Collaboration in the Community

ICC Diabetes Clinical Network

16 August 2018

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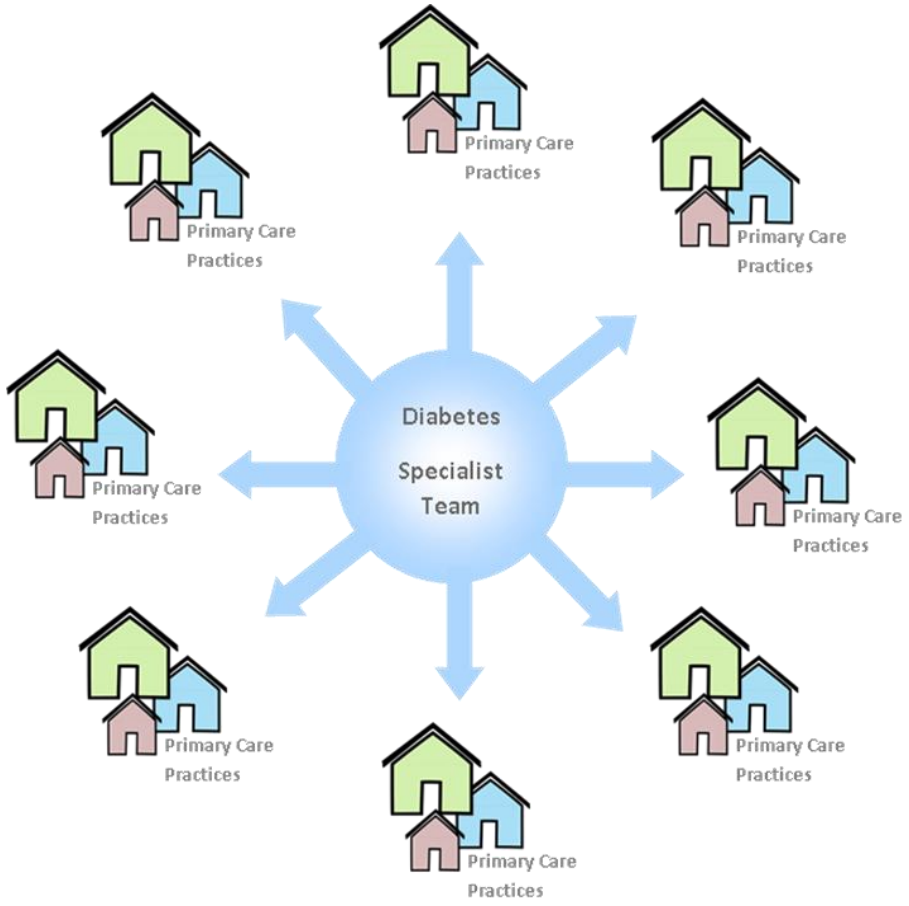
CCDHB model for diabetes care



Service Components:

- Diabetes population focus – primary care
- Specialist focus
- Case collaboration in priority practices
- Nurse Practice Partnership
- Workforce development
- Combined primary /secondary Clinical Network

Key Goals:

- Quality services to the population that needs it
- Foster patient self-management
- Maximise skills and confidence of workforce

