

The Canadian Association of Foot Care Nurses Competency Framework

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Introduction

The Canadian Association of Foot Care Nurses/Association Canadienne des Infirmières et Infirmiers en Soins de Pieds (CAFCN/ACIISP) is a non-profit organization founded by advanced foot care nurses from across Canada. Its mission is to enhance the lower limb and foot health of Canadians and advance the practice of foot care through collaboration and networking among all those involved in foot care.

CAFCN/ACIISP is proud to present the 2025 Competency Framework, a key document that defines the national competencies for advanced foot care nurses. This framework highlights the essential role of advanced foot care nurses in promoting foot and lower limb health, while also serving as a vital resource for healthcare professionals, policymakers, educators, and other interest holders (e.g., industry partners). The updated competencies will continue to strengthen and clarify the advanced foot care nurse's role, ensuring it is well-defined and widely understood.

In Canada, advanced foot care nurses are vital members of the healthcare team, primarily focused on preventing complications and skin breakdown. With an aging population and a rise in chronic diseases, professional foot care has become more essential than ever (Woroch, 2021). By conducting thorough assessments of the feet and lower limbs, advanced foot care nurses can identify abnormalities related to conditions like chronic diseases, cancer, trauma, and infections. They use their expertise to prevent complications, reduce pain, improve mobility, and educate patients on preventing foot issues and falls (Gallagher, 2012). Through proper hygiene, routine care, lifestyle advice, and referrals, they help improve patients' health and overall quality of life (Gallagher, 2012; Lazenby, 2024).

There is substantial evidence highlighting the value of preventative foot health services in reducing complications and enhancing the quality of life for individuals with chronic conditions such as diabetes, arthritis, peripheral arterial disease, and neurological disorders (Edwards et al., 2017). Advanced foot care nurses play a critical role in supporting and delivering integrated foot care. The 2023 guidelines from the International Working Group on the Diabetic Foot emphasize the importance of "integrated foot care" for patients with diabetes at risk for foot ulcers. This includes professional foot care, proper footwear, and structured self-

care education—interventions proven to prevent complications and reduce the impact of diabetes-related foot disease (Bus et al., 2023, p. 2).

The 2025 CAFCN/ACIISP Competency Framework serves as a practical guide for advanced foot care nursing practice. It is designed to inform and guide key interest holders—including clients, caregivers, primary care providers, industry partners, employers, educators, policymakers, and researchers—about the competencies required for advanced foot care nursing. Developed through a rigorous process, this framework aims to capture the role of the advanced foot care nurse’s role in Canada. It provides detailed information on the purpose, goals, and history of CAFCN/ACIISP, followed by an in-depth description of advanced foot care nursing practice. The framework also outlines the key assumptions, domains, and competencies essential to the field. We encourage all interest holders to engage with the framework and consider how it can be applied within their respective areas.

CAFCN/ACIISP Goals

1. **Collaborate** with healthcare providers across Canada to promote optimal foot care and improve client lower limb and foot health.
2. **Develop and implement** continuing educational opportunities related to lower limb and foot health.
3. **Support** a certification process for advanced foot care nurses in Canada.
4. **Promote** public awareness of lower limb and foot health and of the role of an advanced foot care nurse within the healthcare team.
5. **Facilitate** the development and mobilization of knowledge to contribute to the optimization of advanced foot care nurses’ roles in improving client lower limb and foot health.

History of CAFCN/ACIISP

Although nursing is regulated in Canada, advanced foot care nursing education and practices have been, and remain, unregulated for most provinces and territories, beyond the generic regulation of nursing groups in each province or territory. Between 2005 and 2010, efforts were made to establish national guidelines and certification for advanced foot care nurses in Canada. The first discussions with the Registered Nurses Association of Ontario (RNAO) and

the Canadian Nurses Association (CNA) in 2005 failed due to a lack of funds on the part of the newly formed volunteer-based Foot Care Nurses Network (FCNN), which had developed from these initial meetings. The concerns about advanced foot care nursing, cited during the meetings, included inconsistent, outdated, and unsafe foot care practices and education programs across Canada. The first meeting of the FCNN was held in Brockville, Ontario, with attendance by an advisory committee consisting of seven foot care nurses. In 2006, the FCNN completed a draft document which included a vision, purpose, values and goals for the network. However, shortly after this document was developed, the advisory committee members agreed to dissolve the network, due to the limited availability of the members.

