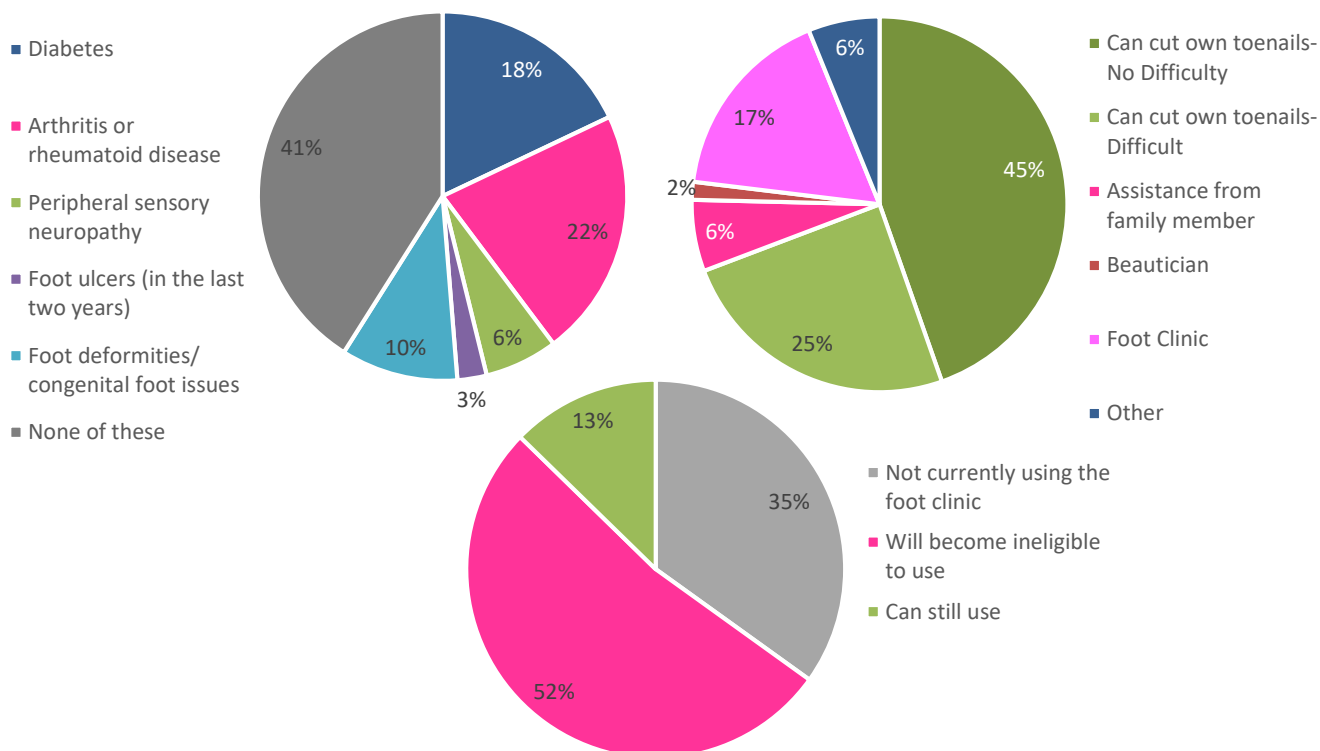
- *I just had a letter- they're doing away with the mobile diabetes and foot clinic services. You have to go to Mile End now. People are not going to bother going. From the bus you have to walk to Mile End Road, then walk to Bancroft Road, you're just not gonna bother.*
- *They shut Newbury Place and the one at Bethnal Green already- that's my main point now- and if it will close too- what do we do??*

Multiple respondents pointed out that the services no longer available through the Mile End Hospital Foot Clinic played an important role in **preventing more severe issues**.

- *The clinic provides a valuable PREVENTATIVE service to foot health. Often it's just some low key TLC that's needed and avoids potential bigger, more problematic issues in the future. It's not about training people. In many cases they simply cannot manage/reach!*
- *As a diabetic, changes can be spotted and seen to more quickly [if the foot clinic continues to offer a wider range of services].*
- *I think older people must have their feet attended to - especially if they have any disease that could affect their feet, or if they are unable to wash and shower regularly. Could help catch more serious illness. At the very least, GPs should offer foot checks.*
- *Cheaper in long term to keep feet healthy than wait until problems occur with consequences of expensive surgery and life altering experiences.*



59% of respondents suffered from a condition that would put their foot health at risk. Less than half of respondents were able to cut their own toenails with no difficulty, and 17% depended on the foot clinic for having them cut. Nonetheless, 80% of foot clinic service users who answered the survey (and 52% of total respondents) said that the current changes made them ineligible to use foot clinic services for their needs.



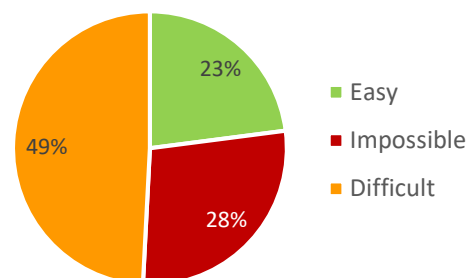
Several service users pointed out that, while having complex needs that can severely impact their health and well-being, they would nonetheless be ineligible for chiropody services at the foot clinic, under the current changes.

