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HSE RCSI Embracing New Ways of Working (Dublin Midlands) – Compassionate Multidisciplinary Team Programme

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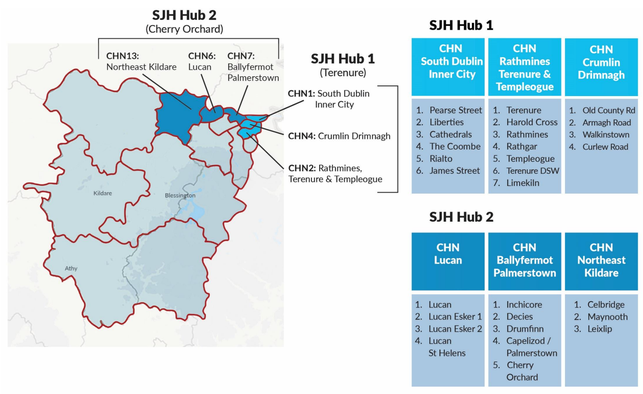
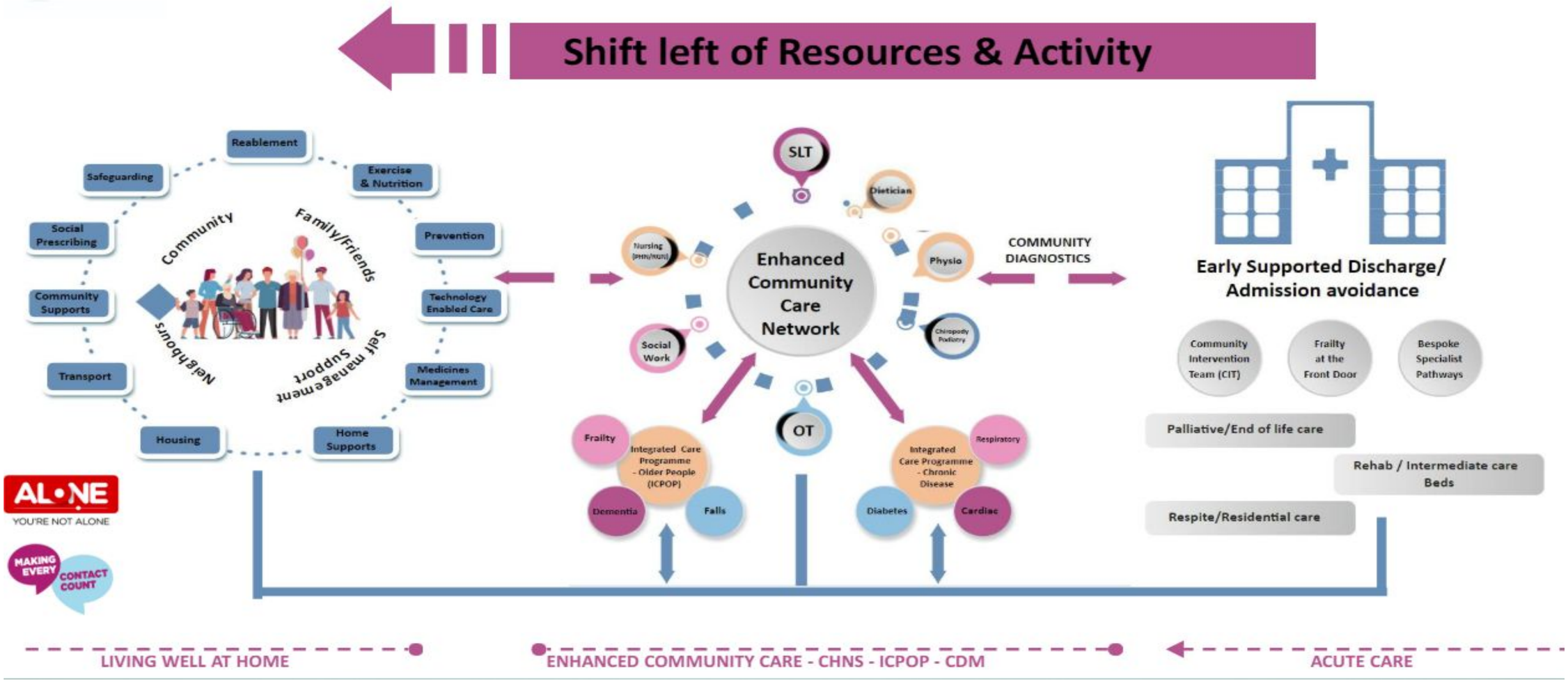
Background: A key aim of the Sláintecare strategy is to establish Right Care, Right Place, Right Time. As the hubs evolve, the most efficient use of the service is to have the RIGHT patient seen in this setting. The WRONG patient will duplicate workload, not reduce hospital burden and lead to poorer care. Therefore we set out to design a referral criteria for GPs to provide a clear pathway for optimum referral via Healthlink.



Audit of 94 referrals to SJH reviewed (Oct 2023- Jan 2024)- 20% could have been referred to the hub.



Methodology: Incorporating guidance and recommendations from both the Integrated Care Programme for the Prevention and Management of Chronic Disease and the National Diabetes Model of Care, a working group researched, designed and developed integrated models of care pathways for clients with Type 2 Diabetes, tailored to CHO7 and St James' Hospital.

Results

Proposed simplified referral criteria for GP referral to hub and St James' hospital with a plan to disseminate, and evaluate;

To hub:

- New T2DM for DNS education
- Suboptimal control on multiple agents
- Querying medication class suitability
- Recurrent hypoglycaemia

To hospital:

- T2DM age 16-40
- Type 2 diabetes with complications/ new atherosclerotic cardiovascular disease
- Steroid- induced diabetes
- Requires insulin

Conclusion

The delivery of the chronic disease programme requires clear pathways of communication among primary care, hub and hospital. Clear guidance on referral pathways enhances the patient experience in the RIGHT way. Going forward we plan to implement, audit and seek feedback for success of the project.