

## Patient vignette ICDM – Wimmera PCP

Until two years ago, Ian was struggling to manage his diabetes, attend appointments and felt 'absolutely lousy'. Things changed for Ian when he was referred by his GP to the West Wimmera Health Service Diabetes Multidisciplinary Team at the Natimuk Campus.

"For 20 years I'd been ignoring my diabetes and would only see the doctor when I was really feeling crook" says Ian. "I was the worst diabetes patient and wasn't dealing with it at all. But then I started seeing the Diabetes Team at WWHS Natimuk and it's made such a huge difference to how I feel".

Natimuk is a small rural town (population 659) in the Wimmera wheat belt with the closest major centre 20 minutes away by car and very limited access to public transport. For rural patients, transport is a major barrier to accessing services and driving to appointments is part of life – let alone driving to multiple appointments when you have a chronic condition.

"West Wimmera Health Service began providing a regular Diabetes Nurse Education service in Natimuk in 2009. We also began a project with the Wimmera Primary Care Partnership (PCP) to improve communication between the General Practice in Natimuk and the Health Service – which was very successful" say Lesley Robinson, Diabetes Nurse Educator. "This led to a dramatic increase in referrals for diabetes patients and WWHS began providing Podiatry and Dietetics to meet demand and in 2011 we became a multi-disciplinary Diabetes Team" she says.

The multi-disciplinary Diabetes Team has been working closely with the Wimmera PCP using small cycles of improvement for many years now and the current 2012-2013 work has been focusing on monitoring and review of diabetes clients. Services and care for diabetes patients at Natimuk have improved so that patients now receive a full cycle of diabetes care – and the team now keep a database of relevant clinical results and care plan goals reached to demonstrate that the improvements in care are having a direct impact on the health of the community.

"When Ian was first referred to our clinic, he had not previously gone to see a podiatrist or a Dietitian who are essential for good diabetes care. Before coming to the Natimuk Diabetes Team, Ian was feeling worse and worse, was unable to make any changes and he found it was all too hard" says Janet Yong, Team Dietitian. But things started to change for Ian – for the better.

That's because WWHS introduced the multi-disciplinary team (MDT) at Natimuk where patients such as Ian could have their GP appointment with the Diabetes Nurse Educator in the same room and then referrals could be made immediately. Further appointments with the Podiatrist and/or Dietitian could be scheduled on the same day as the next GP consultation. "This makes it much easier for rural patients to attend their appointments as many travel in from surrounding farms and they now don't need to travel so far to get the best diabetes care" says Sarah Natali, the Team Podiatrist.

"It is so good for me to have a diabetes team like this who I can see on the same day as I have to borrow a car or get a lift to my appointments – and I travel in from Horsham to get this level of team care as it isn't offered there" says Ian. "They all know what my goals are and they know what is happening for my health – and I feel I am part of the team too".

Janet Yong (Dietitian) has been part of the Diabetes team over the past 2 years and she has seen what the effect of working as part of a team with each patient has been. "The team approach works really well as it is much easier to discuss a patient's management plan as we work closely together and can discuss the practicality of the patient's goals – and where our part of that fits" says Janet. "During 2012-2013 we have been working with the Wimmera PCP to improve our monitoring and review of our clients – and to understand whether this MDT approach and a full cycle of diabetes care was having a positive effect on the patient's clinical results. We've just analysed the data and the preliminary results indicate that this is the case".

For Ian, his results show just how much better his diabetes is and that he understands what the results mean. “My HbA1c’s were 14 when I first came to the clinic. Lesley the Diabetes Nurse Educator can’t believe that I got it down to 9, and I’m now sitting on 5.9. I was also a dietitian’s worst nightmare as I have never eaten well. But Janet has widened my scope for eating better for my health” says Ian.

Attending the diabetes clinic at Natimuk has given Ian a whole new outlook on his diabetes. “I was really out of control and didn’t understand how dangerous my diabetes was. The levels of medication and how I was self medicating meant that I might not have woken up the next morning as I was taking such high dosages of insulin – but that’s changed now. I am now on track working with the best group of people to help me deal with my diabetes and I feel so much better – definitely” says Ian.