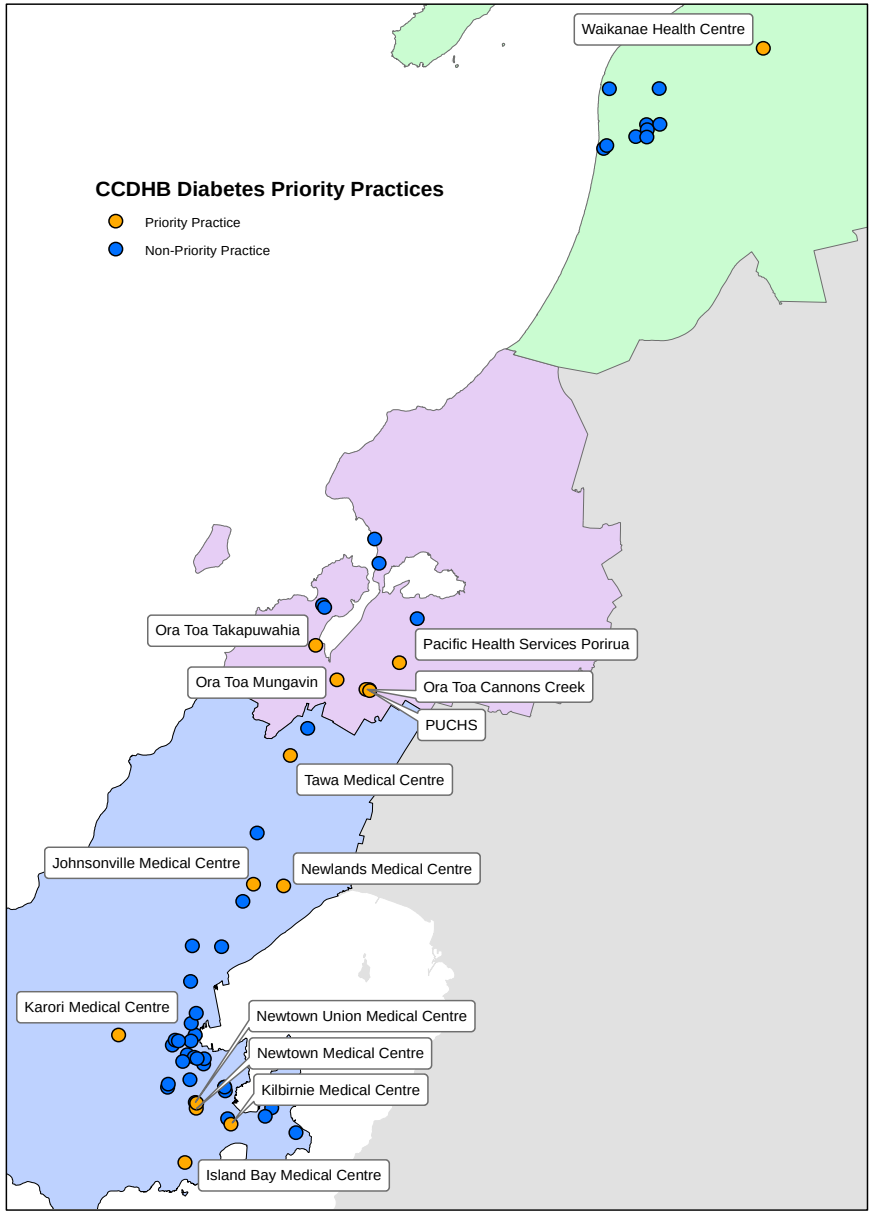
Priority Practices:

We have identified and selected 15 priority practices based on the following criteria:

- Largest number of people 15-79yrs with diabetes
- 59 percent of Māori patients with diabetes diagnosis enrolled in a priority practice
- 83 percent of Pacific patients with diabetes diagnosis enrolled in a priority practice
- Overall, 56 percent of patients with diabetes are enrolled in priority practice
- One additional practice to explore the service model

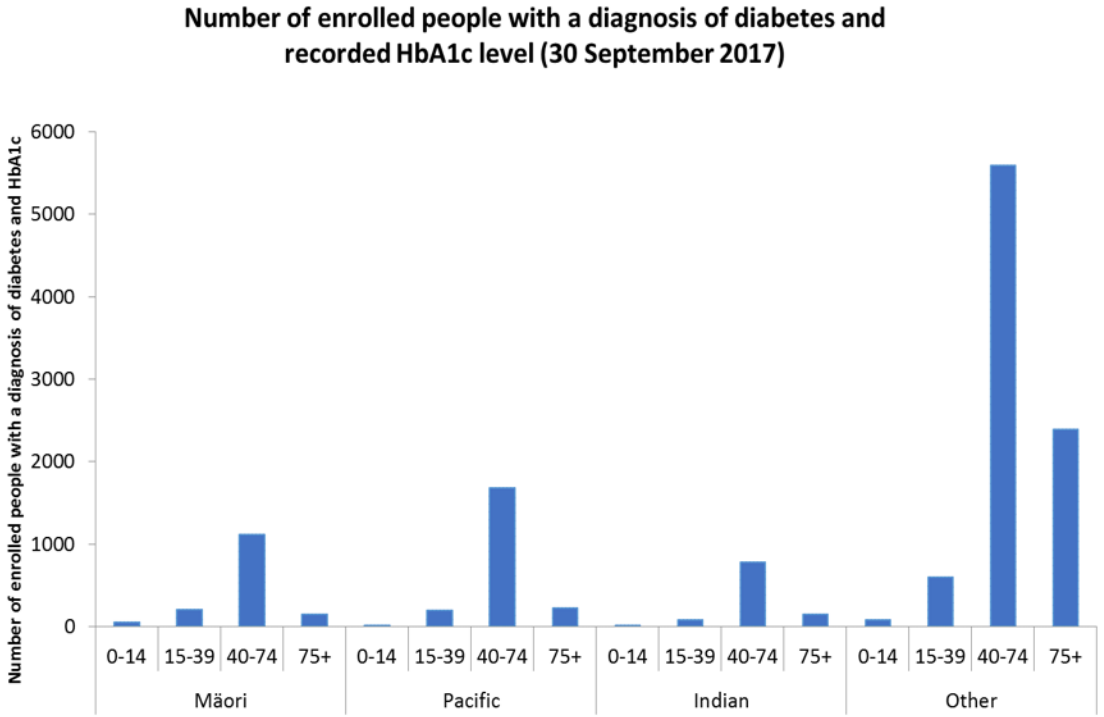
Priority Practices:

