



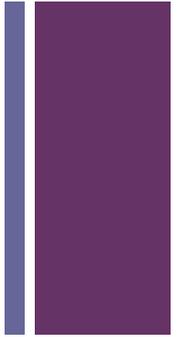
Setting Up A Chronic Disease Management Clinic

Julia Slade RN BSc (Hons)
Castle Hill Medical Centre

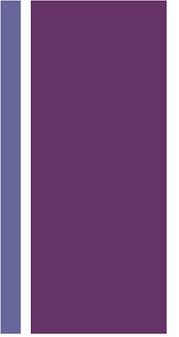


Let me introduce myself...

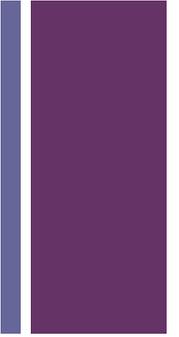
- I work part-time in a GP clinic practice running a chronic disease management (CDM) clinic.
- I see anywhere between 4 and 6 patients a day.
- I do most of the GPMP's etc for patients with chronic diseases, as well as all the adult health assessments.
- In the past 12 months the number of GPMP's completed by the clinic has tripled, the number of DCOC's has more than multiplied 5 fold and I have brought in an extra \$50k to the practice...
- ...not bad for just 2 days a week!



+ So how did I do it?



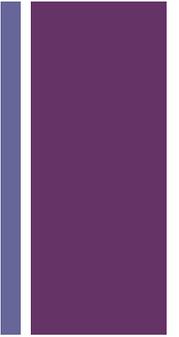
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In 10 easy steps!

+ Step 1 - Start off small.

- Don't try to have a full chronic disease clinic fully up and running with all diseases covered straight away. Otherwise it can be to overwhelming.

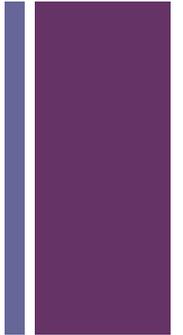


+ Step 1 - Start off small.

- Don't try to have a full chronic disease clinic fully up and running with all diseases covered straight away. Otherwise it can be too overwhelming.
- In my case I decided to start off with diabetes as that is where my interest lies.



+ Step 2 - Clean up your data system.



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 - Search for any patients taking specific disease related medications or who have had certain tests e.g. HbA1c and if appropriate code them correctly too.

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 - Search for any patients taking specific disease related medications or who have had certain tests e.g. HbA1c and if appropriate code them correctly too.
 - Inactivate pts who have not been at the clinic for 2 years or more, were visiting from interstate etc or have known to have moved away and changed doctors. DON'T delete them completely, they may return!!

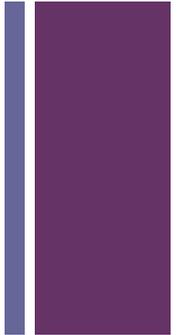
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 - Remove pts who are deceased.



Step 3 - Take a snap shot of where your practice is currently at.

- Find out what your practice is currently doing with regards to chronic disease management in your chosen area.





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- Use your data retrieval systems to see where you currently 'sit', e.g.
 - How many patients on GPMP's in past 12 months?
 - How many patients completed their cycles of care?
 - How many patients are on record as having your chosen chronic disease.



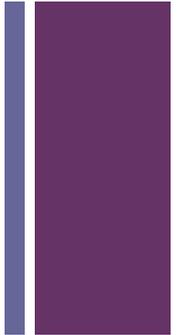
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 - How many patients on GPMP's in past 12 months?
 - How many patients completed their cycles of care?
 - How many patients are on record as having your chosen chronic disease.
- Record your findings and keep them safe, they are invaluable to monitor your progress.



Step 4 - Develop your resources/ protocols/procedures.

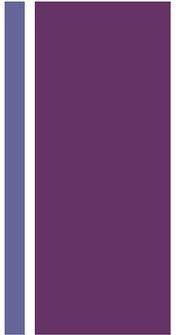


- Before you start make sure you have the resources/procedures in place to give your patients the best care possible.

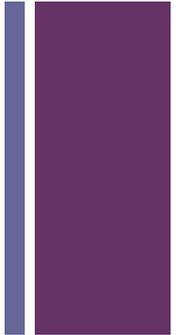
Ask yourself these questions?

