Diabetes can be a complicated condition. To assist further, we offer a range of online resources, fact sheets, e-books and a helpline. Specific resources for a variety of multi-cultural groups are also available. For more information visit:

**diabeteswa.com.au**

Follow us on social media.

**Diabetes WA**
diabeteswa.com.au

**Diabetes WA Helpline:** 1300 001 880

**Email:** info@diabeteswa.com.au

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Level 3, 322 Hay Street, Subiaco WA 6008

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Where you see this icon you can click to view further information online
Ambitious Beginnings

In 1965, the Harle and Walker families established the Diabetic Association of Western Australia - the very first incarnation of Diabetes WA, following a type 1 diabetes diagnosis of the Walker’s young son. Together they worked to foster a strong diabetes community and created an organisation that would inform and support those affected by diabetes.

Today, as Diabetes WA, we are the state’s peak body with a membership base of more than 8,500 people. We inform, educate, support and advocate on behalf of the ever-increasing number of Western Australians who live with this chronic condition.

Our Mission

Our Mission is to support those living with, or at risk of, diabetes and related chronic conditions by undertaking the following activities directly or through financial support of other organisations with similar goals.

Our Mission focuses on the following key areas:
1. Promoting, providing and coordinating services to those living with diabetes and/or related chronic conditions as well as those identified as at risk of diabetes.
2. Advocating on matters relevant to those whose health is affected by diabetes, those with a related chronic condition or those who are at risk of diabetes.
3. Providing information, education and interaction about prevention to people with diabetes-related conditions, or people who are at risk of diabetes.
4. Collaborating in, engaging in and funding research related to services that prevent or reduce the impact of diabetes and/or its related chronic conditions.
5. Supporting the development of capacity within the health system to maximise the quality and availability of service options to those with diabetes and/or related conditions as well as those at risk of diabetes.

Tackling Diabetes

Diabetes WA is committed to enhancing the quality of life of all people living with diabetes. This important work cannot be achieved alone. It is through the generosity and support of the WA community that we are able to ensure this work is delivered and sustained for the future.

We work in the community to:
- provide a range of education programs and support services for individuals affected by the condition;
- support and run community events, such as expos, diabetes information sessions and kids camps for children with type 1 diabetes;
- raise awareness of the impact of all types of diabetes by participating in major campaigns such as National Diabetes Week and World Diabetes Day;
- provide community and workplace education and training to reduce the impact of diabetes;
- advocate on behalf of people with diabetes to eliminate unfair practices and stigma;
- provide resources, information and training opportunities for health professionals;
- represent and support our members affected by this condition; and
- provide essential diabetes-related products.

Diabetes WA

Diabetes WA is a not-for-profit organisation that is the voice for people with diabetes in Western Australia. We recognise that while we are specialists in diabetes, people are in charge of their own lives. We aim to enable people living with diabetes to make informed choices within the context of their own health journey.
OUR PEOPLE

Supporting people affected by diabetes in WA can only be achieved through the joint efforts of many individuals. Though we work with many external organisations, it’s our people that make Diabetes WA strong.

Our dedicated team includes:

• credentialled diabetes educators including dietitians, nurses, exercise physiologists and a pharmacist
• DESMOND trainer & quality development assessors
• education program coordinators
• marketing and communications specialists
• accounting, finance and HR professionals
• business growth and development team
• supply, access point and logistics team
• solutions-focused customer services team
• a skills-based Board of Directors

Our Staff Values guide our service delivery and remind us of our cultural objectives and priorities to ensure we provide caring, person-centred, solutions-focused innovative programs and services.

Number of staff
June 2018: 74

Health Services 50%
Supply and Support 23%
Communications and Marketing 9%
Corporate Services 7%
Executive 7%
Growth and Development 3%
With the money spent each year in WA on chronic conditions, innovative, sustainable solutions are needed. Innovation is an important key to tackling the issue of diabetes and improving the health of the 1.3 million Australians living with, or affected by, the condition. Though there will be always be importance placed on the search for a cure, we need innovation in health care service and education delivery that is on par with innovation in other aspects of the health care system. Although people living with diabetes can benefit from advances in diagnostic technology, pharmaceuticals, surgical procedures, and medical devices, equally important are health care delivery systems and pathways that provide timely, patient-centred, safe, effective, efficient, coordinated, and equitable access for positive health outcomes.

What about the effect that the emotional burden of living with diabetes and/or other chronic conditions has on management of diabetes in our community? Diabetes WA addresses this important part of the equation by putting people at the centre of everything we do. We recognise the impact comorbidity of chronic conditions has on health outcomes and the effect of physical health problems on mental health and vice versa. By focusing on improving self-efficacy and by empowering people, we are confident we will keep reducing this burden.

Working in partnership with all parts of the WA health system to create innovative collaborations makes wise use of available resources and takes advantage of the wealth of knowledge and experience that exists in Western Australia. There are numerous organisations that are working in this space, in both prevention and disease management, who are supporting individuals to lead long productive lives and to take the burden off them, the health system and the health dollar.

Innovation at Diabetes WA
Diabetes WA seeks to lead the way in consistency and quality within the health system whilst building capacity of the workforce to address the increasing number of people with diabetes in Western Australia.

Diabetes WA have the team and ability to enhance our current services to address broader chronic conditions and are actively working towards a vision that supports this. Expertise exists within the team already to move to this broader focus and this aligns with primary care service planning and implementation. A more integrated, holistic approach to chronic conditions by the health system in general and the call by WA Government for innovation and technology to be a part of the solution to sustainable health into the future along with inter-sectoral, collaborative partnerships which offer value for money and are centred on consumer needs.

"Complacency is the enemy of innovation"
Innovation in Action

• Telehealth – a shining example of innovation in action – technology supports the ability to connect isolated communities through the use of video calls and virtual waiting rooms. (see page 39)

• Diabetes WA Helpline allows people to access information without having to leave their home or wait for an appointment to find answers to their important questions. (page 19)

• Person-centred approach to education.

• Solutions-focused customer service team – recognising the needs of current and new members. (page 28)

• Scheduling innovation with a centralised online booking system for all education programs and workshops. (page 28)

• Work in the regions – bringing education and prevention strategies to isolated communities, while working with local organisations to engage people. (page 38)

• Building capacity to take advantage of existing local resources and educators. (page 30)

• Collaborative innovation – working with others in the health industry and community groups while sharing resources.

• Chronic conditions Health Hub Vision – recognising comorbidity in chronic conditions and working towards solutions that will work for everyone.

• Innovative evaluation tools – introducing the Patient Activation Measure to assess and improve efficacy of our programs. (page 47)

• Development of the NDSS National Evaluation Framework. (page 46)

• Focus on self-management, education and empowerment, not medical treatments as the end goal.

• Identifying and taking advantage of opportunities to advocate on behalf of people living with diabetes who don’t have a public voice. (page 12)

• Working with an international collaborative to bring evidence-based programs and services to people in Australia.

Health Hub Vision

The strategic vision of the Diabetes WA Board is working towards a Health Hub model for chronic conditions, which cuts through the complexity and makes everything revolve around patient need. A model that allows a coordinated central contact point to support people with chronic conditions and easily connects people, and their primary care providers, to their next self-management steps.

