

SECTION 1

Introduction

Preface

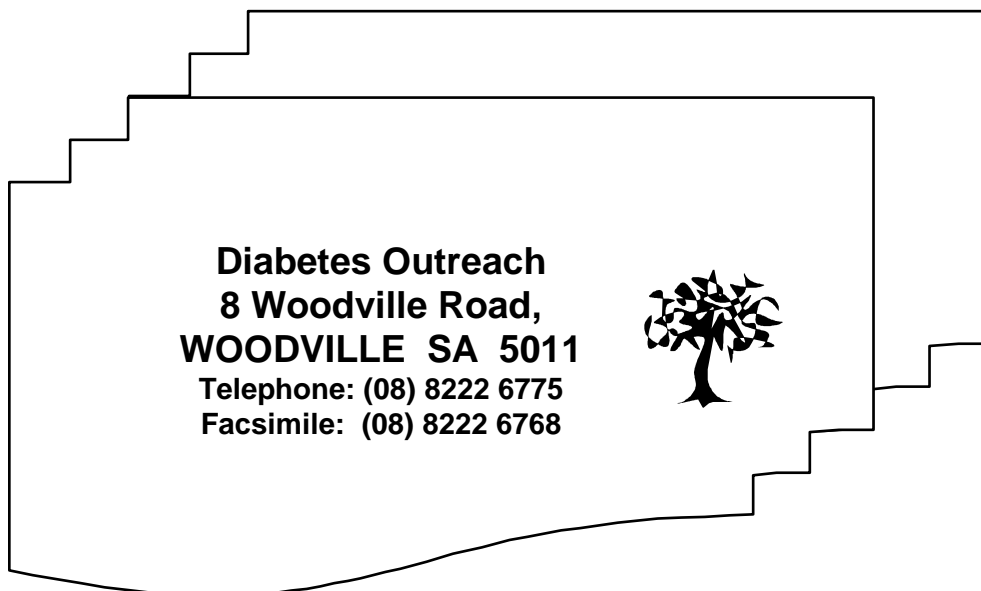
This manual has been developed by a team of health professionals working in the area of diabetes care.

'Diabetes – Your Hospital Manual' was originally an initiative of the staff of The Queen Elizabeth Hospital Diabetes Centre. The original publication in 1990 was aimed at documenting in-house hospital policies to assist staff in developing comprehensive and effective care for people with diabetes during hospitalisation.

Since that time the Manual has been updated to incorporate nationally accepted guidelines. Diabetes Outreach aims to disseminate this information for use in a range of hospitals and health care settings particularly in rural and remote areas. The information contained in this manual should be used in conjunction with current local policies and protocols.

Users of the manual are welcome to submit any suggestions for its improvement to Diabetes Outreach.

Should you have any queries about the contents of this manual contact:



Purpose

This manual is designed as a reference for nurses and allied health providers working in hospital and community settings but can be used by all health care providers who are working with people with diabetes.

The manual aims to:

1. provide current, accurate information on the management and education of people with diabetes
2. guide health professionals in the treatment and care of specific problems associated with diabetes.

An improvement in the quality of diabetes health care and education provided by health care providers is the desired outcome.

A reference list is provided at the end of each section and a glossary is included at the end of the manual. Users of the manual are free to photocopy any relevant information that will assist them in caring for people with diabetes.

The manual is also available online and can be downloaded free of charge at www.diabetesoutreach.org.au.

Use of this manual

The following steps may be helpful in using this manual:

- be clear about the problem / situation
- select and read the relevant section / s
- look at recommended action / guidelines
- do what is suggested
- evaluate the outcome.

Example:

A person with newly diagnosed diabetes mellitus is in hospital for minor surgery.

- **Find the problem / situation** - the person has no knowledge of what diabetes is and needs a basic introduction of diabetes while in hospital.
- **Select the right sections** - *Diabetes education* – Section 3
Hospitalisation – Section 4
- **Look at recommended action / guidelines** together with the individual's needs, ability and comprehension.
- **Do what is suggested**
- **Evaluate outcome** - has the person a simple understanding of what diabetes is? Are there any areas that need explaining? (Evaluation may lead to identification of a new situation / problem which requires further action).

Primary health care

Traditionally health care was assessed through measuring, this meant counting numbers of bed days, numbers of people and numbers of procedures. Its success was measured by the number of people who came in and out and how much it cost to get them in and out. Often this did not show whether the overall health of the community was improved. Today primary health care is concerned with the broader picture of improving the health of the community in all the complexity that this involves.

The starting point for a primary health care approach is to provide a complete system of care to address the community's main health problems – that is, those which are the most common and which have the most significant impact on the health status of the community.¹

The World Health Organisation defines primary health care as having the following broad ideals:

- it is the first level of contact for individuals and communities with the health system
- is located as close as possible to where people live and work
- is universally accessible - no barrier of cost, geography, culture, race, gender or other barriers
- is based on full participation of the community
- emphasises prevention
- addresses the main health problems of the community it serves
- is the main focus of a country's health system - not a bottom layer added on.

