

CAN WE MANAGE TYPE 2 DIABETES BETTER IN HOSPITAL?

FOCUS GROUPS ON:

DESIGNING A NOVEL IN-HOSPITAL INTERVENTION FOR PATIENTS WITH TYPE 2 DIABETES

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WHAT IS THE PROBLEM?

T2D in Australian Adults

- Prevalence 5.1% in 2014 – 15
- Rapidly increasing
- Socially graded
- 4x higher in Indigenous Australians

Impact on Hospitals

- 10% of hospital admissions 2015-16
- Increased length of stay
- Higher rate of readmission

Total Health Care Costs

- \$14.6 billion annually 2014/5
- \$420 million in South Australia 2016
- 17% of total hospital costs

ABOUT THIS PROJECT

REMIT-2-D stands for *Reducing morbidity mortality and costs by initiation of a novel in-hospital intervention for patients with Type 2 Diabetes*. The aim of the REMIT-2-D project is to develop an intervention for patients admitted to hospital, irrespective of the reason for admission, and found to have Type 2 diabetes (T2D).

The objective is to develop an in-hospital intervention designed to:

1. Proactively manage high risk patients with T2D and associated multi-morbidities in collaboration with hospital services and primary health care providers, commencing with the identification of high-risk patients at time of admission.
2. Provide a holistic, and patient-centered approach to improve health outcomes for patients, reduce costs through prevented complications, and ultimately reduce length of stay and hospital readmissions.
3. Facilitate discharge to community-based services that are culturally appropriate, with due regard to social and demographic factors, and integrated primary healthcare.

WHAT WILL BE INVOLVED

We will be holding a focus group session in December/January for each of the following disciplines:

1. General Practice
2. Aboriginal Health Professionals (including practitioners, health workers, allied health hospital liaison officers, nurses, doctors)
3. Allied Health Practitioners
4. Other Health Professionals

The aim of each focus group session will be to identify from the perspective of each discipline the:

- Priorities for the management of T2D in patients admitted to hospital.

- The factors that enable and inhibit the implementation of interventions aimed at improving T2D care throughout the hospital journey from admission through to discharge to community-based services and resources.
- The associated values, social and demographic factors and culturally appropriate requirements that need to be considered for T2D interventions.

Feedback from the focus groups will help identify the key criteria that will help shape and improve the design and outcomes of the in-hospital intervention.

Each focus group will run for approximately 1.5 to 2 hours and participants will be reimbursed for their time as per the General Practice SA Incorporated GP Claims Policy.

<http://www.generalpracticesa.org.au/wp-content/uploads/pdfs/GP-Claims-Policy.pdf>

Light refreshments will also be provided.

HOW TO GET IN TOUCH WITH US

If you would like to participate in a focus group within one of the four discipline areas, please let us know before Friday 7th December 2018 by contacting:

Iris O'Rourke, Project Manager (Mon – Wed).

Email iris.orourke@sahmri.com

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