+ Step 4 - Develop your resources/ protocols/procedures.

- **How you are going to advertise the clinic, invite patients to attend and recall them for future consultations?**

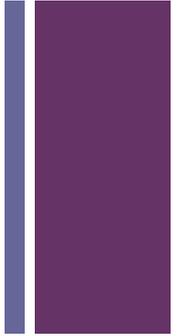


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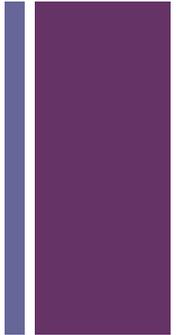
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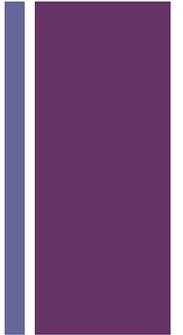
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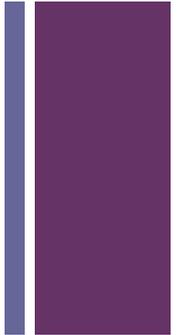
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 - Develop an invite letter.

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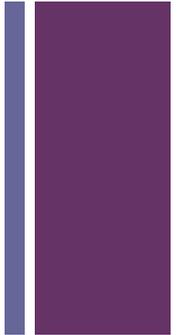
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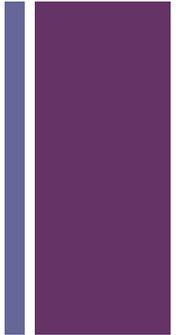
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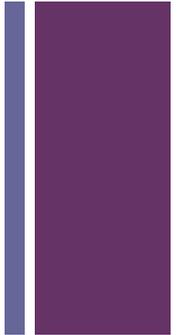
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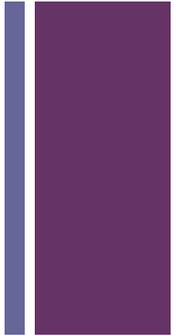
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 - Remember that your patients will need to see their usual GP after seeing the practice nurse to get paperwork reviewed and so that item numbers can be billed to Medicare.

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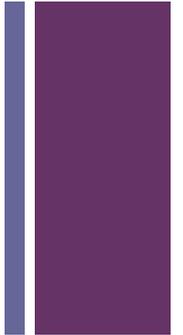
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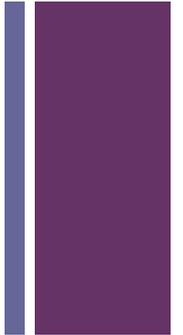
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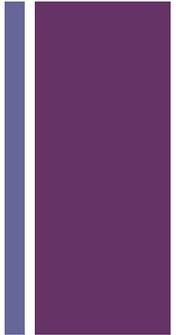
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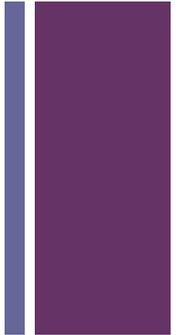
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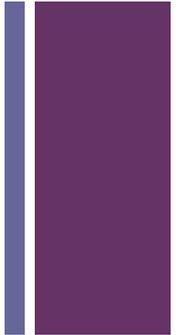
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 - Is there a system to communicate what the GP wants you to do with a patient, e.g. internal email etc.

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- **How long will an appointment take?**

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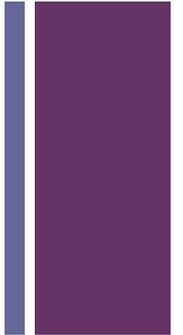
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60 minutes for a newly diagnosed pt (due to extra education required).

45 minutes for a new patient.

30 minutes for a review.

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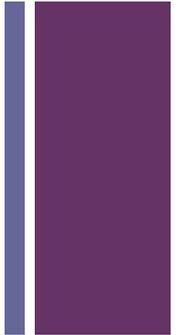
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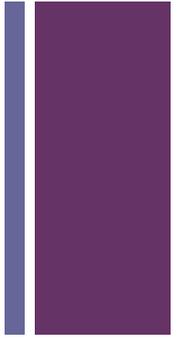
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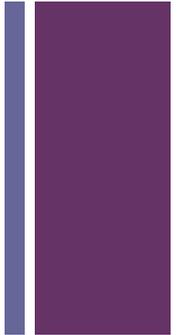
- I like to have half an hour at the start of the day to go through the notes of that's days clients to see what needs to be done for them.
- It's a good idea to give yourself at least 30 mins a day to follow up leads, chase blood results etc.