WHO²

The Declaration of Alma-Ata defined primary health care as: 'Primary Health Care is essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination.'²

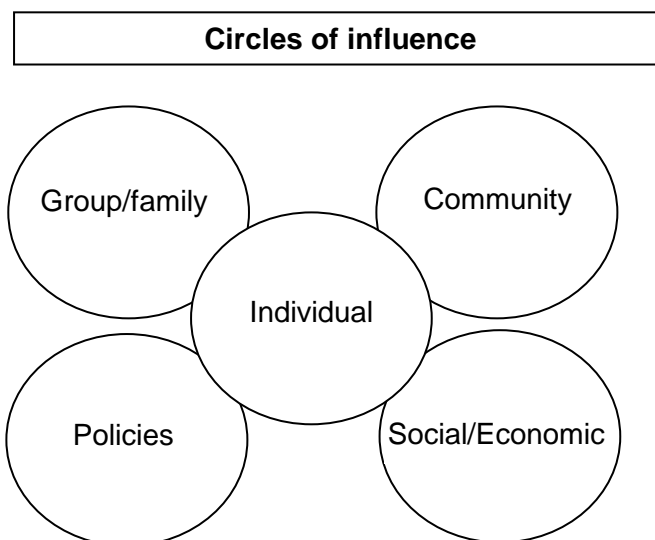
How do we define primary health?

Primary health means promoting health and preventing illness (eg complications associated with diabetes) before it occurs.

Trying to create an environment that makes 'healthy choices, easy choices' (access to healthy food, exercise options etc).

Factors affecting health include physical factors, social status, cultural issues, economic situation and gender environment.

Circles of influence (individual in centre, group / family, community, policies, social / economic).



Primary health care goals for diabetes

Each health service will need to assess its situation and work out individual goals. The following are general goals which you may wish to consider when working with individuals to establish personal goals.

Promote health

Promoting exercise, high fibre, low saturated fat, low added sugar eating as the 'normal' pattern for the health of all Australians.

Prevent illness

Encourage people to find out whether they are at risk of developing type 2 diabetes, eg do they have a family history, are they overweight or over 40 years.

Minimise disability

For those who have diabetes (any type), have regular checks with the appropriate health professionals for early detection and prevention of complications.

Equality of access

Ensure equity of access of people with all types of diabetes.

Equity of outcome

Targeting population(s) who are most at risk of developing type 2 diabetes (eg Aboriginal).

Overcoming isolation

Provide opportunities for people with diabetes to interact and network with others, eg support groups.

Disease control

Provide information for all people with diabetes about the range of services / treatments available.

The process of evaluation

These are some of the steps to be considered in evaluation:

- formal and informal feedback from the participants
- has the program reached its target audience
- has the implementation followed the planning - was planning adequate - was implementation adequate
- check each aspect of the program - were there any aspects which indicate a change of strategy
- did the program meet all its goals
- was the program flexible - did it change to meet people's needs
- relationships between participants and professionals - was power shared?

'Evaluating the work of your agency or team is a vital process to prevent it wandering from its original goals or away from addressing the needs of the community you are working for. Informal evaluation can be incorporated into the normal work of the agency or team, for example, through discussion and reflection at weekly staff meetings. It will be necessary, however, for the agency or team to take time out to evaluate itself more formally, and to involve the community in this process. This can be done by setting time aside specifically for evaluation and strategic planning.'³

The health care team

A team of health care professionals is available to assist people with diabetes to deal with specific problems as they arise. The following health professionals may be included in the care of people with diabetes.

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|----------------------------|--------------------------|
| • Aboriginal health worker | • Occupational therapist |
| • Community health nurse | • Ophthalmologist |
| • Diabetes educator | • Optometrist |
| • Dietitian | • Paediatrician |
| • District nurse | • Pharmacist |
| • Endocrinologist | • Physiotherapist |
| • Exercise Physiologist | • Podiatrist |
| • General nurse | • Psychiatrist |
| • General practitioner | • Psychologist |
| • General practice nurse | • Social worker |
| • Obstetrician | • Surgeon |

Remember the **most** important member of the team is the person with diabetes.

Diabetes mellitus is one disorder where most of the care is provided by the individual themselves. The individual's knowledge, skills and attitude for behavioural change are the essential ingredients of optimal self-care.

To improve health and the quality of life, we, the health professionals involved in diabetes care, have a responsibility to provide ongoing expertise, information and psychological support to individuals with diabetes.

References

1. South Australian Community Health Association and Primary Health Care Training Project (1992) *The changing face of health - A primary health care casebook*. South Australian Health Commission, Adelaide.
2. World Health Organisation (1978) *Report of the International Conference on primary health care - Alma-Ata, USSR*. World Health Organisation, Geneva.
3. Wass A (2000) *Promoting health: The primary health care approach*. Harcourt Australia, Marrickville.