Putting a model such as the Health Hub into action will assist with ensuring that current best practice and evidence is being applied in real time and that there continues to be quality improvement on the services offered. Establishing partnerships between health agencies and universities and other health professionals will make sure that consumers are accessing services that are effective and relevant to them.

The model will also focus on capacity building to increase reach and make training available to all health professionals to ensure they are delivering self-management support to people with chronic conditions at a high standard and in a consistent way.

Each element of the Health Hub includes a notion of ensuring the program or service provided to the consumer is proven to be effective, of high quality and consumer centric.
LONG-TERM VISION
A message from our Chair and CEO

This year the Board of Diabetes WA has invested a substantial amount of time continuing to develop the organisation’s long-term strategic direction.

It is recognised that if we are to continue to be a strong force for people with diabetes in our state then we need to ensure that we have strong relationships, programs and services enabled by a robust operational system.

Success as a Company Limited by Guarantee
The 2017/18 financial year marked Diabetes WA’s first full year of operation under its new incorporation as a public company limited by guarantee. While the transfer was completed under the Associations Act on 13 June 2017, the 12 months to 30 June 2018 saw a number of adjustments made within the organisation to reflect the new governance framework enabled by the new Constitution.

Consolidation and Growth
The 2017-18 financial year was characterised by further consolidation and growth in all areas of Diabetes WA’s core businesses.

Significant adjustments were required to Diabetes WA’s role in a number of key service elements of the National Diabetes Services Scheme (NDSS) as Diabetes Australia (DA) moved to centralise much of this activity in Victoria and NSW.

Key transitions saw registrant enquiries moved to DA’s new call centre in Melbourne and the supply of NDSS information and support material moved to DA’s fulfilment service in Sydney. With the NDSS funding to support these activities withdrawn from Western Australia, Diabetes WA has, of necessity, been required to invest resources to maintain previous customer service levels. The introduction and distribution of the new 1300 001 880 telephone number to WA consumers was undertaken as a priority to ensure Western Australians, who were seeking to contact Diabetes WA about our many non-NDSS programs and services, were not disadvantaged (see page 28 for more on our Customer Services Team).

Improving Efficiency
Diabetes WA this year has undertaken a major review of the organisation’s IT systems and has initiated some significant changes to increase our services efficiency and to expand our ability to provide new service options to Western Australian consumers.

The investment will deliver a significant upgrade in our capacity to offer a wider range of digital service solutions. Following our success in attaining ISO 2015 accreditation, all of Diabetes WA’s systems and processes are now subject to a robust practice of ongoing audit and review, which will deliver performance and efficiencies to the organisation over the longer term.

Broadening our Reach
During the year, Diabetes WA continued to expand access to diabetes self-management education programs for people living with both type 1 and type 2 diabetes. The very popular DESMOND program for type 2 diabetes was delivered 68 times in metropolitan Perth (see page 20) and this year also saw 58 programs delivered in rural and regional WA (see page 41).

With our state spanning some 2.4 million square kilometres, Diabetes WA continues to explore new service options to deliver innovative cost-effective support solutions to people with diabetes, no matter where they live.

While membership subscriptions of Diabetes WA declined slightly, the number of consumers engaging with the organisation in other ways increased significantly. Subscriber participation in Diabetes WA’s e-newsletter series increased to around 800,000 over the period while the circulation of the very popular quarterly magazine Diabetes Matters.
also increased with many new health professional subscribers and a wider distribution of the publication to engage with primary care providers (see page 58).

The very successful Diabetes Telehealth service continued to be expanded since its introduction in 2015. The program now routinely supports diabetes consumers in the Kimberley, Pilbara, Midwest, Goldfields, Gascoyne, Wheatbelt, South West and Great Southern regions. This year, Diabetes WA added an endocrinology telehealth service (see page 39), as well as providing diabetes upskilling programs for country WA health professionals (see page 33). The service has now saved more than 1.25 million kilometres of consumer travel and delivered some 2500 occasions of service. Recognised for its outstanding innovation and performance, the Diabetes Telehealth service was awarded the Director General’s Award - the highest program honour bestowed at the WA Health Excellence Awards in November 2017.

Working in our Regions

Diabetes WA was also able to launch a new chronic disease prevention pilot program Let’s Prevent in the South West through the generous funding support from the WA Department of Health who provided just short of $1 million to support this program trial (see page 16). Attendees who are at risk of type 2 diabetes, heart disease or stroke are able to self-refer or be referred by a health professional to attend the program designed to provide them with a wide range of risk reduction opportunities tailored to their personal circumstance. Once complete, Diabetes WA’s goal is to roll this initiative out to other regional centres in Western Australia.

With such a significant focus now in regional and rural areas, 2017/18 also saw Diabetes WA introduce new program and service promotions with particular emphasis on the South West and Great Southern regions. Linking with GP practice for direct referral, and supported by television advertising, Diabetes WA’s brand has been used to support expansion of both the Telehealth and Let’s Prevent program initiatives.

Embracing Innovation

Diabetes WA embraces innovation. The Board recognises that the WA health system is continually evolving and changing and our long-term relevance can only be achieved if we evolve and change at an equivalent or faster pace.

The Diabetes WA Board has continued to resource the organisation’s pursuit of new and innovative service solutions delivered through strong organisational and systems competencies. In addition to developing a range of initiatives, Diabetes WA was able to again deliver a surplus this year of $276,474 based on total revenues of $7,789,699 (see page 62).

Thank you to those who have supported us and worked alongside us this year. This important work cannot be achieved alone. It is through the generosity and support of the Western Australian community, funding and government bodies, and other health organisations that we are able to ensure this work is delivered and sustained for the future.
# Breadth of Our Services and Activities

## Diabetes Self-Management Education & Clinical Services

<table>
<thead>
<tr>
<th>Service</th>
<th>At Risk / Pre-diabetes</th>
<th>Gestational Diabetes</th>
<th>Type 1 Diabetes</th>
<th>Type 2 Diabetes</th>
<th>Locations</th>
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<tbody>
<tr>
<td>Type 1 workshop ‘DAFNE’</td>
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<td>Perth Metro (Subiaco), Great Southern (Albany)</td>
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<td>Type 2 workshop ‘DESMOND’</td>
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<td>ShopSmart workshops</td>
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<td>FootSmart workshop</td>
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<td>Telehealth for Country WA</td>
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<td>Endocrinology service through Telehealth</td>
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<td>Diabetes WA Workshop 'DESMOND'</td>
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<td>Type 1 Technology Night</td>
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<td>DESMOND Facebook support group</td>
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<td>Fact sheets, online resources</td>
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## Information & Community Events

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<th>Service</th>
<th>At Risk / Pre-diabetes</th>
<th>Gestational Diabetes</th>
<th>Type 1 Diabetes</th>
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## Training for Health Professionals
- DESMOND facilitator training
- Smarts facilitator training

