

National Type 2 Diabetes Prevention Program

Using Medical Director to identify eligible patients

The commonwealth government announced a commitment of \$103.4M to tackle the rising incidence of Type 2 Diabetes across Australia. A new item number MBS 713 was introduced on 1 July 2008, designed to support GPs to assess the risk of patients who are at high risk of developing Type 2 Diabetes.

Clinical trials have provided strong evidence that progression to Type 2 Diabetes can be prevented or delayed by lifestyle modification. Randomised Control Trials in the US and Finland have demonstrated reductions in the incidence of Type 2 Diabetes of 58% over 3 years.

Given this strong evidence the government has provided funds for subsidised accredited Lifestyle Modification Programs. The programs run for a minimum of 10 face to face hours over a number of months, and support participants to make healthy lifestyle choices which will reduce their risk of developing Type 2 Diabetes.

To be eligible for the program patients must be:

- Aged 40 – 49 years old or 15 -54 years old for aboriginal patients
- Not developed Type 2 Diabetes
- Score 15 or above on the AUSDRISK Test – indicating they have a high risk of developing Type 2 Diabetes

For information about the program including downloadable tools visit www.health.gov.au/epc for downloadable referral forms and the AUSDRISK tool. More information can be found at www.agpn.com.au

Why use practice data to identify patients?

- Evidence from states where the program has been trialled suggest that where there is little activity to identify patients there are fewer referrals to lifestyle modification programs
- Eligible patients are less likely to visit their GP as they are not yet experiencing symptoms
- Eligible patients are working age and may not be aware that they are at risk or what they can do about it.
- Divisions have a key role in supporting practices to take a population health and prevention approach and supporting Patients become active and responsible health consumers able to manage their own health risks and choices.
- Once identified the practice staff can send a letter to each patient and encourage them to take the Diabetes Risk Test.
- By identifying eligible patients and using item 713, GPs can be compensated at a higher rate for preventative activities already being undertaken in General Practices

Identifying patients using the Medical Director

The following is a step by step guide on how to use Medical Director to identify eligible patients

1. MD3 Main Screen → Search → Patient
 2. MD2 Main Screen → Search → Databases
 3. Enter age range of 40 – 49
 4. Under Drug/Condition select 'Condition' → Type Diabetes → click 'NOT' or "As a NOT condition" → click 'Add to search criteria"
 5. Still under condition, type Hypertension → click 'Add to search criteria"
 6. The search description should read 'All patients aged between 40 and 49 having Hypertension not having Diabetes' **or** 'All patients aged between 40 and 49 not having Diabetes having Hypertension'
 7. Click 'Search'
- Note:** In MD you cannot narrow down further to patients with a high BMI
8. From here, you can print the list and contact each patient via telephone, or mail merge the list with the appropriate letter in MD (a Medical Director template letter for patients is available on the GP NSW website).
 9. If mail merging, send each patient their letter and a copy of the AUSDRISK test available from www.health.gov.au/epc along with other patient information that is available on the DoHA website such as the lifestyle modification programs information leaflet

For more information about the Diabetes Prevention program or LMP programs please contact the Chronic Disease Team on 9239 2900 for questions about using the PEN Clinical Audit Tool please contact jacquelineowens@gpnsw.com.au