- Waikanae Health Centre
- Pacific Health Services
- Ora Toa Cannons Creek
- Ora Toa Takapuwahia
- Ora Toa Mungavin
- Porirua Union Community Health Service
- Tawa Medical Centre
- Johnsonville Medical Centre
- Newlands Medical Centre
- Karori Medical Centre
- Newtown Union Medical Centre
- Newtown Medical Centre
- Kilbirnie Medical Centre
- Island Bay Medical Centre

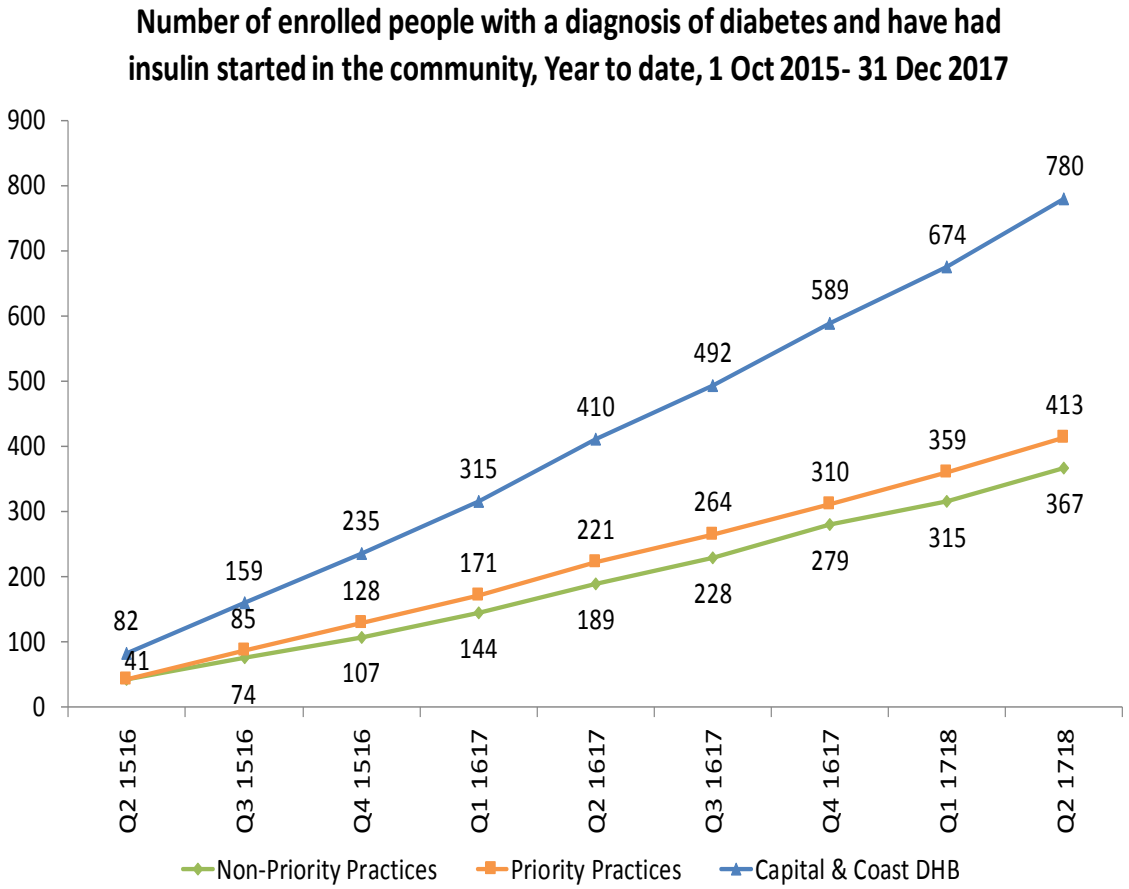


Our population

- **13,292 people with diabetes (2017)**
  - 1,506 Māori (11%)
  - 2,116 Pacific (16%)
  - 4% of total CCDHB population