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- **What paperwork do I need?**



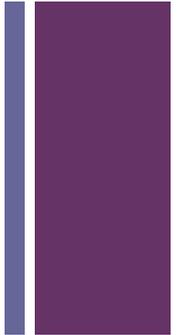
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- **What paperwork do I need?**
- Pre-written care plans.
 - Check out the following websites for great templates:
 - www.nevdgp.org.au (North East Valley Division of GP)
 - www.monashdivison.com.au (Monash Division of GP)
 - www.brisbanesouth.com.au (Brisbane South Division of GP)

These can be loaded up onto your medical software system (e.g. Letterwriter in MD3) to use during consultations.

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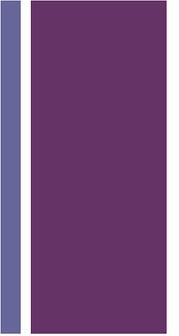
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- Pre-written letters/forms etc. I made up a DCOC checklist, invite letters and referral letters.

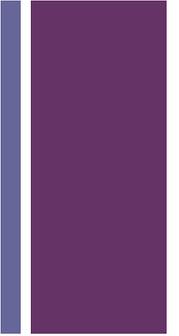
+ Step 5 - Ensure you have the correct equipment/resources.

- As a minimum you will need to have at least access to:



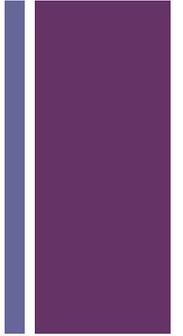
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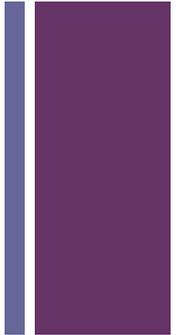
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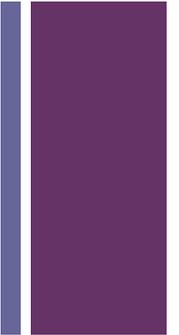
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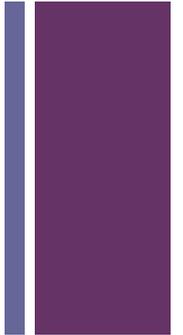
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 - An office where you can have consultations in private.
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 - A telephone.
 - Weighing scales, height chart, tape measure, visual acuity chart, glucometer, sphygmomanometer.

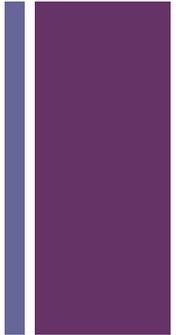


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 - Guarded time to carry out consultations without interruptions.

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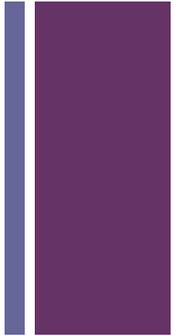
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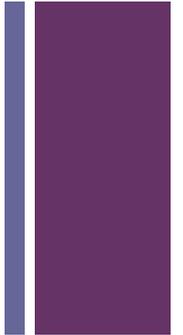
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- Posters and other educational tools



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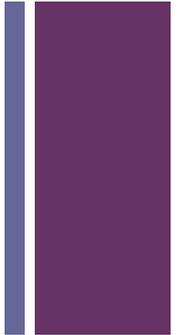


It will also help if you have the following:

- Posters and other educational tools
- Training equipment e.g. Insulin pens, glucometers and lancets to show patients how to use their equipment.



5 - Ensure you have the correct equipment/resources.



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- Posters and other educational tools
- Training equipment e.g. Insulin pens, glucometers and lancets to show patients how to use their equipment.
- Other patient support resources such as BGL diaries, recipe books, education leaflets, support group information etc to give to patients.

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Most of these things can be got form your various drug reps so make sure you get in contact with them!

+ Step 6 - Make contact and build relationships in the community.

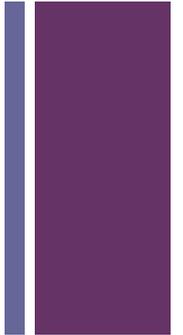
Get in contact with potential referral personal e.g.