In 2007, Foot Care Canada, a precursor to the CAFCN/ACIISP, was formed by fourteen advanced foot care nurses and educators who met at a foot care conference in Kitchener, Ontario. A consensus was reached to develop a national communication strategy and to adopt the name Foot Care Canada. Sixty foot care nurses, including many members of Foot Care Canada, members of the Certified Foot Care Nurses Interest Group (Manitoba), and foot care nursing educators met for a second time in 2007 in Winnipeg, Manitoba at a conference to discuss the future direction of a national foot care association. A draft position statement was presented and formalized by a newly formed ad hoc committee. A motion was passed to formalize the position statement.

In 2008, forty-five foot care nurses, including many members of Foot Care Canada, nursing foot care educators and managers from across Canada, met in Kingston, Ontario to discuss how to advance national foot care nurse guidelines for skills, education, and certification. The group agreed to develop a national communication strategy, such as a website that could reach foot care nurses across Canada, as part of the process of forming a new national foot care association. Foot Care Canada had a second committee meeting in 2008 in Halifax, Nova Scotia, to formalize the position statement, which included a mission statement, goals, and organizational structure. In attendance were five Foot Care Canada executives and eight provincial/territorial advisors. In 2009, Foot Care Canada met in Winnipeg and increased the number of provincial advisors to eleven. In 2010, Foot Care Canada was renamed and incorporated as the CAFCN/ACIISP. In May of 2010, CAFCN/ACIISP's first annual general meeting and annual national foot care conference took place in Kingston, Ontario.

At its annual meeting and conference in Richmond, British Columbia in 2013, CAFCN/ACIISP took steps to develop a competency document. The competencies were published in 2017 and provided increased clarity to advanced foot care nurses, employers, clients and the general public about what they can and should expect from advanced foot care nurses. They presented the basis for consistency across Canada in the development of advanced foot care nursing education programs and added to the quality of programs which use these competencies as their guide for curriculum development and program outcomes. Further, the competencies presented the foundation from which researchers can enhance and expand the knowledge base for advanced foot care nursing.

Advanced Foot Care Nurses

In Canada an advanced foot care nurse is a licensed nurse—such as a *Registered Nurse, License Practical Nurse, Registered Practical Nurses, Registered Psychiatric Nurse, or Nurse Practitioner*—who has completed specialized education in foot and lower limb health. These nurses provide client-centered, culturally competent care across various settings (e.g., acute care, long-term care, community, and private practice). They practice according to their nursing scope, are accountable to regulatory and ethical standards, and contribute to the growth of foot care nursing through collaboration, mentorship, and leadership.

The following describes the practice of advanced foot care nurses in the Canadian context:

- Advanced foot care nurses have a specialized body of knowledge of lower limb and foot health.
- Advanced foot care nurses have completed an advanced foot care nursing program that supports the development of competencies for critical thinking and clinical judgment to provide safe, competent and ethical advanced foot care nursing across the lifespan.
- Further development of advanced foot care nurses practice is facilitated through education, collaboration, and mentorship/preceptorship.
- Advance foot care nurse is not a protected title and can include nurses with any professional designation. The development and application of the listed competencies is at the practice level of a Registered Nurse, Licensed Practical Nurse, Registered Practical Nurse, Registered Psychiatric Nurse, and Nurse Practitioner following completion of an advanced foot care nursing course.

- Advanced foot care nurses hold current registration with the appropriate nursing regulatory body in their province/territory and provide client-focused services within their respective nursing scopes of practice.
- CAFCN/ACIISP does not deliver foot care nursing programs. There are many advanced foot care nursing programs across Canada that can be completed by nurses. CAFCN/ACIISP directs nurses to evaluate the program curriculum using the competency statements to ensure the program provides a comprehensive curriculum that addresses the competencies.
- Advanced foot care nurses are expected to accept responsibility and demonstrate accountability for their practice as per the Canadian Nurses Association Code of Ethics and the standards of practice for their regulatory designation and jurisdiction.
- Advanced foot care nurses practice independently and collaboratively as integral members within the health team across a variety of settings (e.g., acute care, long-term care, primary care, community, and private practice) to promote optimal lower limb and foot health.
- Advanced foot care nurses use their nursing knowledge base to support and advance the education and practice of nursing foot care.
- Advanced foot care nurses assume leadership roles in their areas of practice, in the health team, and in the advancement of foot care nursing (provincially/territorially and nationally).