- *Non-urgent foot conditions can still be debilitating. I suffer from chronic but irregularly occurring tendinitis and though, of course, this condition is not life threatening, it still impacts on my quality of life. To reserve the foot clinic for high need conditions only is short-sighted and callous.*
- *My foot problem had devastating consequences on my life. I could not walk. Although not fitting into the new criteria, I have other health problems that compounded my foot problem. A correct diagnosis and advice about further action regarding foot problems can be difficult, as it was in my case. Although I have only ever needed to use the Mile End foot clinic once in my life with the new changes I would have been left unable to walk and in excruciating pain. My problem was due to a verruca in an unusual location that took an unusual form. Although suffering from this problem once before and self-treating from a pharmacy as a minor ailment, this particular verruca was not.*
- *I have osteonecrosis in both femurs caused by doctor prescribed oral steroids. I now use a wheelchair to get around and cannot reach more than 2cm below my knees. I need the help from the NHS because I cannot afford the private podiatrist services near me that I have phoned so far.*

For most survey respondents, using private chiropody services for their needs was not seen as a sustainable option.

The affordability of podiatric care suitable to their needs is a subject of concern for many respondents.

49% of respondents say that paying privately for podiatry services suitable for their needs would be difficult for them, and a further 28% state that it would be impossible for them.



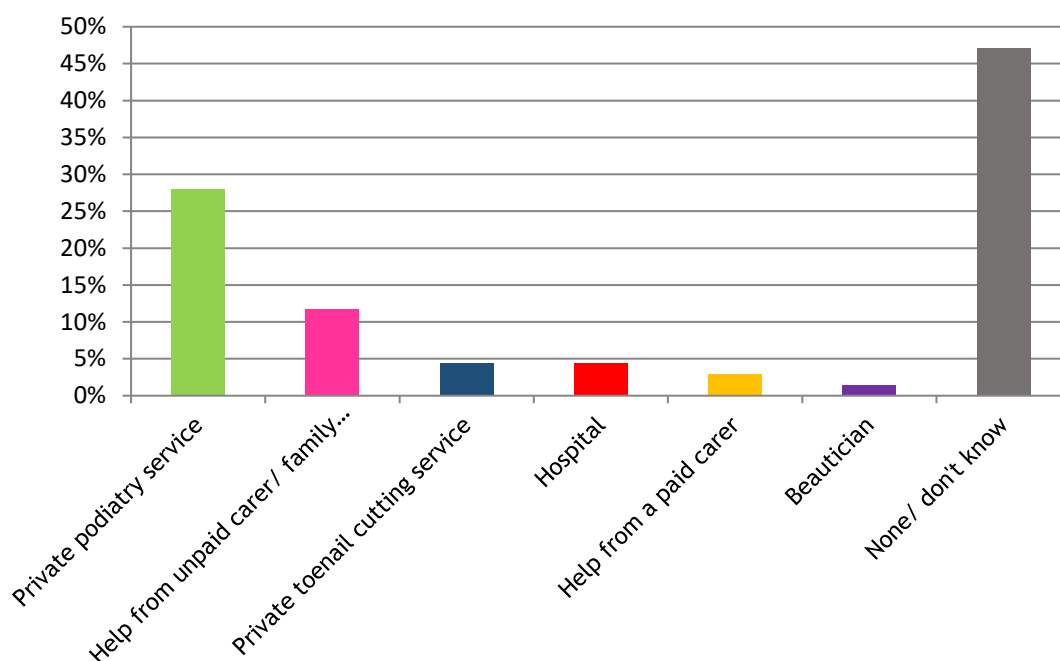
- *Many people will not be able to afford the services and will go untreated with long term detrimental impacts on mobility and, consequently, wider health and wellbeing. Not to mention increased health costs. While I can afford private health services, I may struggle to access them because of my CFS.*
- *[I oppose these changes] Because people need to pay for it, for some of them it's going to be expensive.*
- *I simply cannot afford private care.*
- *It's not easy to go and pay, especially for pensioners.*
- *I and others have basic needs that they are refusing to meet. Many are like me, I'm 73, on State Pension + Pension Credit. Very hard to fund private Chiropody fees every 5-6 wks.*
- *No other services were provided to me as an alternative. I can't afford to pay myself and have this condition through no fault of my own.*

Moreover, many saw it as a matter of principle that healthcare ought to be free and provided through the NHS, and saw the current reduction in service provision as fundamentally unfair.

- *No explanation has been provided for why patients "don't need" this service. I thought we had a free NHS and removing essential services is not the way forwards.*
- *I believe health care is a human right and should be provided to people regardless of your income or ability to pay.*
- *This is more rationing of our NHS Services. But re directing remainder of Care Services towards the Private Providers. Deliberate decisions about our Healthcare forced upon us by unscrupulous Tory Government. Criminal!*
- *My husband may need to see a professional soon and would like to be able to do so in Mile End and not privately as we pay our taxes.*
- *Frustrating as I've paid in my NI for all my years, thankful to have rarely used NHS services but now the one thing I do need assistance with is being cut. Also feel manipulators of the proposed system will still get appointments and perhaps those more vulnerable will end up suffering most.*

Furthermore, only 28% of service users thought of private podiatry services as a possible alternative to the services previously provided by the Mile End Foot Clinic, and only 22% said they would be able to recommend a private podiatry service that they had used.

