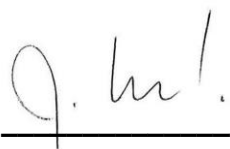


Leamington Mennonite Home
Long Term Care

POLICY AND PROCEDURE

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|---|--|----------------------|
| CATEGORY: Nursing | SUBJECT: Foot Assessment & Care | SECTION: F |
| DATE: September 2004 | Administrator's Signature:  | POLICY: 3 |
| REVISION DATES: June 2015, March 2018 | | |

FOOT ASSESSMENT & CARE

POLICY

Each resident admitted to LMH will have a foot assessment completed by the Registered Staff and appropriate interventions initiated based on findings. The assessment will be completed on admission, quarterly and where there is a change in the resident's foot condition.

PROCEDURE

1. All residents will have a foot assessment completed on admission by the Registered Staff, quarterly, re-admission, LOA greater than 24 hours if the resident is at high risk and where there is a change in condition or resident complains of pain.
2. Registered Staff will complete the assessment using the electronic documentation program on the computer.
3. Intervention strategies are to be initiated based on findings and documented on the plan of care.
4. The assessment tool, done quarterly, is completed using the electronic assessment on the computer. MDS RAI staff will communicate when the quarterly is to be done by placing the resident's name in the floor's day planner. As each quarterly assessment is completed, a reference will be made in the e-notes. The entry will be documented with the name, status and date by the Registered Staff member who completed the assessment.
5. PSW's are responsible to report any concerns/changes to the Registered Staff member regarding the resident's feet.

Foot / Nail care:

Basic Foot/Nail Care: PSWs will monitor and clip resident nails monthly or as required – usually following the resident's bath. Basic nail care are toenails easily clipped with nail clippers and the resident has no compromising factors.

Compromised Foot Care: is given at minimally on a bi-monthly basis by the Registered Staff to residents that are diabetic, on blood thinning medication, have peripheral vascular disease or have

thickened nails that PSW's are unable to clip and requires the use of nippers. Thickened fungal nails, small corn and callouses are also to be managed by the registered staff. Ulcerations will be managed by the Registered Staff and monitored by the wound care nurse.

Advanced Foot Care: to be done only by certified Registered staff. Fungal nails with undefined edges, ingrown nails, thickened nails requiring the use of a Dremel drill to file or by family request will be referred to the contracted Foot Care Nurse. The Registered staff will assess the foot/nail condition and make the recommendation to the family for the advanced footcare referral. A consent will be signed by the POA/SDM and then the resident will be referred to the footcare nurse. The consent will outline the fee for service and payment to the provider. The footcare nurse will assume the care; schedule the visits and document the care in the electronic notes. Care will be provided in the resident's room.