Physiotherapists	Podiatrists
Occupational therapists	Ophthalmologists
Dieticians	Exercise physiologists
Diabetes/Asthma/Cardiac Educators	Qld Health Community Teams
Pharmacists	Dentists

Try to find people that you can build relationships with, that will work within the EPC programme and will bulk-bill patients if possible. Ensure they will report back to you at regular intervals.

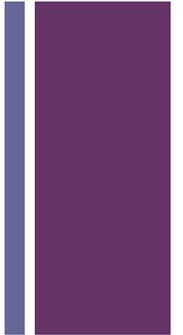
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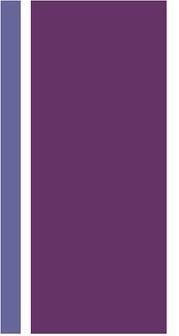


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- Sort your patients into the order you wish to see them e.g.
 - priority to be seen,
 - alphabetically or
 - by birthday.

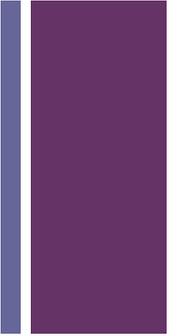
+ Step 8 - Invite your clients.

- Consider an invite letter to each patient.

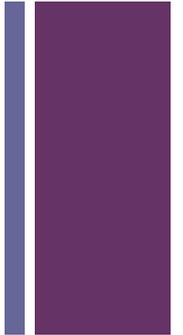


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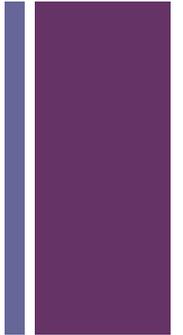


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- Consider an invite letter to each patient.
- Will it need to include a blood test request form?
- How many patients will you invite each time?
 - I sent out 20 letters a week over a period of about 3 months so I wasn't inundated with patients.
 - Depends on how much time you have allocated to clinics each week.

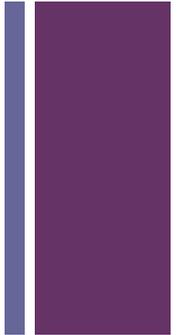
+ Step 9 - Run your clinic.



Before you see the patient check their notes and ask yourself:

- Are the patients details correct, including smoking/alcohol assessment, indigenous status, family and social history?

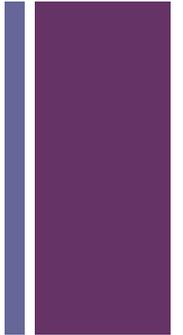
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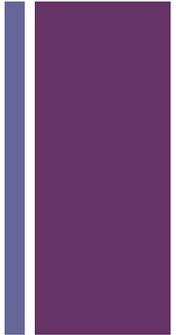
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- What did I do last visit? Has anything significant happened since their last visit to me?

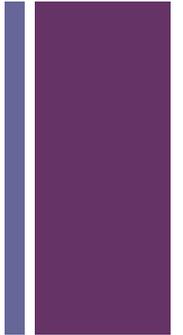
+ Step 9 - Run your clinic.



Before you see the patient check their notes and ask yourself:

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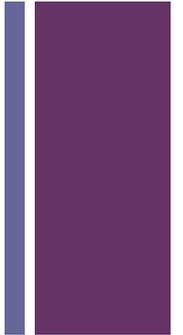
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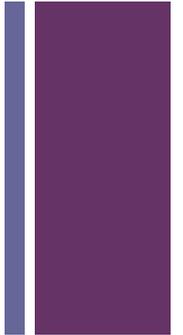
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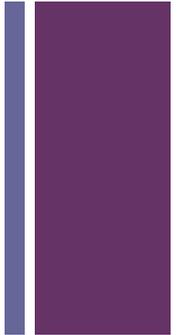
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- What referrals are needed, do they need new EPC forms?
- Does the patient need further tests ordering?

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During the consultation:

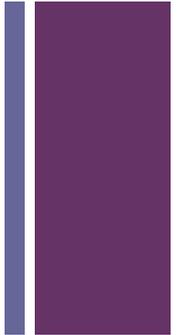
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During the consultation:

- Ensure you obtain all the data you need.

