Conference Abstract

The experience of the Local Health authority of Pavia (northern Italy) in the management of the diabetic population of its province. An example of good balance between primary and secondary care

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Abstract

Purpose: Since long, the Local Health Authority (LHA) of Pavia (Lombardy, Italy) developed a model for the management of care of its diabetic population, based on a strong integration between Specialists of the hospital diabetes centres, General Practitioners (GPs) and primary care nurses. Achieved results are reported.

Context: To ensure an integrated management of diabetes, the LHA has been established a multidisciplinary working-group (Department of Primary Care; Specialists of hospital diabetes centres (12); GPs; Primary Care Nurses; Pharmaceutical Service of LHA), since 2000.

State of the art: In the province of Pavia there are 27,000 diabetics (5% of the residents) that account for 11% of the total annual health expenditure of LHA. The average per capita health expenditure of diabetics is € 2,400/year. LHA collects indicators (context , process, outcome) for the monitoring of management of integrated care of the diabetics. The multidisciplinary working-group on diabetes has defined diagnostic and treatment pathways, ad hoc protocols, (e.g.: diabetic foot, release of driver's license to diabetics, insertion of diabetic pupils in the school, management of gestational diabetes), a manual for healthy lifestyles for diabetics, treatment plans for the prescription for insulin pumps and other monitoring materials (e.g. lancets), based on pre-defined quarterly requirements. LHA organises training courses, with the aid of specialists of the hospital diabetic centres, to spread knowledge of these care pathways, guidelines and tools among health care professionals.
Statements for debate: The outcomes of the European Diabetes leadership Forum (2012) have been collected in the Copenhagen Roadmap. Initiatives developed by LHA’s multidisciplinary working group on diabetes are strongly consistent with it.

Keywords:

- diabetes
- integration of primary and secondary care
- ageing
- healthy life-styles