Background and Methods

In 2024, the CAFCN/ACIISP Executive initiated the revision of the 2017 publication of the “National Competencies for Advanced Nursing Foot Care in Canada” to ensure consistency with current best practice evidence. Revisions are based on the results of an environmental scan, literature review, and interest holder consultation. The methods used to develop the 2017 competencies are available elsewhere (CAFCN, 2017) and the methods used for this revision are detailed in the Appendix.

Each competency is defined as an observable ability of an advanced foot care nurse that integrates the knowledge, skills, abilities, and judgements required to practice advanced foot care nursing safely and ethically. It is the intention of the CAFCN/ACIISP that the National Competencies for Advanced Nursing Foot Care in Canada be used for:

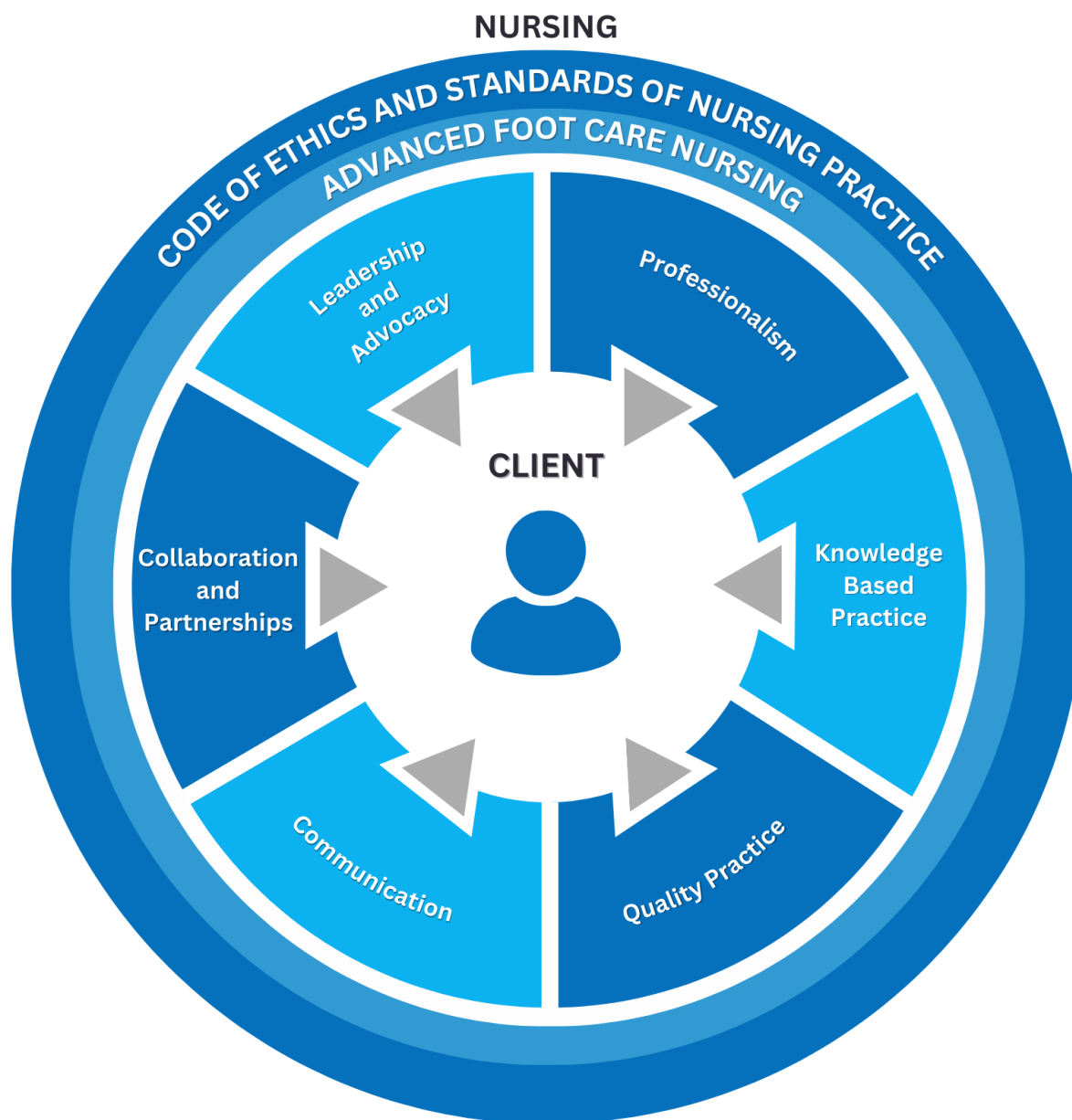
1. Informing curricula at the pre-licensure (undergraduate) and post-licensure (advanced foot care courses/programs) level focused on nursing care of the lower limb and foot
2. Guiding the for Canadian Nurses Association (CNA) advanced foot care nurse certification process.
3. Reference for other healthcare providers to understand the role of advanced foot care nurses.
4. Public and employer awareness of the practice expectations of advanced foot care nurses.

