



# NURSE LED DIABETES MODEL OF CARE

GREENSTONE FAMILY CLINIC

DEVI KA DAYAL



# INTRODUCTION



- Graduated in Fiji in 2002
- Moved and started working in NZ -2006
- Started working at Greenstone Feb 2009 with main role to set up and lead LTC, mainly Diabetes. Currently still at Greenstone clinic as Nurse Lead for LTC and Nurse Leader.
- PG Dip Advance Nursing from Uni of Auckland 2010.
- Dr Tana Fishman introduction.....



# CASE STUDY

➤ 63yr old Samoan female.

**Medical hx:**

➤ Recent progression of subcutaneous T –cell lymphoma/cytogenic panniculitis. Initial diagnosis Sept 2008. Under Haematology.

➤ Hypertension

➤ Chronic Renal Failure

➤ Diabetes – steroid induced. Diagnosed Feb 2020. Hba1c -94 on 15/02/20. previously normal <40, done annually as had 41 and 42 in 2014. Normal since 2015.

**Current meds:**

1. Prednisone -25mg OD

2. Cyclosporin -125mg BD

3. Allopurinol -200mg OD

4. Losartan -50mg OD

5. Felodipine -5mg OD

6. Protaphane -12u mane, started on 18/02/2020.



# Action

- ▶ Hba1c done on Sat 15/02/20, Result seen by Nurse on Monday mane.
- ▶ Alerted GP Hba1c 94 from 41—appointment made.
- ▶ Warm handover from GP to nurse (10 min)
- ▶ Med chart review by nurse (15 min)
- ▶ Case review with specialist (10 min)
- ▶ Plan review with GP/nurse 10 min)
- ▶ Patient consultation with support person (120 min)
- ▶ Follow up - phone appointment (5 min)
- ▶ Follow up - face to face appointment (30 min)
- ▶ Total time - 200 minutes (3.3 hours)



# FUNDING AND COST

- Current funding available at CMDHB: \$133.33 GST inc. for insulin initiation and two follow up visits.

## **Total time spent at GP Clinic**

- Care coordination/MDT =>50 minutes
- Consult =>2hr 40mins
- Phone consult =>10mins

Of this GP time: 15minutes, Specialist time 10minutes with Nurse.

Patient cost: charged for GP initial consult only \$18.00.



# CLINIC OVERVIEW

- Approx. 5000 registered and enrolled patients.
- VLCA Clinic in South Auckland, Manurewa.
- 53% High Needs. Of this 24% Maori, 13% Pacific and 16% non Maori and Pacific.
- Staffing -GP -3.2 FTE, Registrar -0.5 FTE, NP - 1.0 FTE, Nurse -4.4 FTE, HCA -1.0 FTE.



# DIABETES DATA ETHNICITY

- 355 diagnosed patients.
- Female – 54%, Male – 46%
- 23% Maori
- 20% Pacific
- 20% Asian
- 7% Indian
- 30% European






# DIABETES CLINICAL DATA as at 31<sup>st</sup> Jan 2020.

- Patients with Hba1c >100 – 6.
- Patients with no Hba1c in last 12 months – 7 (2%).
- Patients on Insulin – 80 (23%)
- Patients up to date with Photo screening – 83%. (5% overdue due to Ophthalmology delays).
- Patients up to date with Foot check – 85%





# ENABLERS FOR NURSE LED CARE

- ▶ Whole team approach –Doctors, Nurses, Admin and Reception.  
**TEAMWORK IS THE KEY!!**
  - ▶ Clear expectations.
  - ▶ Horizontal structure
  - ▶ Standardisation of practice.
  - ▶ IT Support –support with creating screening templates. Will show few examples.
  - ▶ Just in time teaching.
  - ▶ Warm Handovers.
- 



# Cont..

- ▶ Autonomy
- ▶ Trust
- ▶ Nurse –Professional Responsibility. (Education, Professional development).
- ▶ **Time** – each nurse gets dedicated 4hrs paperwork time every week at our clinic.
- ▶ Standard appointment with Nurse for Diabetes review is 30mins, New diagnosis -1hr, Insulin initiation -1hr.
- ▶ Time to actively manage recalls. I spend 30-45minutes daily going through Diabetes recalls. This involves, reviewing what bloods patients needs and sending letter with lab form in post, 3 weeks prior to when their medications will be due.