## Strategic
- Commonwealth and state government submissions
- Diabetes WA representation with consultations and working groups
- Participation in/establishment of planning groups and partnerships
- Pilbara Diabetes Strategy
- Primary Care Engagement Strategy
- Advocacy on behalf of people living with diabetes
## AND ACTIVITIES

<table>
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<tr>
<th>Service</th>
<th>At Risk / Pre-diabetes</th>
<th>Gestational Diabetes</th>
<th>Type 1 Diabetes</th>
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<th>Locations</th>
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<td><strong>Prevention of Type 2 Diabetes</strong></td>
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<td>Walking Away from Diabetes</td>
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<td>Pilbara</td>
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<td>My Healthy Balance online health program</td>
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<tr>
<td>Get on Track Team Challenge</td>
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<td>Let’s Prevent</td>
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<td>South West</td>
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<td>Information sessions for high risk communities</td>
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<td>Centralised booking &amp; program co-ordination</td>
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<td>T1DE e-newsletter</td>
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<td>Talking Type 2 e-newsletter</td>
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<td>DIALOG for health professionals e-newsletter</td>
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<td>Health Bites e-newsletter</td>
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<td><strong>Media</strong></td>
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<td>TV advertising</td>
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<td>Media features, i.e. interviews &amp; articles - newspaper, television, radio, online</td>
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<td>Social media and YouTube channel</td>
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## BUILDING

### Upskilling & Education for Support Workers & Health Professionals
- School staff
- Aged care workers
- Aboriginal health workers
- Nurses
- GPs & GP practices
- Other allied health professionals
- Telehealth upskilling sessions for rural & remote health professionals
- Aboriginal Health Forum

### Evaluation & Research
- National Health & Medical Research Council – Aboriginal DESMOND
- Diabetes WA representation at industry conferences
- Submission of abstracts for conference agendas
- National Evaluation Team
HAVING A VOICE

Advocacy is taking action to help people say what they want, secure their rights and represent their interests. We work in partnership with the people we support and speak for people living with diabetes when they are unable to, giving them a public voice. Our advocacy work promotes inclusion, equality and social justice, and calls for greater sensitivity to cultural differences and health disparities.

To be innovative we need to seek opportunities to advocate on behalf of our members and the diabetes community. It is important that Diabetes WA continue to be a part of the health agenda and, at every opportunity, we offer our thoughts and expertise to key influencers and decision-makers.

In 2017/18, where government departments asked for opinion on draft policies or reports which would affect people with diabetes, we drafted submissions to ensure the voice of people with diabetes was heard and their interests represented.

- **Dec 2017** – WA Department of Health conducted consultations with the male health and wellbeing sector to inform the development of a new WA Male Health and Wellbeing Policy.
- **Dec 2017** – WA Department of Health sought feedback from interested stakeholders across WA to inform the development of the State Public Health Plan which will be released once Part 5 of the Public Health Act 2016 is enacted.
- **Oct 2017 and May 2018** – WA Department of Finance undertook a review and update of the **Delivering Community Services in Partnership (DCSP) Policy** and asked for opinion on developing the proposed amendments prior to submitting the draft DCSP Policy to the Community, Safety and Family Support Cabinet sub-committee for endorsement.
- **Jan 2018** – Commonwealth Department of Health undertook consultation regarding its health-related Sustainable Development Goals and Diabetes WA submitted case studies.
- **Oct 2017 and April 2018** – WA Department of Health undertook its Sustainable Health Review and sought submissions to help shape the future of the WA health system.

Diabetes WA was invited to attend forums with the Health Minister and other decision makers following provision of feedback.

- **April 2018** – WA Department of Health undertook an Obesity Management Service Inventory to obtain information on the obesity management programs that exist in the primary, secondary, and tertiary sectors in WA. The aim was to provide a benchmark of what programs currently exist in WA and how well we are servicing the need in our community.

- **Ongoing** – Diabetes WA assisted national diabetes advocacy work by providing support for CGM training, promotion of the My Health Record and education support through the Diabetes Telehealth service for those in rural and remote communities.

- **Ongoing** – By having a presence at industry expos and conferences and taking advantage of opportunities to educate our peers and relevant academia, we have an impact on policy development and decision-making.

- **Ongoing** – Our Primary Care Strategy helped to develop and promote the best diabetes care for people by engaging and working with many stakeholders.
“As the burden of type 2 diabetes grows in the community, we need to address it in a more vigorous and robust way. That’s why I support the Let’s Prevent program”

Dr Chris Plint, Principal GP, Forrest Family Practice Bunbury
Chronic conditions are responsible for 83 per cent of all premature deaths in Australia and 66 per cent of the burden of disease, making them our nation’s greatest health challenge.

Nearly 40 per cent of people aged 45 years and over have been diagnosed with two or more chronic conditions, with an additional 30 per cent of the population shown to be at risk of developing one. Health behaviour and lifestyle changes have been shown to significantly reduce the development of these chronic conditions. The return on investment of public health interventions, delivered at the local level, has been conservatively estimated at 4:1, with every dollar invested in public health resulting in $4 returned to the community and wider health care system.

Promoting health and preventing chronic conditions can reduce costs overall because of the reduced need to treat expensive diseases. Diabetes is conservatively estimated to cost Australians $14 billion per annum and is likely to cost $30 billion per annum by 2025.

At present, type 1 diabetes cannot be prevented. The environmental triggers that are thought to generate the process that results in the destruction of the body’s insulin-producing cells are still under investigation.

Type 2 diabetes is a chronic condition and research has shown that in some cases it can be prevented with lifestyle support. There is strong evidence that even people who are at high risk of developing type 2 diabetes can prevent or delay the onset of the condition by following a healthy lifestyle.

Diabetes WA continues to dedicate resources to the prevention of type 2 diabetes. In addition to the maintenance of our two core online-based healthy lifestyle programs, a Prevention Manager and Project Officer were appointed in early 2018. These roles have been focused on establishing partnerships with local government, GPs and other stakeholders in the South West of Western Australia, in preparation to launch the new Let’s Prevent program in this at-risk area of the state.

Our Pilbara Diabetes Strategy, which was introduced late last financial year and has been running in the North West of Australia, also has a component focused on prevention, with the Walking Away program.
Year in Review

The State Government provided just under $1 million in funding to pilot the modified delivery of the Let’s Prevent program to residents in the South West of WA, identified at high risk of developing diabetes, cardiovascular disease and/or stroke. The pilot was initiated in Bunbury and will include a readiness assessment for roll out to other WA regional locations over the two year period. A minimum of 700 participants will be recruited to the program over the two year period with a participation completion rate of 60%.