CAFCN/ACIISP Competency Framework

The CAFCN/ACIISP Competency Framework below reflects the revision to the 2017 Competency Framework. The CAFCN/ACIISP Board undertook revisions to ensure that the CAFCN/ACIISP competencies reflect current practice and effectively support the goals of CAFCN/ACIISP. Users of the framework need to distinguish the difference between a competency and a role. Competency refers to integrated knowledge, skills, judgement, and attributes (Canadian Council of Registered Nurse Regulators, 2018, p 1). Competencies represent a higher-level statement than specific roles, activities, or tasks. Specific activities and tasks are encompassed by a competency statement (Lukewich et al. 2019).

As with the 2017 CAFCN/ACIISP framework, the revised framework is client centred. The competencies are organized into six (6) overarching domains and places advanced foot care nursing under the umbrella of the Canadian Nurses Association Code of Ethics for Registered Nurses and Canadian Nurse Regulators Code of Ethics for Licensed Practical Nurses and the standards delineated by provincial/territorial regulatory bodies across Canada for each regulatory designation (Licensed Practical Nurses, Nurse Practitioners, Registered Nurses, Registered Practical Nurses, and Registered Psychiatric Nurses) (Canadian Nurses Association, 2017; Canadian Nurse Regulators, 2023). This alignment with the code of ethics and standards of practice ensures that the framework is not only comprehensive but also compliant with the highest professional standards.

Further, an overarching description is provided for each competency domain to organize the domains, provide clear direction regarding how they interrelate, promote clarity regarding the boundaries of the framework, establish relevance and application, and guide measurement and evaluation of the success of the competency framework.



The CAFCN competency framework is client-centred and organizes the competencies into six (6) domains and views advanced foot care nursing within the general framework of nursing, underpinned by the Code of Ethics and standards of nursing practice.

Assumptions

The following assumptions about the practice of advanced foot care nurses were made in the development of these revised and updated competencies. It is important to understand these assumptions as they provide context to the practice of advanced foot care nurses and provide guidance for the application of the competency statements.

1. Advanced foot care nurses hold current registration with their appropriate nursing regulatory body.
2. These competency statements build on entry-to-practice competency statements of Registered Nurses, Licensed Practical Nurses, Registered Practical Nurses, Registered Psychiatric Nurses, and Nurse Practitioners and reflect distinct competencies related to advanced foot care nursing that are not found in entry-to-practice competency documents.
3. Competencies represent broader “higher-level statements” than specific roles, activities, or tasks. Specific roles, activities, and tasks can be embedded within competency statements.
4. Advanced foot care nurses have completed an advanced foot care nursing program that supports the development of knowledge related to the lower limb and foot health and the competencies to provide competent advanced foot care.
5. Advanced foot care nurses promote optimal health, collaborating as integral members of the lower limb and foot health team in various settings (e.g., acute care, long-term care, primary care, community, and private practice).
6. Advanced foot care nurses assume leadership roles in their area of practice and in the advancement of nursing foot care (provincially/territorially and nationally).
7. The advancement of nursing foot care practice is essential to promote lower limb and foot health of all Canadians and prevent devastating complications related to chronic disease (e.g., wounds and amputations).
8. Within the competency statements, “*client*” refers to individual, family, and/or caregiver, and communities as appropriate.

Competencies for Advanced Foot Care Nurses

Domain 1. Professionalism

Advanced foot care nurses in Canada demonstrate professionalism in all aspects of their practice and in all contexts of care.