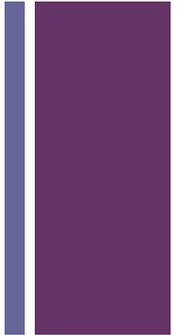
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During the consultation:

- Ensure you obtain all the data you need.
- Talk with the patient to see what they need/want from the appointment.

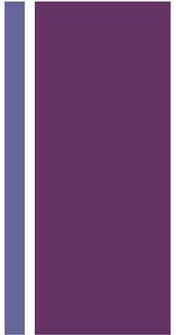
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During the consultation:

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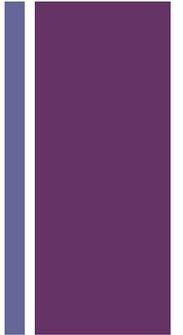
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- Ensure you have completed all required paperwork for GPMP/TCA and EPC referrals.

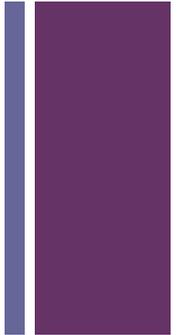
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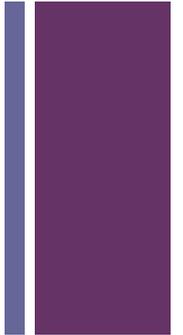
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- Talk with the patient to see what they need/want from the appointment.
- Provide education if required and you are able.
- Ensure you have completed all required paperwork for GPMP/TCA and EPC referrals.
- Ensure patient knows what you have done, what referrals have been made and who they need to contact.

+ Step 9 - Run your clinic.



After the consultation:

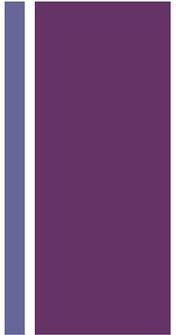
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After the consultation:

- Make sure the patient has all the correct paperwork and referrals to give to the GP to review and sign.

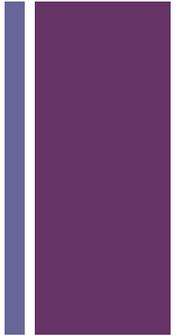
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After the consultation:

- Make sure the patient has all the correct paperwork and referrals to give to the GP to review and sign.
- Ensure you have completed the notes and recorded the cycle of care information for future reference.

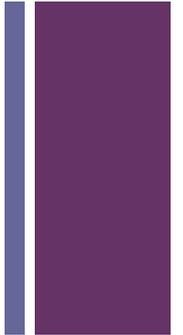
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After the consultation:

- Make sure the patient has all the correct paperwork and referrals to give to the GP to review and sign.
- Ensure you have completed the notes and recorded the cycle of care information for future reference.
- Ensure a recall has been entered into the system.

+ Step 9 - Run your clinic.

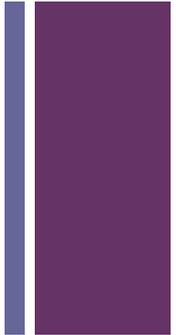


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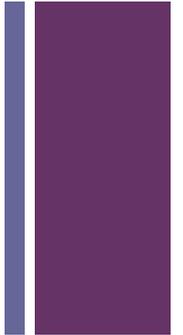
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- Ensure you have completed the notes and recorded the cycle of care information for future reference.
- Ensure a recall has been entered into the system.
- Ensure the patient is billed the correct item numbers.
 - 10997, 10996, 11700, 2517, 2521, 721, 723, 732 are just a few.

+ Step 10 - Evaluate your progress

- It is important to regularly evaluate the work you have done so that you can improve things for the future.



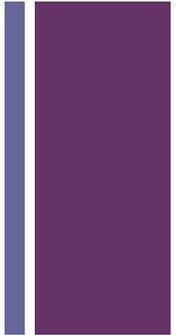
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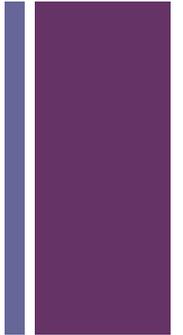


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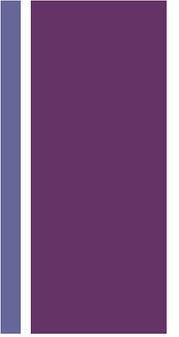


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- Don't be scared to try things differently.

+ Thank you.



Acknowledgements

This program is funded by the
Australian Government
Department of Health



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