The program commences in August 2018, so this year was focused on preparation for its launch during National Diabetes Week in July:

- Adaptation of the Let’s Prevent Diabetes UK resources, including the introduction of stroke and heart disease into the curriculum and associated resources, and the development of a health professional training manual.
- Establishing partnerships with local stakeholders and health professionals in the South West, including joining the Diabetes South West Regional Planning Meeting, which will provide a reference group for the program. Members include:
  - WA Country Health Service
  - GP Down South
  - Brecken Health
  - St John of God Hospital, Bunbury
  - Silver Chain
  - WA Primary Health Alliance

Fast Facts

As the program will be carried out in the next financial year, evaluation of its efficacy has not yet been conducted. However, evaluation of the UK historical delivery of the program has found that participants who attended the initial session and refresher session were 62 per cent less likely to develop type 2 diabetes, compared to people receiving standard care. Participants who completed all components of the program were 88 per cent less likely to develop type 2 diabetes. Evaluation also found significant improvement in participants’ HbA1c levels, LDL cholesterol, psycho-social wellbeing, and sedentary time and activity levels.

Program Outline

Delivered widely in the UK under the National Health Service, the Let’s Prevent program is a structured lifestyle education program aimed at increasing knowledge and promoting the adoption of healthy behaviours to prevent type 2 diabetes and other chronic conditions. The program is grounded in evidence-based principles of health psychology, health behaviour change, and patient empowerment to promote the initiation and long-term adoption of health behaviours.

The year-long education program involves an initial six-hour group education session followed by a three-hour follow up session at the six-month mark. Three telephone support sessions are also conducted two, four and 12 months after their initial workshop.
Get on Track
getontrackchallenge.com.au

My Healthy Balance
myhealthybalance.com.au

Program Outline
The Get on Track Challenge is a free team-based online program designed to get people moving and eating better. The challenge involves teams competing against each other by logging daily physical activity levels plus fruit and veg intake to move further along a virtual race track. Diabetes WA coordinate several official challenges each year, but participants can create their own with friends or colleagues at any time.

Year in Review

Year in Review
My Healthy Balance underwent redevelopment this year to increase functionality and make the program more user-friendly. Revisions included the ability for users to reset their own passwords, an update to the privacy policy, as well as updating the physical activity levels to ensure there are no inaccuracies when participants log data. A pop up instructional guide was also incorporated to help participants navigate through the program and there was improvement in the embedded evaluation process to ensure more meaningful data was extracted.

Fast Facts

1999 people successfully completed the program

July 2018 will see the completion of the Australian adaptation of the Let’s Prevent program curriculum, with 12 local health professionals in the South West trained to deliver the program. Participants will be recruited and education sessions will commence in August. The Let’s Prevent contract has been extended to June 2020 to allow for a greater recruitment period for participants.
“Even though at times you may feel overwhelmed with diabetes, this course makes you confident you can do it.”

DESMOND participant
A diagnosis of diabetes is just the start of a lifelong health journey and Diabetes WA aims to be there to help people, and their support teams, along the way.

With 4.9 per cent of the Western Australian population currently diagnosed with diabetes (126,222 Western Australians registered on the NDSS as at 30 June 2018), it is essential that the programs and services that we provide are relevant and progressive.

The evidence-based diabetes self-management programs that Diabetes WA delivers are models of quality and consistence and set the standard for WA. Our programs are focused on empowering people by equipping them with the knowledge, skills and confidence to manage and live well with diabetes.

Innovative thinking in our approach to diabetes education helps us to not only keep up with the pace of advances in technology and research development, but also to ensure we are remaining person-centred and making the most of shared resources that are available.

Interventions designed to improve diabetes outcomes rely on engaging people in their own self-care. Education sessions need to recognise the emotions around a person’s perception and attitudes towards a diabetes self-management task and support people to develop problem solving skills.

The overall aim of Diabetes WA’s self-management programs, is to engage people to be empowered and proactive in managing their diabetes and to feel less distressed about living with the condition. This can only happen when people do not feel stigmatised and understand their diabetes, understand the importance of self-management, know how to self-manage, and believe in their ability to achieve set goals.

If people understand their diabetes, they also have lower cardiovascular risk and risk of complications associated with diabetes and other chronic illnesses (Skinner et al. 2003).

All Diabetes WA programs and services are delivered in an environment free of judgement, ensuring people do not feel stigmatised about their condition.

Diabetes WA provide a range of education programs and services that can help people to learn to self-manage their condition, so they become the experts in their own self-care and can improve their quality of life while living with this condition.

Diabetes WA has established its vision for diabetes self-management to facilitate effective internal planning and to establish a platform for consistent discussion with diabetes stakeholders. We are working cooperatively with diabetes agencies in other jurisdictions and government agencies to assist the process of developing this vision.

**Diabetes WA core principles for diabetes self-management:**

- The principles of self-management must apply equally to those at risk of diabetes, as they do to those diagnosed.
- Diabetes self-management is a process and must be capable of spanning awareness, comprehension, acceptance, intention and action over an extended period.
- Interventions must be engaging, motivating and capable of evolving a sustainable relationship between service provider and recipient.
- Interventions must be quality assured.
- One size won’t fit all.
Program Outline

Established in 2002 (and previously called the Diabetes Information and Advice Line – ‘DIAL’), our telephone and email helpline provides access to a credentialled diabetes educator for people seeking advice, support, and information on diabetes. Supported by the WA Department of Health, the helpline is open to everyone and is available Monday to Friday from 8:30am to 4:30pm, throughout the year, excluding public holidays. The service is supported by our Customer Support Service Officers at the Diabetes WA Belmont office who offer support and advice to people within their capacity and pass on those calls requiring a diabetes educator. This ensures a prompt responsive service that is easily accessed by all people with diabetes.

Year in Review

The Diabetes WA Helpline continues to provide a key coordination role due to its ability to link health systems and reconnect consumers to primary, secondary and tertiary health services.

In December 2017 Diabetes Australia formalised a national centralised call centre number. There was a concern that many calls for our diabetes education team would be lost in this transition. However, with the promotion of our new local 1300 number, calls to our advice lines remained constant.

Actively promoting the service to regional health professionals has been a focus of the later part of this year, as there are real synergies with supporting health professionals in the community to provide quality care for people living with diabetes. This promotion has been driven through integration with the Diabetes Telehealth service which has significant access and ongoing communication with regional health professionals through the Telehealth Health Professional Upskilling sessions and through direct engagement with regional health services. See pages 39 and 33 for more on our Telehealth and Telehealth upskilling services.

An evaluation of the helpline, representing 10 per cent of callers, received overwhelmingly positive feedback, demonstrating that the service continues to be highly valued by consumers. Almost all respondents were satisfied that their reason for calling the service was addressed and would recommend the service to others, and most agreed or strongly agreed that the diabetes educator supported them to make autonomous decisions about their diabetes self-management.

- The Net Promoter Score (NPS – a measurement of the likelihood that someone would recommend the service to a friend) for 2017/18 was 83. This is an excellent result, as the average NPS quoted in the NPS Benchmarks Survey across the health industry was 62.

