

Who is eligible:

- Have diabetes that requires complex management / have complex medical or psychosocial history
- Would benefit from intensive input to improve self-management of diabetes
- Are at risk of presenting to the emergency department or have had a recent hospital admission
- Live in the council areas of Moonee Valley, Melbourne, Moreland and those in surrounding areas who receive all their care from RMH

Who is not eligible:

- Have Gestational Diabetes
 - Need assistance with daily blood glucose monitoring or insulin administration
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HARP Diabetes Co-Management Service

The service operates from Merri Health and cohealth.

The team consists of diabetes nurse educators, a dietician and Endocrinologist.

DCS services include:

- Comprehensive assessment, care coordination, monitoring, clinical review and support
 - Education and self-management support to people with complex diabetes issues
 - GP liaison, referral to allied health, Dietician or Endocrinologist as required
 - Insulin initiation and stabilisation, continuous glucose monitoring
 - Coordinated communication with the Royal Melbourne Hospital when patients are admitted
 - Regular co-consultation with the MH HARP Diabetic Foot Unit community program. Clients can be seen by the DCS DNE when attending podiatry clinic and are provided with education and referral onto DCS program as appropriate. Engagement with other HARP Streams as required.
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Accessing the service

Wait times: Clients are contacted within 3 days of referral receipt, first appointment is within 10 working days

Cost: Nil

Referral: Fax your referral to the **Direct Access Unit** on **(03) 8387 2217**.

Referrals to include: medical history, medications, current management plan and reason for referral. Call HARP Liaison **(03) 9342 4530** with any queries.

Website: <https://www.thermh.org.au/health-professionals/clinical-services/community-services/harp-complex-care>

Contact

HARP Diabetes Co-Management Service Team Leader **(03) 9448 6794**

MH-HARPreferrals@mh.org.au