

Diabetes Care- management and Assessment Service (DCAS) is held at Health and Rehabilitation Centre (HRC) at Repatriation campus Thursday and Fridays.

Thursday: Education and Diabetes Management Clinic. Friday: Endocrinologist Clinic

Department of Health clinical urgency categories for specialist clinics					
<p>Urgent: Referrals should be categorised as urgent if the patient has a condition that has the potential to deteriorate quickly, with significant consequences for health and quality of life, if not managed promptly. These patients should be seen within 30 days of referral receipt. For emergency cases please send the patient to the Emergency department.</p>					
<p>Semi Urgent: Referrals should be categories as Semi Urgent that has the potential to deteriorate within 30-90 days.</p>					
<p>Exclusions:</p> <p>INSULIN PUMPS: - Refer to Endo Diabetes OP NEWLY DIAGNOSED / UNCOMPLICATED Type 2: To be managed by GP. Please refer to RACGP General Practice Management of Type 2 Diabetes. https://www.racgp.org.au/your-practice/guidelines/diabetes/ (CHC/ diabetes educator / podiatrist / dietician/ dental/ optometry / psychology etc.)</p> <p>At our discretion patients with multiple co –morbidity might be triaged to: Older Persons Complex Care (OPCC): General Medicine or Health Independence Program (HIP) Geriatrician</p>					
Condition / Symptom	GP Management	Investigations Required Prior to Referral	Expected Triage Outcome	Expected Specialist Intervention Outcome	Expected number of Specialist Appointments
<p>Type 1, Type 2 Diabetes with complication.</p> <p>AND</p> <p>People with chronic and complex care needs, physical and psychosocial, and frequently using hospital services</p>	<p>When to Refer: If previous medication management has not achieved good results Optimise medications, refer to https://www.racgp.org.au/your-practice/guidelines/diabetes/8-managing-glycaemia/82- Frequent ED presentations for any reason Benefit from Case Management</p>	<p>Referral MUST HAVE the following for triage to proceed Medical history and examination Medication list</p> <p>Imaging: N/A</p> <p>Diagnostics Pathology (less than 3 months old <u>OR</u> name of pathology provider so we can access pathology tests)</p> <p>Fasting glucose,</p>	<p>Urgent: Within 2 weeks. Patient may see diabetes educator initially for assessment who will initiate treatment plan.</p> <p>Semi Urgent: Within 6 weeks. Patient may see diabetes educator initially for</p>	<p>The referral is valid for one year.</p> <p>We aim to discharge back to GP for ongoing management.</p> <p>And Care Plan management with CHS diabetes educator , (or GP practice diabetes educator)</p>	<p>Endocrinologist - 3-4 appointments over 12 months (or shorter duration if indicated)</p> <p>Additional appointments with diabetes educator, dietician, other allied health as indicated.</p>

Department of Health clinical urgency categories for specialist clinics					
Condition / Symptom	GP Management	Investigations Required Prior to Referral	Expected Triage Outcome	Expected Specialist Intervention Outcome	Expected number of Specialist Appointments
<p>People at risk of, unplanned, avoidable hospital admission for any reason, not only diabetes related.</p>	<p>GP TRIAGE TOOL</p> <p>Appendix 1 Below.</p>	<p>Fasting TC, Tg, HDL, LDL, U&E, LFT, HbA1c.</p> <p>Spot Urine /ACR, MSU</p> <p>Please instruct patient to bring the following to appointment</p> <ul style="list-style-type: none"> • blood test results • blood glucose meter <p>all medications</p>	<p>assessment and initiate treatment plan</p>	<p>If DCAS attendance is still clinically indicated after 12 months a new referral will be required from GP</p>	

NORTH EAST ADULT DIABETES TRIAGE TOOL

	TRIAGE ELIGIBILITY	STREAM OF CARE	AVAILABLE SERVICES
Client's presentations include ONE OR MORE of the following	<ul style="list-style-type: none"> ■ Pre-diabetes ■ e GFR >60(mL/min/ 1.73m²) ■ Newly diagnosed T2DM irrespective of HbA1c or BGLs ■ Sub-optimal diabetes management 	STANDARD Care Pathway Type 2 DM	Community Health <i>Banyule CH</i> T: 9450 2000 F: 9450 2662 <i>Darebin CH</i> T: 8470 1111 F: 8470 1107 <i>Nilumbik Health</i> T: 9430 9100 F: 9431 0339
	<ul style="list-style-type: none"> ■ HbA1c > 69mmol/mol (> 8.5%) ■ Newly diagnosed T2DM; unstable BGL for 3 months ■ Recent Hypoglycaemic episode (on medication) ■ T2DM requiring insulin initiation or titration ■ On corticosteroids (prednisolone or dexamethasone) regardless of HbA1c e GFR <60 (mL/min/ 1.73m²) 	INTERMEDIATE Care Pathway	Community Health <i>Banyule CH</i> T: 9450 2000 F: 9450 2662 <i>Darebin CH</i> T: 8470 1111 F: 8470 1107 <i>Nilumbik Health</i> T: 9430 9100 F: 9431 0339
	<ul style="list-style-type: none"> ■ Active foot pathology with a history of complications (e.g. History of digit/limb amputation or foot ulcer) ■ Severely elevated Triglycerides (>11.2mmol/L) ■ eGFR <60 and BP >140/80 requires Endocrine referral as early intervention is critical to prevent renal complications 	Type 1 Diabetes LADA & Type 2 Diabetes	Austin Health (HIP- Central Intake) T: 9496 2211 Diabetes Complications & Assessment Service F: 9496 4337
	<ul style="list-style-type: none"> ■ Recurrent hypoglycemia (requiring assisted management) - BGL <4 mmol >2 per week - for outpatient appointment with a RN CDE/DE within a week from receipt of referral ■ Active foot ulcer or wound - for outpatient appointment within 1 week from receipt of referral ■ Recent Diabetic Ketoacidosis (DKA) - must be followed up by RN CDE /DE or DNP within 48 hours of discharge and Endo outpatient appointment made as per discharge summary/referral. ■ Hyperosmolar Hyperglycemic State (HHS) - must be followed up by RN CDE /DE or DNP within 48 hours of discharge and Endo outpatient appointment made as per discharge summary/referral. ■ Type 1 and Latent Auto-immune Diabetes in Adults (LADA) for insulin commencement stabilisation - must be followed up by RN CDE/DE or DNP within 48 hours of discharge and Endo outpatient appointment made as per discharge summary/referral 	URGENT Care Pathway Brief intervention Stabilisation & transfer	Austin Health Priority appointment at Austin Health Endocrinology Clinic (MBS) T: 9496 5000 ask for the DM Ed or DM Reg on-call F: 9496 3234

(May 2015)

Appendix 1.