Fast Facts

<table>
<thead>
<tr>
<th>Method of Contact</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>79%</td>
</tr>
<tr>
<td>Email</td>
<td>17%</td>
</tr>
<tr>
<td>Walk-in to the office</td>
<td>4%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reason for Contact</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type 2 diabetes</td>
<td>60%</td>
</tr>
<tr>
<td>Type 1 diabetes</td>
<td>21%</td>
</tr>
<tr>
<td>Other</td>
<td>19%</td>
</tr>
<tr>
<td>Seeking information on behalf of a family member, patient or friend</td>
<td>22%</td>
</tr>
</tbody>
</table>

Diabetes WA Helpline Contacts by Region
July 2017 to June 2018

Total Contacts: 2213

- South Metro: 1052
- Southwest: 132
- Peel: 1052
- Perth Metro: 52
- Wheatbelt: 213
- Goldfields: 24
- International: 6
- Interstate: 12
- Christmas Island: 4
- Great Southern: 52
- Midlands: 36
- Pilbara: 44
- Kimberley: 12
- Gascoyne: 6
- South West: 156
- Christmas Island postcodes not recorded: 581
Year in Review

This year, 68 DESMOND sessions were delivered across Belmont, Subiaco, Mirrabooka, Caversham, Melville, Forrestfield, Riverton, Wanneroo, Joondalup, Mandurah, Rockingham, Helena Valley and Cockburn in the Perth metro area.

‘Diabetes Hotspots’ have been identified by the WA Primary Health Alliance in their *Lessons of Locations* report which showed areas with highest rates of preventable hospitalisations from diabetes-related complications. To ensure we are working where it is most needed, Diabetes WA have combined this with our NDSS registration data to specifically target ‘diabetes hotspots’ for our service planning and delivery for 2018/19. Metropolitan areas identified are: Parmelia/Wellard, Kwinana/Calista, Cockburn, Rockingham, Mandurah, Midland/Guildford, Balga/Mirrabooka, Armadale.

We are also consulting with the South Metropolitan Area Health Service to explore opportunities to integrate DESMOND with their service pathways and discharge planning and approval has been given from Professor Tim Davis, Clinical Lead for the Diabetes and Endocrine Network, to include DESMOND as part of service pathways.

Ongoing evaluation of DESMOND continues to show that participation in the program considerably increases empowerment and reduces diabetes distress in those who have attended (see evaluation results on page 21).

In a WA first, Diabetes WA used the Patient Activation Measure (PAM) to assess whether a person’s likelihood to engage in managing their own health care, could be impacted through participation in DESMOND.

The Patient Activation Measure (PAM), is a validated predictive tool that measures how likely a person is to engage in managing their own health care such as self-monitoring, following treatment plans and adhering to medications (see page 47 to learn more about PAM).

Though this measure was used comprehensively only for DESMOND sessions conducted in regional areas of WA this year (see page 42), PAM will be introduced as a measurement tool for metro programs going forward. Until now, we have used behavioural measures, such as levels of diabetes empowerment and diabetes-related stress, to assess the impact of the program on metro participants. This has provided us with the information required to assess the efficacy of the program, but the more rigorous evaluation of the regional programs has demonstrated the value of introducing this measure into evaluation of our metro program as well.

DESMOND sessions are typically co-facilitated by diabetes educators and dietitians but there are now a range of allied health professionals delivering DESMOND such as exercise physiologists and pharmacists. This is a key step when considering the importance of capacity building within our health system. Training other health services to deliver Diabetes WA programs increases the reach beyond the metropolitan area. Six health professionals were trained to deliver DESMOND in regional areas to capacity build the DESMOND facilitator workforce. See page 35 for a discussion of the DESMOND training program for health professionals.

A self-management WA Health Department funded grant, specifically targeting regional and rural areas of Western Australia, commenced in July 2017. The key outcomes of this contract are to deliver a quality, evidence-based self-management program to meet the needs of people living with type 2 diabetes, and to improve health outcomes for people with type 2 diabetes in regional and remote areas. For information on DESMOND delivered in regional WA see page 41 and in Aboriginal communities see page 24.
DESMOND Facebook Support Group

On 5 May Diabetes WA launched the DESMOND Diabetes Support Group on Facebook. The objective of the group is to provide ongoing social support and role modelling experiences, and to decrease social isolation for people who have attended a DESMOND workshop, particularly for those living in rural and remote areas of the state. Though the page is not branded as a Diabetes WA group - to enable more open dialogue within the group - we have been involved in setting up and administering the forum. DESMOND facilitators also provide input upon request from members.

The group is closed, meaning that while Facebook users can find the group, only members can see who is a member and follow the conversation. It is exclusively for people who have completed DESMOND to encourage each other to continue the journey they started at the workshop and to share ideas about living with diabetes.

The momentum in the group is building, with around 40 members by the end of the financial year and several active discussions started by members.

Fast Facts

<table>
<thead>
<tr>
<th>DESMOND program delivery in WA</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of metro DESMOND workshops delivered</td>
<td>68</td>
</tr>
<tr>
<td>Total number of participants attending metro DESMOND programs</td>
<td>555</td>
</tr>
<tr>
<td>Total number of support people attending</td>
<td>103</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DESMOND program delivery across AUSTRALIA</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of participants attending DESMOND nationally</td>
<td>1,622</td>
</tr>
</tbody>
</table>

83.6 Net Promoter Score

Indicates participants are highly likely to recommend our program (scale of -100 to 100)

-100 -50 0 +50 +100

People felt
70.4% less diabetes related distress

People felt
78.2% more empowered to manage their diabetes

"We regularly refer patients to the DESMOND program and only receive positive feedback from patients. It is a comprehensive education session that newly diagnosed patients with diabetes find invaluable. Your [the Diabetes WA team’s] correspondence is definitely valuable. Often, we refer to services and never really know if a patient attends if we do not get some form of confirmation of attendance. Patients who do not attend for different reasons infrequently tell the GP that they didn’t go. We assume they have received the education or assessment just because we referred them.”

- Dee, Practice Nurse, Albany
Following the development of new Smarts participant resources and quality assured facilitator curriculums late last year, 2017/18 saw a roll-out of training of health professionals across Australia. A total of 46 health professionals were trained from other states and territories. Facilitators who are trained are required to commence and follow a quality development pathway to ensure they deliver the Smarts programs to a high standard, while ensuring they deliver them to people with diabetes in a consistent way across the country. The Diabetes WA Smarts team have commenced facilitator assessments as part of this continuing quality assurance. Locally we have continued to deliver workshops throughout the metro and greater metro area focusing on areas of high diabetes prevalence. In total in WA we delivered 90 Smarts programs to 851 participants. Throughout Australia last year over 4500 people with diabetes have attended our Smarts programs delivered in all states except the Northern Territory.

