# Knowledge for Change

#### Name of Organisation:

Knowledge for Change

# **Fellowship Summary**

This programme focuses on training a multi-disciplinary team to develop a preventive and contextually relevant version of Manchester's 'Amputation Reduction Strategy'.

Diabetes is fast emerging as the primary cause of lower-limb amputation in low and middleincome countries (LMICs). Diabetic Foot Ulceration (DFU) and resulting limb loss represents a major fiscal threat to public health systems and has catastrophic consequences for livelihoods. This proposal builds upon and integrates the work arising from two highly successful previous fellowship programmes on wound care and prosthetic limb manufacture.

The wound care work will extend to the specific challenges of identifying and managing diabetic ulcers (led by nurses) whilst the prosthetics and orthotics work extends to an entirely new area of service development (namely the skills in 'off-loading' orthotics). The goal is to establish, for the first time in Tanzanian and Ugandan public hospitals, diabetic foot clinics designed to interrupt the journey from a diabetes diagnosis to limb amputation.

## Weblink for Candidates

https://www.knowledge4change.org/projects-and-research/

### Eligibility

Applications are encouraged from health workers in Zanzibar (Tanzania) and Uganda. We are particularly interested in building a multi-disciplinary team including doctors, nurses, prosthetists and orthotists, physiotherapists, occupational therapists, and biomedical engineers.

#### **Proposed Fellowship Dates**

21/02/2024 to 21/05/2024

#### **Proposed Activity**

**Week 1:** When the Fellows arrive in the UK, we use the first week to support intensive induction, orientation and 'settling in'. This typically involves support with arrival documentation, accessing funding, travel arrangements, accommodation, communications (mobile phones and laptops), setting up Associate Accounts with our partners at the University of Salford to provide access to all programmes and libraries and IT support and transferable skills training.

**Week 2:** The 3rd day in week 2 will take the form of a team workshop where each Fellow presents a 5-slide PowerPoint presentation on themselves and their objectives. This usually involves some initial intensive skills training in IT, literature review, research methods and presentational skills (which will continue to be built on over the course of their fellowship) and creates the opportunity to engage across disciplines and as a team. Fellows will then hone their specific remit and area of expertise within the team and identify specific learning

objectives which will form the basis of their fellowship and enable them to effectively benchmark progression.

**Week 3:** Fellows will spend week 3 learning about diabetes as a non-communicable disease, with support from the lead for the MSc Diabetic programme at Salford University, and other experts within the School of Health and Society.

**Week 4:** Will focus on podiatry and exposure to common complications of diabetic foot with input from a podiatrist based at Salford University. Fellows will be able to attend the podiatry clinic linked to the University to gain valuable knowledge, skills, and experience.

**Week 5** will focus on exposing the Fellows to the latest technology in 3D scanning of diabetic feet and the printing/milling of bespoke insoles to support (off-loading). This will be led by a specialist in the use of this software. Fellows will be able to scan their own feet and see how they can 3D print insoles at the university. They will also be exposed to the milling process in the orthotics workshop.

**Week 6** will involve a placement at ALGEOS – a partner company in Liverpool that produces various diabetic foot products for several countries, including some LMICs.

**Weeks 7-9** will bring Fellows together to see how the skills they have learnt can enable them to begin to plan an intervention based on the establishment of diabetic foot clinics.

They will be supported to design and fully cost their intervention to ensure its affordability and maximise its sustainability.

**Weeks 10-12:** In the final two weeks, we will focus on generating a plan for the development of an intervention to establish diabetic foot care clinics in Fort Portal Regional Referral Hospital (Uganda) and Mnazi Mmoja Hospital (Zanzibar, Tanzania). This will include a written proposal to be shared in virtual meetings with the hospital directors.

### **Priority Theme**

Strengthening health systems and capacity