- 1.1 Maintain professional boundaries in the provision of advanced foot care nursing to clients in all contexts of care.
- 1.2 Practice in accordance with evidence-informed practices and policies relevant to advanced foot care nursing.
- 1.3 Participate in professional development activities related to foot care.
- 1.4 Contribute to capacity development of advanced foot care nursing through mentorship/preceptorship and teaching.
- 1.5 Articulate the roles and activities of advanced foot care nurses according to each nursing regulatory designation.
- 1.6 Advocate for optimization of advanced foot care nursing across all health settings.

Domain 2. Knowledge-Based Practice

Advanced foot care nurses collaborate on, develop, promote and facilitate best practices for client-centred health recognizing the impact of the environment on health. Further enhancing their nursing knowledge base, advanced foot care nurses integrate a specialized body of knowledge of lower limb and foot health into their daily practice.

- 2.1 Apply knowledge across the lifespan of anatomy and physiology, and pathophysiology of the lower limb and foot health.
- 2.2 Apply knowledge of co-morbidities and their effects on circulation, nerve function, and structure of the lower limb and foot.
- 2.3 Conduct a comprehensive lower limb health assessment
- 2.4 Monitor and evaluate a client's lower limb and foot health.
- 2.5 Understand the lower limb and foot health needs of clients with complex conditions common in foot care nursing practice.
- 2.6 Deliver nursing care for the common pathologies of the feet (e.g., corns, calluses, dystrophic nails, fungal infections, and other soft tissues pathologies).
- 2.7 Apply strategies to support client foot self-management.
- 2.8 Educate clients on resources and tools for foot self-management.
- 2.9 Coordinate care for clients with complex lower limb and foot health needs (e.g., follow-up care, consultation with other healthcare providers, and referral).
- 2.10 Address key determinants of health and health inequities as they impact the lower limb and foot health.
- 2.11 Apply the principles of infection prevention and control as they relate to foot care practice, instruments, and equipment.
- 2.12 Apply evidence-informed provincial/territorial and/or national guidelines related to re-processing and use of client-owned instruments.
- 2.13 Apply federal, provincial, territorial, municipal legislation and regulatory body standards and requirements for operating a nursing foot care business.
- 2.14 Integrate relevant evidence-informed practices into clinical decision making.
- 2.15 Participate in professional development activities focused on the lower limb and foot health.

Domain 3. Quality Practice

Advanced footcare nurses participate in processes to promote quality practice. They engage in reflexive practice, policy development, and implementation of knowledge-based care. They are committed to continuous quality improvement in advanced foot care nursing.

- 3.1 Participate in processes to promote quality practice (e.g., accreditation activities) related to the lower limb and foot health.
- 3.2 Engage in reflexive practice (e.g., critically appraise their own nursing foot care practice) to identify opportunities to enhance clinical competence.
- 3.3 Assist with/contribute to the development and implementation of evidence-informed policies that impact lower limb and foot health.
- 3.4 Collaborate with health team members across health settings to ensure quality practices related to the lower limb and foot health.
- 3.5 Maintain competence through hours of practice and continuing education.
- 3.6 Contribute to the development and implementation of tools that measure care outcomes of lower limb and foot health (e.g., quality of life, client satisfaction, foot complications).'
- 3.7 Use established tools to collect data related to lower limb and foot health.
- 3.8 Use clinical data and evidence-informed literature to support program development, implementation, and evaluation.
- 3.9 Promote a culture of quality improvement and safety.
- 3.10 Enhance the knowledge base of the specialty by contributing to and/or participating in foot care research

Domain 4. Communication

Advanced foot care nurses provide care to clients in the context of professional, therapeutic, business communications and relationships. They are conscious of maintaining boundaries in those relationships in every context of care to protect clients from potential harm or exploitation.

4.1 Utilize evidence-informed communications with clients and other healthcare providers in the provision of advanced foot care nursing.

4.2 Engage in respectful and supportive communication with members of the intraprofessional and interprofessional health team that supports optimal foot care and client lower limb and foot health.

4.3 Exchange knowledge amongst interprofessional health team members to promote excellence in advanced foot care nursing practice.

4.4 Use advanced foot care nursing knowledge to educate and support the client's achievement of lower limb and foot health.

4.5 Provide support and education to individuals within the client's identified support system to support the client's achievement of lower limb and foot health.

4.6 Use communication strategies and tools (e.g. information and communication technology such as documentation systems, virtual care) in a secure and confidential manner to effectively manage client care related to lower limb and foot health.