**Fast Facts**

<table>
<thead>
<tr>
<th>Smart Workshop</th>
<th>Sessions</th>
<th>Participants</th>
<th>Support people</th>
</tr>
</thead>
<tbody>
<tr>
<td>ShopSmart (Supermarket)</td>
<td>14</td>
<td>98</td>
<td>28</td>
</tr>
<tr>
<td>ShopSmart (Classroom)</td>
<td>21</td>
<td>165</td>
<td>41</td>
</tr>
<tr>
<td>CarbSmart</td>
<td>22</td>
<td>190</td>
<td>33</td>
</tr>
<tr>
<td>MedSmart</td>
<td>9</td>
<td>45</td>
<td>8</td>
</tr>
<tr>
<td>FootSmart</td>
<td>14</td>
<td>127</td>
<td>19</td>
</tr>
<tr>
<td>MeterSmart</td>
<td>10</td>
<td>85</td>
<td>12</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>90</strong></td>
<td><strong>710</strong></td>
<td><strong>141</strong></td>
</tr>
</tbody>
</table>

**Smarts Diabetes Empowerment after attending a Smarts workshop**

Diabetes empowerment: a key measure for structured self-management programs that reflects the extent to which people feel empowered to make positive choices regarding their diabetes management, indicating their likelihood to adhere to self-management goals in the long term.
Year in Review
In March, DAFNE ventured to regional WA for the first time, with a program delivered in Albany. As part of this inaugural process, though the five-day workshop was delivered face-to-face in Albany, the initial pre-assessments and the six-week and six-month review sessions are being conducted using telehealth services. Evaluation of those sessions will assess whether telehealth is an appropriate way of providing the review sessions to rural and remote areas going forward to make the program more feasible.

We continue to get very positive feedback from participants of the DAFNE program and evaluation results show that attending DAFNE significantly reduces diabetes distress and increases diabetes empowerment (see diagram on right). Often with similar programs participant numbers decrease significantly with follow up or review sessions, however the high number of DAFNE participants that return for the review sessions is reflective of this positive response to the program.

Fast Facts

<table>
<thead>
<tr>
<th></th>
<th>No of Sessions</th>
<th>Total Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAFNE Course</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Review Sessions</td>
<td>5</td>
<td>22</td>
</tr>
</tbody>
</table>

**Comprehensive type 1: DAFNE**

**Behavioural Outcomes**

<table>
<thead>
<tr>
<th></th>
<th>PRE</th>
<th>POST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes Empowerment</td>
<td>31.2/40</td>
<td>36.6/40</td>
</tr>
<tr>
<td>Diabetes Distress</td>
<td>32.3/100</td>
<td>22.0/100</td>
</tr>
</tbody>
</table>

*p<0.06 indicates participants experienced meaningful improvement in empowerment and distress

**Overall...**

- **88.9%** Felt more empowered to manage their diabetes
- **75%** Felt less diabetes related distress

**Consumer Feedback**

**Net Promoter Score**

- 90

Participants highly likely to recommend program to others
Aboriginal DESMOND
aboriginalhealthdiabeteswa.com.au

Program Outline
The Aboriginal DESMOND program is a modified version of DESMOND, which aims to better meet the needs of Aboriginal and Torres Strait Islander communities. This modified version involves improved health literacy, altered food models, activities, risk profile and participant action plans, among other things. These changes were made as a result of significant consultation with Aboriginal communities across WA to increase the program’s cultural suitability.

Year in Review
Diabetes WA has continued to work with Menzies School of Health Research, along with a number of local and international collaborators, to progress the National Health and Medical Research Council (NHMRC) funded research project. This research aims to determine the cultural suitability and clinical impact of the Aboriginal DESMOND program.

Aboriginal DESMOND programs, which form part of the NHMRC research, have been funded by the WA Primary Health Alliance (WAPHA) for travel to the Pilbara, and the State Health Department of WA under the self-management grant for program coordination and delivery. The programs have been delivered in the Perth metropolitan region, as well as the South West and Pilbara regions of WA.

- East Metropolitan Health Service – Midland, Armadale, Maddington, Mirrabooka, Ashfield
- Nidjalla Waangan Mia – Mandurah, Pinjarra
- South West Aboriginal Medical Service - Bunbury
- Karratha Central Healthcare – Karratha
- Mawarnkarra Health Service (MHS) – Roebourne
- Puntukurnu Aboriginal Medical Service – Newman
- Wangka Maya Pilbara Aboriginal Language Centre – South Hedland
- Onslow (in conjunction with Heart Foundation and MHS)

A number of post-program yarning groups were delivered to gather feedback from participants regarding the program. Quantitative data collection also commenced, involving both pre and post program data collection for variables such as HbA1c, cholesterol, blood pressure and smoking status, among others.

Fast Facts
Aboriginal DESMOND programs delivered 15
Participant attendances 122
Post-program yarning groups 7
On the 27th June, Diabetes WA hosted the Aboriginal Health Forum. The event brings together professionals working in the field of Aboriginal health to expand knowledge in the sector, particularly around type 2 diabetes, and showcases innovative programs and initiatives, the latest diabetes research and Aboriginal and Torres Strait Islander keynote speakers from across Australia. Around 80 attendees had the opportunity to hear presentations from the 1 Deadly Step Program NSW, Moorditj Djena, Mawarnkarra Health Service and the SA Aboriginal Diabetes Strategy 2017/2021. Tricia Elarde, NDSS National Advisor for Aboriginal and Torres Strait Islander People, also presented as a keynote speaker.

Evaluation and feedback from the day was very positive with a number of attendees commenting that the opportunity to be together in the same room to discuss diabetes and Aboriginal health is almost as valuable as the information presented on the day.
Culturally and Linguistically Diverse (CALD) Health

Year in Review

This year we have expanded our reach of CALD groups, by being more proactive in engaging with community organisations. This has resulted in an increase in sessions and a number of new cultural groups requesting CALD workshops. See table on right for a list of sessions that have been held in 2017/18.

There is also ongoing access to interpreter services for those from a CALD background contacting the general Diabetes WA Helpline. The uptake of this service to date has been limited but Diabetes WA is committed to continuing to promote this service through our engagement with the CALD community and integrating this engagement through our other services such as Diabetes Telehealth. Recent contact with the Multicultural Wellness centre has provided increased access to these communities.

Program Outline

The community education workshops that Diabetes WA delivers to our CALD community are based around the ‘Feltman’ tool – an interactive life-sized felt image of the human body that shows how diabetes works in the body. In the absence of funding to develop an adapted DESMOND program for this group, Feltman is a practical way to educate multicultural groups about diabetes prevention and management.

“Our session on Wednesday for Gujarati Senior went very well! We would like to thank you for organizing and also to thank Carly for her time and presenting the session! Feedback from participants was very positive and they found the session very informative and easy to understand! Thank you to both of you!”

Coordinator, Gujarati Seniors
The Diabetes WA Helpline continues to become more closely integrated with the Diabetes Telehealth service. It offers greater flexibility of service to those living in regional Western Australia with the vision that the helpline service becomes widely accessible to consumers and health professionals as a video conference, as well as phone, service using the Video Call platform. This service would be extended to regional and metropolitan Western Australia.

In the coming year we will offer the Smarts programs to selected regional areas of Western Australia so all people with diabetes, regardless of location, can benefit.

Program data analysis on our Aboriginal DESMOND program is due to commence in the second half of 2018. This includes the analysis of yarning group data and quantitative data, to help determine program impact.

Additionally, in an attempt to fully understand factors that influence the success, or otherwise, of the Aboriginal DESMOND program, and to understand how it could be sustainably embedded into service delivery models, health service providers that participated will be invited to take part in an interview. This will provide further information on the impact of the program (as seen from the perspective of the health service) while also guiding future work on how, if proven effective, this program could fit within diabetes care pathways for Aboriginal people. It is anticipated that results will be available in 2019, and these results will be communicated to the communities involved as a priority.

