

Foot Care

Foot care is integral in the promotion of health, maintenance of health, and the prevention of illness. Licensed Practical Nurses (LPNs) provide foot care in a variety of settings. LPNs providing foot care may be employed by an agency/facility, or be self-employed. Foot care services can be provided by the LPN at two distinct levels; Basic Foot Care, and Foot Care as a Specialty. The LPN can gain additional knowledge and skills regarding foot care and then provide Basic Foot Care with Additional Competencies. The LPN is accountable and responsible to ensure practice meets the SALPN regulatory requirements. The SALPN Regulatory Bylaws provide the following:

20. All members shall ensure that they work within their educational preparation, level of competence and scope of practice and comply with the standards of practice set out in the *Standards of Practice for Licensed Practical Nurses* approved and adopted by Canadian regulatory agencies as of April 1, 2013.

21. All members shall conduct themselves in an honorable and ethical manner, upholding the values of truth, honesty, and trustworthiness, and shall observe the standards of conduct set out in the *Code of Ethics for Licensed Practical Nurses in Canada* approved and adopted by Canadian Regulatory Agencies as of April 1, 2013.

Each LPN engaging in foot health is accountable for all actions or inactions regarding foot health. The LPN must recognize a situation where the needs of the client are above or beyond the individual's scope of practice or competency level and consult the appropriate personnel.

Basic Foot Care Level of competency achieved in the LPN basic program in Saskatchewan. Basic foot care is provided to clients who do not have pathology or disease of or affecting the feet and lower extremities.

Basic Foot Care with Additional Competencies Knowledge, skills, and abilities acquired beyond the basic education of a LPN. The additional competencies are gained in courses or workshops that are less than fifty hours in length. This will provide introductory assessment skills and prepare the LPN to provide foot care to the high risk client. **Basic foot care with additional competencies does not replicate the foot care specialty and does not prepare the LPN to use the foot care drill or invasive tools such as the "Black File".**

Foot Care as a Specialty This specialization is achieved upon the completion of recognized foot care education. The education must be no less than fifty hours in length, and shall include a twelve hour skills lab, care plan development, and a comprehensive exam. The LPN with the foot care specialty is recorded in the SALPN LPN Specialty database.

The education will prepare the LPN with the integrated knowledge, skills, ability, critical thinking and judgement required to provide advanced foot care to clients with alterations or variations of foot health as a result of pathology and or disease. LPNs with the foot care specialty have enhanced knowledge of the anatomy, structures, and functions of the nail, foot and skin. The LPN performs comprehensive assessments of the lower extremities, and initiates nursing interventions that address problems of the anatomy, structure, and functions of the nail, foot, and skin. **Only LPN's with foot care as a specialty can engage in practice in a podiatry or self-employment**

settings.

Services

Advanced foot care offered within a health institution, as provided by the LPN with Foot Care as a Specialty, must be supported with an order written by an authorized prescribing professional (physician, RN (NP)). Foot care services must also be supported by policy, and or authorized by obtaining written consent from the client.

A self-employed advanced foot care provider must obtain written consent from the client to provide advanced foot care. The consent must indicate and or include:

- An assessment that has warranted the need for advanced foot care
- The provider’s expectations of the delivery of services
- Permission to use the instruments for the foot care

A LPN, engaged in any level of foot care must hold and maintain a current practising license and comply with all requirements as outlined in the SALPN Practice Guideline. (ie: Self-Employment)

Basic Foot Care

Foot Care as a Specialty

Knowledge

Knowledge

Anatomy/physiology of the feet and lower extremities
 Purpose of foot and nail care
 Common microorganisms of the lower extremities
 Asepsis/infection control
 Complications and the effects of the pathology and disease process i.e: diabetes and circulation

Including the Basic Foot Care with addition to:
 Pathology as it relates to acute and or chronic disease and the feet i.e: diabetes, Peripheral Artery Disease
 Changes due to chronic disease and aging i.e: arthritis
 Asepsis/infection control related to instruments
 Ability to access/refer clients to other health care professions
 Footwear and basic pedorthic management

Skills

Enhanced Skills

Assess and inspect the feet
 Utilize nursing process as it pertains to foot health (assessment, planning, implementation, and evaluate)
 Perform non-invasive foot care procedures

- Cleaning, moisturizing

Includes Basic Foot Care with addition of:
 Utilize nursing process as it pertains to foot health(assessment, planning, implementation, and evaluate)

- Application of creams, lotions, simple dressings
- Toe nail care (includes cutting)

Education to the patients/care provider on foot health
Documentation

Consideration of the clients history/co-morbidity/
pathophysiology

Assessment/inspection of the foot and lower
extremities

- Diabetic assessment of lower extremities
- Vascular assessment of lower extremities
(Doppler, ABI, claudication, edema, temperature)

Performance of invasive foot care

- Removal of tissue below the dermis (corns, callous)

Safe competent/appropriate use of the instruments:

- Black File
- Diamond Deb File
- Nail Scissors
- Probe
- Nail Nippers
- Foot File
- Foot care drill/Burrs
- Nail packing
- Monofilament
- Curette

Principles/application and contraindications of the
principle of padding

Education to the patients/care provider of foot health
Documentation

Judgment

Recognition of the expected findings of the normal
and average foot for the clients who is not experiences
alterations pathological process or disease process
of the foot and or lower extremities

Understanding when, and how to refer the client,
based on the assessment findings of the lower
extremities

Documentation and reporting as necessary

Judgment

Recognition of the findings of the normal or average
and:

Recognition of the findings of the foot for the cli-
ent who is experiencing or is a risk of pathological
process or disease process of the foot

Understanding when and how to refer the client,
based on assessment findings of lower extremities
and client

Documentation and reporting as necessary

References:

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