# Examples of Templates

**View Screening Entry**

Main | Chart | Audit

Main  
Provider: Devika Dayal (DDD)  
Date: 26 Jun 2019  
Code: Diabetic Eye Check (DIAEYE)

Outcome / Note  
Outcome: Done (DONE)  
**DONE**  
Note: 26/06/19 - no diab retinopathy, no macular disease. Rpt 2yrs

Recall  
Recall In: 2 yrs | 26 Jun 2021  
Provider: Devika Dayal (DDD)  
Note: 26/06/19 - no diab retinopathy, no ma  
 Do Not Upload to MMH  
 Confidential

Inactive:

**View Screening Entry**

Main | Chart | Audit

Main  
Provider: Devika Dayal (DDD)  
Date: 27 Dec 2018  
Code: Diabetic Foot Chec (DIAFOO)

Outcome / Note  
Outcome: Done (DONE)  
**DONE**  
Note: 27/12/18 -normal dorsal pulse,sensation intact to 10g

Recall  
Recall In: 11 mths | 27 Nov 2019  
Provider: Devika Dayal (DDD)  
Note: 27/12/18 -normal findings  
 Do Not Upload to MMH  
 Confidential

Inactive:

# Examples of Templates

**New Screening Entry**

Main | Chart | Audit

Main

Provider: Devika Dayal (DDD)      HbA1c: 58 mmol/mol

Date: 06 Sep 2019      Insulin Type:

Code: Insulin Initiation (INSULN)      Starting Dose:

Oral Hypoglycaemics:

Oral Hypo cont:

Injecting sites:

Changing sites:

Pen set up:

Drawing out air:

Set up dose:

How to inject:

Count 5 B4 pullout:

Needle disposal:

Hypo sx \_managemt:

Outcome / Note

Outcome:

Note:

Recall

Recall In:

Provider: Devika Dayal (DDD)

Note:

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OK Cancel Help

**New Screening Entry**

Main | Chart | Audit

Main

Provider: Devika Dayal (DDD)      Insulin Type:

Date: 06 Sep 2019      Current Dose BFAST:

Code: Insulin Review (INSRV)      Current Dose Lunch:

Current Dose Dinner:

Follow up:

Oral Hypoglycaemics:

Oral Hypo cont:

BSL b4 breakfast:

BSL 2hrs after BF:

BSL b4 lunch:

BSL 2hrs after LN:

BSL b4 dinner:

BSL 2hrs after DN:

BSL b4 bed:

Hypo:

Outcome / Note

Outcome:

Note:

Recall

Recall In:

Provider: Devika Dayal (DDD)

Note:

Do Not Upload to MMH

Confidential

OK Cancel Help

# Documentation of notes.

## Keyword *.diab*

Category		Description
A	Aspirin	If prescribed, review whether for Primary prevention or Secondary? If for primary prevention, inform patient new guidelines and review ?stop
B	Blood pressure	If Hypertensive =>? On Medication. If not on ACE, why? Renal –check Egfr, micro albumin, ACR
C	Cholesterol	If elevated, review CVR and whether statin needed if not on already.
D	Diabetes Diet Depression	Current HbA1c and medications. BSL monitoring, hypos. Give Hypoglycaemia PIL. Outbox document: HYPO. PHQ2 -Little interest or pleasure in doing things? -Feeling down, depressed or hopeless?
E	Eye Exercise Erectile Function	Retinal Screening up to date, if not why?
F	Foot	Foot check up to date, if not why? Complete and advise on foot care. Give foot care info. Outbox document: type DIABFT.



# Questions 😊