**Fast Facts**

**CALD Programs and Activities**

<table>
<thead>
<tr>
<th>Multicultural Group / Organisation</th>
<th>Language</th>
<th>Attendee Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multicultural Services Centre – Manning Centre</td>
<td>Indian</td>
<td>25</td>
</tr>
<tr>
<td>Multicultural Services Centre – Belmont Centre</td>
<td>Burmese</td>
<td>22</td>
</tr>
<tr>
<td>Multicultural Services Centre – Westminster</td>
<td>Vietnamese</td>
<td>25</td>
</tr>
<tr>
<td>Multicultural Services Centre – North Perth</td>
<td>Italian</td>
<td>25</td>
</tr>
<tr>
<td>Multicultural Services Centre – North Perth</td>
<td>Macedonian, Serbian, Italian</td>
<td>24</td>
</tr>
<tr>
<td>Multicultural Services Centre – North Perth</td>
<td>Italian</td>
<td>30</td>
</tr>
<tr>
<td>Multicultural Services Centre – North Perth</td>
<td>Chinese, Vietnamese, Burmese</td>
<td>13</td>
</tr>
<tr>
<td>Multicultural Services Centre – North Perth</td>
<td>Italian</td>
<td>26</td>
</tr>
<tr>
<td>Australian Asian Association of WA</td>
<td>Mixed Asian</td>
<td>19</td>
</tr>
<tr>
<td>City of Stirling - Nollamara CALD group</td>
<td>Mix Sudan / Middle East</td>
<td>15</td>
</tr>
<tr>
<td>Association for Services to Torture and Trauma Survivors (ASeTTS)</td>
<td>Ethiopia, Syria, Sri Lanka, Syria, Iraq, Palestine (woman only group)</td>
<td>22</td>
</tr>
<tr>
<td>Association for Services to Torture and Trauma Survivors (ASeTTS)</td>
<td>Mixed Middle East (men only group)</td>
<td>25</td>
</tr>
<tr>
<td>Australian Asian Association of WA</td>
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Customer Support Services

Solutions-focused

The NDSS National Call Centre is an initiative of Diabetes Australia to centralise all inbound calls currently undertaken by each state-based diabetes organisation and NDSS agent. Diabetes WA transitioned to a National Call Centre in December 2017 and has been continuing the promotion of our WA-specific 1300 001 880 number for all of our Diabetes WA activities including the Diabetes WA Helpline, bookings into workshops, product sales, memberships and other support when required.

A Customer Service Manager was appointed to manage the call centre through change management and provide staff upskilling to be well positioned in a changing environment. A coaching position was also appointed to ensure quality of calls, providing excellence in customer service.

Members of the customer support team underwent training in February to assist with building effective relationships with our consumers. The group received information on improving core communication, listening skills and rapport building. They also discussed how they can help people living with diabetes overcome barriers to attending a workshop, i.e. stigma or misunderstanding of information, and how to develop a better understanding of our customer needs, their values and concerns.

Managed 23,348 inbound calls

Reasons for call to Customer Support Services

Compliments (0.1%)
Complaints (0.1%)
Donations (0.1%)

Currently 1,010 registrants on the Government CGM Scheme

Provided 978 educational activities to pharmacists and assistants at NDSS Access Points

Distributed 10,612 educational resources

NDSS Access Points Supported 593

8,874 new NDSS registrations

Eating Out and Diabetes

Clinical Nutrition

Food

Feelings

Dealing

13.1%

2.6%

55.5%

14.4%

6.5%

7.6%

Donations
Complaints
Compliments
National Call
Calling for an Educator
Access Point
Product
Booking
General Enquiry

Diabetes WA Information guide for people with type 1 diabetes

For more information call 1300 001 880.

You can find a range of support groups in Western Australia on the Diabetes WA website: diabeteswa.com.au

Joining a type 1 support group can be an extremely positive experience. A diabetes support group can help you to feel understood, be part of a diabetes community and other support when required.

Partners and friends are also welcome to join you free of charge.

As part of your membership you will receive a subscription to Diabetes Matters, Diabetes WA’s quarterly magazine. It is full of helpful information on type 1 diabetes management and research. Each edition includes real-life stories, hints and tips to live well, and give you access to events and programs to make every day easier. To join, call our team on 1300 001 880, to complete the online form at diabeteswa.com.au or email membership@diabeteswa.com.au.

As part of your NDSS registration you receive a subscription to Diabetes Matters.

<table>
<thead>
<tr>
<th>Reason for Call</th>
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<tbody>
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<td>General Enquiry</td>
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<tr>
<td>Calling for an Educator</td>
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<tr>
<td>Product</td>
<td>14.4%</td>
</tr>
<tr>
<td>Booking</td>
<td>7.6%</td>
</tr>
<tr>
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<tr>
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<tr>
<td>Compliments</td>
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<tr>
<td>Donations</td>
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“It’s been good to learn that the Diabetes WA programs, like DESMOND, are funded outside the Medicare Benefits Schedule. It makes it easier for me to refer my patients and ensure they get the education and skills to manage their diabetes when they first receive their diagnosis.”

GP, Perth Northern Suburbs
ENGAGEMENT WITH HEALTH PROFESSIONALS

Diabetes WA strives to engage with those at the forefront of diabetes and to increase the capacity of health professionals, such as general practitioners, diabetes educators, community workers, aged care providers and allied health practitioners, to enable them to better meet the needs of people living with diabetes.

Focusing on developing stronger, more collaborative relationships with health professionals and primary care providers will enable us to become an integral provider of service to these groups that responds effectively to their needs and provides solutions when managing people with diabetes.

Diabetes WA provides training courses, study days and workshops to help keep professionals updated with the latest knowledge and best practice in the area of diabetes management and prevention. We also train health professionals who are interested in learning how to deliver our evidence-based programs to patients in their own areas.

Quality Assurance

We are committed to continuous improvement and work to have a positive impact on the health system to maximise the quality and availability of evidence-based program and service options to those with diabetes and/or related conditions as well as those at risk of diabetes.

We have meticulous processes in place to ensure our programs and services are of the highest and consistent quality in person-centred care and adhere to best practice.

A quality assurance pathway sits across all our programs. Diabetes WA’s DESMOND and Smarts programs are the only structured diabetes training programs in Australia to quality assure facilitators to ensure that consistency and fidelity is maintained from the original program research and evaluation.

We evaluate every program and every service that we deliver. We approach the evaluation of a health program by systematically collecting information from consumers about the activities, characteristics, and outcomes of our programs to make judgments about that program, improve program effectiveness, and inform decisions about future program development. Diabetes WA has a Research and Evaluation team which focuses on the evaluation of our health programs by using specific tools, methodologies and guidelines specific to the health sector (see page 46).
Primary Care Engagement

Program Outline
Diabetes WA has developed a Primary Care Engagement Strategy to maintain a robust connection to primary health and to strengthen relationships between primary care, the NDSS and Diabetes WA. By engaging with general practitioners, practice nurses and primary care providers we can support them to provide quality diabetes services for their consumers.