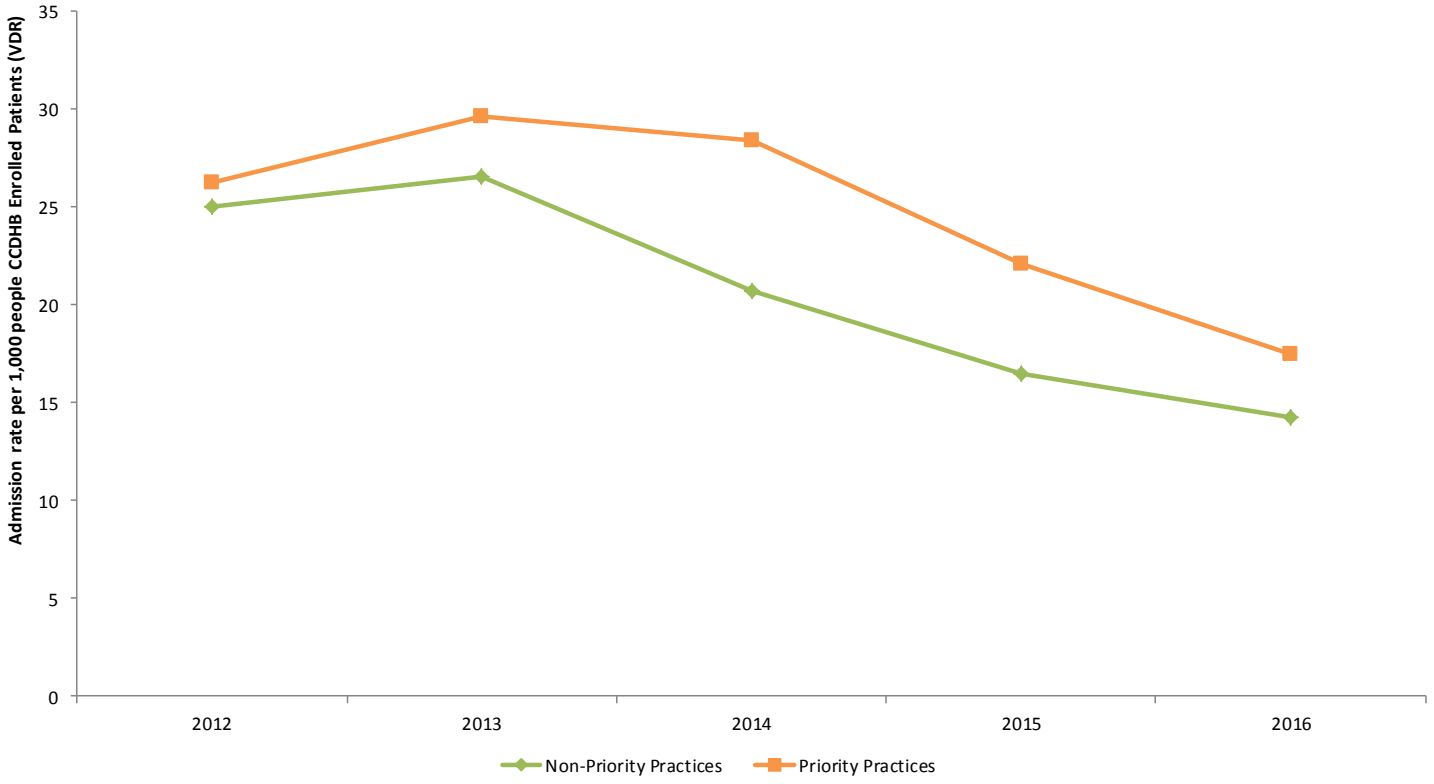
Insulin starts in the community



- Impact of increase in nurse education uptake
- Ongoing evolution – Increasing titration via patient portal
- Increase insulin uptake in the community
- Decrease rates of acute admissions for diabetes
- Increase patient capability for self care and diabetes management

Acute Admissions

Rate of Acute admissions per 1,000 CCDHB Enrolled Patients on VDR to Capital & Coast DHB facilities for Diabetes (Primary Diagnosis, ICD10 E09-E14 & E162), 12 months to 31 Dec



Areas of focus in 18/19

- **Focus on Pacific and Maori 15-39 yrs engagement with practices, and seeking creative options to engage this group, as there is a:**
  - High percentage of unknown HbA1c levels
  - High percentage with HbA1c level >81 <100 (mmol/mol)
  - High percentage of Pacific youth with HbA1c level > 100(mmol/mol)

- **Foot Protection Service:**
  - Developing a Model of Care for integrated management of the Diabetic foot across primary, secondary and tertiary care settings

- **Renal screening:**
  - To identify & treat any complications early

Thank You