Nearly half of respondents could not name any possible alternatives, and 4% stated that they would be forced to use hospital services, potentially increasing the pressure on NHS services even further.



- *I would hope my partner would do it but he is not confident.*
- *My latest foot problem needed an urgent diagnostic intervention. If I was not able to receive that I would have seriously worried and would have been unable to walk. It is not a matter of paying privately, sometimes serious problems are not obvious and need a specialist NHS centre, and not a private individual podiatrist!*
- *Should I need further treatment then I don't know where I would go - it may be much further away.*
- *[I would have to use the] emergency clinic if it still exists. Otherwise don't know, as I can't afford private podiatry.*

A few people pointed out that even if they could afford to pay for private podiatry services, they may still be unsuitable for their needs.

- *I could afford to go privately but would NOT be confident to know who could deal with a diabetic with foot problems. For many older people foot problems become more problematic and also painful which then leads to loss of mobility and gradually a raft of ensuing problems. Cutting this service will not be cost effective in the long term though probably looks like a quick win at the moment. Consider having qualified podiatrists linked to GP surgeries.*
- *While I can afford private health services, I may struggle to access them because of my CFS.*

Some service users expressed dissatisfaction that the changes in service provision have been adopted without a proper consultation.

- *Following the ELFT proposed changes, I will still be able to use the foot clinic for my needs, but I am angry and distressed that ELFT has made changes without any consultation nor investigation about costs and access of/ to their listed practitioners.*
- *They've already decided- no consultation.*

Consultation Update

Since we produced this consultations, we have received comments from three Tower Hamlets residents, which point out that the recent changes in service provision have had a severe negative impact on accessing the service, even for patients who should have been entitled to receive care at the foot clinic; and that the service has, to date, failed to provide suitable alternatives for patients no longer eligible.

- *I attended last week and the lady says that half the staff have gone, no new patients are being taken on unless they are Diabetic, have vascular problems or are children. Existing patients are told that they will attend the last appointment by June, no further ones offered and no home visiting at all. I don't recall any notice of service change or consultation being called for this.*
- *I used to go to the Foot Clinic for my foot care as I'm diabetic. Currently my foot is in a plaster cast. I went for my appointment at the foot clinic but they say that they can't remove it and I'll need to make an appointment at Kings in Denmark Hill. They said they don't have the funding to do it anymore. They booked me an hour long appointment and then said they didn't do this anymore. The Clinic at Kings is only open 3 days a week not 5. I need to make an appointment after 11 as I need to come and visit my wife at the care home first thing in the morning. If I don't see her in the morning, I can't get to see her until about 5. It takes an hour on public transport and you can have to wait for 3 or 4 hours at the clinic at Kings. I might try A&E first. I don't know why they've stopped the service at Mile End. It was always busy. It can't be cheaper to send people to Kings surely. They should reinstate the service at Mile End. Mile End Hospital is a very good site. It is great having the diabetes, foot, eye services under one roof. It is difficult to park though and the last time we got a ticket. Accelerate also come and visit me to measure up my stockings and things. They are great. I say I could come to Mile End but they do home visits. They are good and helpful. They can't do my stockings at the moment though because I have the plaster cast on.*
- *I was told that I should get an appointment at the Foot Clinic to get my toenails cut. I didn't receive the appointment. I had to wait and wait and wait but no appointment. I went back to the nurse at the GP (Jubilee St) and she said to contact them. I tried to phone again and again but they would never pick up. In the end I went in. The lady there said that I was not on the system. She said wait two day and then phone. I phoned and phoned but nobody picks up. I went to hospital in the end. When I went to the GP they said the service was changing and that I might have to pay some money. I'm ok to pay some money but I don't know where to go. But the women at Mile End (the foot clinic) said I should get a letter confirming an appointment on 9 May at 10:30. I went in there and they said they*

couldn't do it. They said I didn't have an appointment. But I had a text with the time and clinic. They just waste my time. The admin system is a complete mess. I wouldn't mind paying for it if they could just organise the system better. They could just tell me I'm not entitled to the service and I would go.

Response from East London Foundation Trust

The Trust confirms that the concerns indicated from the consultation and the way that the changes to the Foot Health Services at Mile End has affected local residents is fully understood and taken on Board.

ELFT and other partners of the Tower Hamlets Community Health Services Alliance are working to put in place a solution that will mitigate the impact of the changes made. They are developing a low cost foot care service involving a social enterprise and will keep us informed of progress.

A programme of training sessions and information for patients and carers is being provided to those who are no longer eligible to attend the Foot Clinic. These will be developed in line with the recommendations of the Healthwatch Tower Hamlets recommendations.