Domain 5. Collaboration and Partnerships

Advanced foot care nurses are conscious of the need to coordinate care for their clients through collaborative networks and relationships which promote the lower limb and holistic health of each individual client.

- 5.1 Collaborate with other healthcare providers to provide comprehensive lower limb and foot health services to clients.
- 5.2 Collaborate with health and non-health organizations to promote optimal lower limb and foot health and well-being of clients.
- 5.3 Understand the roles and responsibilities of regulated and unregulated healthcare workers involved in the provision of lower limb and foot care.
- 5.4 Apply professional judgment in alignment with legislated scope of practice to the delegation of care to other healthcare providers.
- 5.5 Facilitate the organization practices that support continuity of care of lower limb and foot health across the lifespan.
- 5.6 Engage in inter and intra sectoral care communication and strategies that support foot care for clients with complex health and social needs.

Domain 6. Leadership and Advocacy

Advanced foot care nurses seek to advance the practice of nursing foot care and to make advanced foot care nursing services accessible to all Canadians. They use their influence to support clients in advancing their health and to advocate for evidence-informed practice.

6.1 Advocate for resources to improve the quality of, and access to advanced foot care nursing.

6.2 Advocate for healthy public policy that addresses and/or has an impact on lower limb and foot health.

6.2 Provide education to the public, government and other interest holders about the specialty of advanced foot care nursing and importance of lower limb and foot health to overall health and well-being.

6.4 Provide mentorship/preceptorship and support opportunities for advanced foot care nurse colleagues and students to further develop advanced foot care nursing practice.

6.5 Deliver foot care programs to clients and/or communities to support health promotion, disease prevention, and rehabilitation related to lower limb and foot health.

Glossary

Best Practices: *Best practices are systematically developed statements of recommended practice in a specific clinical or healthy work environment area, are based on best evidence, and are designed to provide direction to practitioners and managers in their clinical and management decision making (Field & Lohr, 1990)*” (RNAO, 2012, p. 7). Best practice recommendations may evolve as new evidence or new insights from key expert experiences emerge (Health Canada, 2008).

Client Centred: an approach in which clients are viewed as whole persons; it is not merely about delivering services where the client is located. Client centred care involves advocacy, empowerment, and respecting the client’s autonomy, voice, self-determination, and participation in decision-making (Registered Nurses Association of Ontario, 2002).

Competency: An observable ability “that integrates the knowledge, skills, abilities, and judgment required to practice nursing safely and ethically” (Canadian Council of Registered Nurse Regulators, 2018, p 1).

Cultural Competence: Refers to the ability of foot care nurses to reflect on their own cultural values and recognize how these influence the care they provide. This includes the ability to understand and respect the beliefs, values, and attitudes of individuals from diverse cultural backgrounds, and to integrate this understanding into all aspects of care planning, implementation, and evaluation—taking into account cultural health beliefs, patterns of disease, and the effectiveness of treatments (Government of Canada, 2023).

Documentation Systems: is the creation of a digital record or analog records detailing the care provided to the client.

Environment: Advanced foot care nurses understand that clients exist within and interact with a complex environmental system—including their family and social networks, community, healthcare system, and broader geopolitical context (Perry et al., 2024).

Evidence-Informed Practice: “a continuous interactive process involving the explicit, conscientious, and judicious consideration of the best available evidence to provide care. It is essential to optimize outcomes for individual clients, promote healthy communities and populations, improve clinical practice, achieve cost effective nursing care and ensure accountability and transparency in decision making within the healthcare system (CNA, 2017, p.27). Evidence informed practice reflects evidence informed decision-making that considers research evidence, clinical expertise, evidence from assessment (e.g., history, physical and psychological assessment, available resources) and client preferences and values (Perry et al., 2024).

Health Team: A health team can be seen as “a collection of individuals who are interdependent in their tasks, who share responsibility for outcomes, who see themselves and who are seen by others as an intact social entity embedded in one or more larger social systems and who manage their relationships across organizational borders (Health Quality Ontario, 2012). CAFCN

considers any healthcare provider who participates in the care of the client, including the client and those in the client's identified support system as a member of the healthcare team.

Identified Support System: Support persons are those identified by the client as part of their care network and may include individuals who are involved in their care or have access to related information. This support can consist of family, friends, community members, companion animals, or any other source the client deems meaningful.

