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CONFERENCE ABSTRACT

Framework care for patients with diabetes mellitus between general practitioners and Primary Eye Care for first contact care including refferals to hospital based ophthalmologists

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Introduction:

CroDiab register data informs us that in 2018 number of patients suffering from diabetes was 303992, with rising numbers every year. During lifetime patients develop eye complications that lead to loss of visal acuity,blindness and reduced quality of life. There is increasing number of complications because of unregular specialist checkups and long waiting lists in hospitals. In Health Center Zagreb Centar(HCZC) there are available teams of general ophthalmologists so we developed concept of connecting general practitioners(GP) and hospital eye services(HES) through digital consultations. General ophthalmologist is particularly well placed to oversee the needs of patients suffering from diabetes and interact with primary care services, co-ordinate better control of the flow of patents into and out of the HES.

Short description of practice change implemented:

Referral route for the assessment of patients eye condition-GP informing general ophthalmologist about patients with diabetes, which need regular checkup.General ophthalmologist triage out lower risk patients who need minimal ongoing specialist input, takes patients for checkup so moderate or lower-risk conditions could be managed outside HES. If necessary, refers the patient to HES where treatment of complications is performed. Direct referral to the HES,a fast track urgent pathway for patients with complications that need early treatment. After realization of necessary procedures,inform the patient's GP about further patient management.

Aim and theory of change:

Ensure quality care for patients by digitally connecting primary,secondary and tertiary healthcare professionals. Secured personalized approach.

Targeted population and stakeholders:

Network used by general practitioners, general ophthalmologists and specialists in hospitals.

Targeted population are patients with diabetes.

Timeline:

E-Consultations started off as a pilot-project in 2017. In 2019 HCZC started project that included general ophthalmologists as bridge between GP and HES.

Higlights(innovation,impact,outcomes):

GP using the platform reported receiving fast consultations,early refferal of patients to general ophthalmologist. Hospital ophthalmologists reported treatment of patients conditions in early stages.Lower healthcare costs by general ophthalmologists treating low-risk patients.

Comments on sustainability:

Simple, easily implemented digital solution, communication through E-Consultations is a sustainable platform in most of healthcare systems. General ophthalmologists are available for detecting and reffering patients to HES in time.

Comments on transferability:

E-Consultations used for communication is connected to state owned Croatian Central Health Information system whose infrastructure is opened to ICT company that satisfies certification requirements. This system allows easy realisation of our goals by connecting primary,secondary and tertiary healthcare services.

Discussions:

Early detection of eye complications caused by diabetes is of outmost importance because the number of patients that are not regularly under ophthalmologic supervision is in the rise. Long waiting lists lead to development of complications. Delayed treatment causes high healthcare costs and poor visual outcome. That is the reason why we developed framework care for those patients. It enables early detection, treatment, reduces costs and improves quality of life. Data sharing is possible with development of digital technologies that speed up communication between all involved in care of patients.

Lessons learned:

Model of early detection and action enables prevention of late ophthalmologic treatment in patients suffering from diabetes. Using early detection and refferal signifficant reduction of health care costs are ensured.