Information and Communication Technology: Includes all digital and traditional technologies (i.e., analogue) that enable the collection, processing, storage, and sharing of information through electronic communication (Canadian Association of Schools of Nursing, 2012, p.13).

Knowledge-based practice: CAFCN/ACIISP defines knowledge-based practice as an approach in which decision-making, actions, and strategies are guided by expertise, evidence-informed practice, and information. It emphasizes using critical thinking, research, data, experience, best practices, and continuous learning to enhance effectiveness, improve client outcomes, and foster continuous learning and improvement.

Mentoring: is a continuous, mutual, and collaborative relationship between two or more individuals who share common or aligned goals. It involves a commitment to support and empower one of the individuals to achieve their goals (CNA, 2021).

Preceptorship: Preceptorship is a structured process in which an experienced and competent nurse provides guidance and support to facilitate the learning and development of a learner. It involves a one-on-one relationship of defined duration, designed to help the learner adapt to and succeed in a new role (CNA, 2004)

Reflection: In advanced foot care nursing practice, reflection involves the nurse's self-awareness and ability to assess client responses in collaboration with the client—both during care delivery and after care is completed—in order to evaluate the effectiveness and quality of their practice. (Perry et al., 2024).

Reflexive Practice: this term is derived from qualitative research. In the context of advanced foot care nursing, it entails the ability and willingness of foot care nurses to acknowledge and take account the many ways they themselves influence the care they provide.

Specialty: In the context of this document, this term refers to a particular area of nursing practice that require additional training. Similarly, one could refer to any other area of nursing as a specialty. Often defined by type of patient population or the types of care. The Canadian Nurses Association recognizes 22 areas of nursing specialties through their certification program (CNA, 2024). The term is not intended to imply that a nurse working in this specialty is a “specialist”.

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Appendix

Method

The update and revision of the CAFCN/ACIISP Competency Framework occurred between August 2024 – May 2025 and involved an environmental scan, literature review, and consultations.

Environmental Scan: The environmental scan included obtaining key documents that guide the practice (i.e., roles and activities) of advanced foot care nurses across Canada. Canadian provincial/territorial Government and professional regulatory websites were searched. Consideration was given to how the CAFCN/ACIISP Competency framework would not overlap but align and build on existing entry level competency documents.

Literature Review: A literature search was undertaken with assistance from Michelle Swab, a librarian at Memorial University to identify resources and literature that apply to advanced nursing foot care practice in Canada. Using CINAHL the literature was searched using the following terms with no limits on timeframe and country: MH "Foot Care" OR TI foot OR TI feet OR AB "foot care" OR MH "Podiatric Care" OR MM "Diabetic Foot" OR MM "Foot Ulcer") AND nurs* AND (TI advanced OR TI speciali* OR MM "Clinical Nurse Specialists" OR MM "Advanced Practice Registered Nurses" OR MM "Advanced Practice Registered Nursing") AND LA English. Thirty-five results were obtained after screening for relevance only one article met the inclusion criteria. A further search was undertaken for recent systematic reviews focused on chronic disease and preventative footcare. A 2024 well-conducted review was retrieved and included in the Competency Framework document.

Consultations: Several rounds of consultations were undertaken. Dr. Julia Lukewich (Associate Professor, Faculty of Nursing, Memorial University) provided feedback and direction of an initial draft (September 2024) and subsequent draft (November 2024) of the updated competency document. Consultations occurred with the members of the CAFCN/ACIISP Board and Portfolio Certification Committee. In September 2024 a Qualtrics survey was sent to Board members asking them to rate each competency using the following scale 1 = not important at all; 6 =

extremely important). Board members were also provided with an opportunity for written feedback and suggestions. Seven CAFCN/ACIISP Board members completed the survey and no statements were rated below 3 with most statements receiving a 5-6 rating. Based on this consultation no competencies were removed from the document and no revisions were made. In November 2024 CAFCN/ACIISP members were invited to provide feedback on the competency statement using the same scale. Sixty-nine members responded to the survey. A small percentage of respondents rated 14 statement less than 3 on the scale (range 1%-3%). No revisions were made to the document based on the ratings and qualitative comments. In April 2025 a clear and concise definition of advanced foot care nurse was approved by the Portfolio Certification Committee, and several terms—such as mentoring, preceptorship, cultural competence, and reflection—were added to the Competency Framework document glossary.