Year in Review
Our Primary Care Engagement Team has been working to integrate free NDSS programs and services into general practice systems to improve health outcomes for patients living with diabetes.

In 2017, a Primary Care Coordinator was appointed to implement the new strategy and a focus group, involving practice nurses, practice managers and GPs with a special interest in diabetes, was held to assist with developing the future of the program, based on the needs of primary care. Feedback from the group showed that care pathways of the patient, and the role of the GP and practice nurse, varied from practice to practice. Though GPs felt comfortable registering their patients with the NDSS, there was a general unawareness of the NDSS services that are available free of charge and a lack of understanding about the NDSS funded programs and how they interact with the individual allied health appointments funded by the Medical Benefits Schedule. The focus group also indicated that group education was perceived to be a useful resource by primary care providers.

In further recognition of the importance of collaboration, we established the Primary Care Advisory Group to help steer the direction of our services. The group provides strategic and operational guidance, explores the needs and expectations of primary care, provides feedback on proposed service delivery and identifies gaps in service provision. The group includes representatives from the primary care team (GP, Practice Nurse and Practice Manager), general practice support organisations and consumer representatives.

The primary care team have also been working with the Diabetes South West Regional Planning Group to develop an integrated pathway for a person diagnosed with type 2 diabetes. The pathway aims to support evidence-based optimal management of type 2 diabetes in general practice and utilise local services based on the needs of the patient.

The team is working closely with relevant divisions within the WA Primary Health Alliance to help the NDSS and Diabetes WA programs and services to become embedded into:
- Health pathways
- Integrated chronic disease care
- Integrated team care
- Practice Assist
- Comprehensive primary care models
Upskilling and Training

Program Outline
Diabetes WA provides training, upskilling and education to health professionals from the community health, primary care, aged care, private health and not-for-profit sectors to support them as they care for people at risk of, living with, or affected by diabetes. We provide updates on best practice and the latest diabetes knowledge, as well as training to deliver Diabetes WA self-management programs, referral pathways and resources.

Year in Review
Following new resources and revised facilitator curriculums being developed for our Smarts suite of programs last year, 56 health professionals across the country were trained to deliver the Smarts topic specific self-management programs for people living with diabetes.

This year, Diabetes WA introduced Facilitator Foundations and Fidelity (FFF) training to maintain the quality and fidelity of our self-management education programs when they are delivered across the country. FFF training is based on consistent underpinning theoretical models and person-centred philosophy of care embedded within our Quality Development process.

This training is being offered quarterly to each of the state and territory organisations, along with Smart program training and other topic-specific diabetes self-management modules which are endorsed by the FFF pathway. They must be designed and assessed to meet all social learning theory constructs and have an underlying person-centred philosophy of care and have been assessed to meet the NDSS National Standards for structured self-management education.

A FFF self-assessment tool was developed for all endorsed topic-specific programs and was rolled out in the final quarter of 2017/2018.

We also applied our philosophy of quality assurance of our DESMOND to our Smarts programs. We developed our own 15 core behaviours that facilitators must display before becoming a certified Smarts Facilitator.

Training and upskilling of health professionals this year also included:

- DESMOND training
- Diabetes updates for health professionals
- Diabetes overview to the United Voice Union
- Presentation on World Diabetes Day with the Lions Eye Institute
- Aboriginal health professional training and upskilling
- Diabetes in Aged Care training for both carers and health professionals

Diabetes WA was strongly represented at this year’s Australian Diabetes Society/Australian Diabetes Educators Association Annual Scientific Meeting. Presentations were made by six of our staff, showcasing our Telehealth program and DESMOND programs.

Diabetes WA brought to Perth two researchers from the Steno Diabetes Center in Copenhagen to co-facilitate an interactive workshop at the meeting to enable GPs and practice nurses to explore what patient-centred care looks like and importantly, what it doesn’t look like. Patient-Centred Care: Putting it into Practice focused on self-reflection and evidence-based educational tools that support health professionals to engage in patient-centred conversations.

A second workshop was also held following the conference, for GPs and practice nurses, hosted by the WA Primary Health Alliance.

Diabetes WA commenced Feltman (A life-sized felt body simplistically demonstrating diabetes complications and management) training in February 2018 to metropolitan and regional health professionals who work with Aboriginal clients. 37 professionals attended, with 22 regional health professionals attending the training via video conference.

Fast Facts

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Number of Events</th>
<th>Total Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Professional Upskilling/Training</td>
<td>47</td>
<td>979</td>
</tr>
<tr>
<td>Health Professional Engagement: Conferences/Expos</td>
<td>9</td>
<td>2,383</td>
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</table>
Telehealth Upskilling

Program Outline

Delivered by Diabetes WA through a partnership with the WA Country Health Service and WA Primary Health Alliance, the Diabetes Telehealth Health Professional Upskilling service builds diabetes management capacity in country WA by providing regular updates for health professionals with patients living with diabetes.

Two health professional upskilling sessions are delivered each month via video conference, which are available to all regional and remote health professionals. Typically running for one hour, every month different diabetes-related topics are comprehensively covered, either by Diabetes WA educators or by guest experts.

The telehealth upskilling service has continued to provide a much needed resource to regional health professionals. It builds broader capacity, develops relationships between health professionals and the telehealth service, and promotes it to country WA.

“I find the regular upskilling sessions invaluable! It is fantastic to be able to put aside an hour to receive quality updates and education from skilled and experienced practitioners without any expense to me or the organisation and without losing time to travel. These are sessions I would not have access to otherwise being in a remote location.”

Cezanne, Medicare Coordinator, Ngaanyatjarra Health Service
Year in Review

The focus of this period was to encourage attendance of the upskilling service by GPs and two GP-targeted sessions were conducted. Diabetes WA recently became a recognised provider for Compulsory Professional Development (CPD) points with the RACGP and Diabetes Telehealth will apply for the health professional upskilling sessions to be part of this program to encourage increased attendance by GPs.

Health professionals attending the sessions were generally diabetes educators, registered nurses working in hospitals and in medical practices, pharmacists, dietitians, an increasing number of general practitioners and a small number of Aboriginal Health Workers or Aboriginal people working in health services across other health professional roles.

The health professional upskilling service also responds to upskilling needs around new technologies and diabetes management and offers topic specific training. An example of this is training to regional diabetes educators in teaching the insertion of continuous glucose monitors (CGM) using the video conferencing platform. Educators attended the CGM training from Bunbury, Kalgoorlie, Broome, Albany and Lancelin in May and August 2017. Diabetes WA also provided start up CGM sessions for young people living in regional WA who otherwise would have had to travel to Perth for a one-hour session. These sessions were conducted with a diabetes educator or registered nurse in attendance at the regional site to provide support and assist with insertion of the sensor.

There were six health professional upskilling sessions uploaded onto our Diabetes WA YouTube channel which attracted 113 views.

Examples of workshop and diabetes update topics included:

- Mental health and diabetes
- Polycystic ovarian syndrome
- Diabetes in children
- Insulin initiation and titration
- Managing diabetes in people with disabilities
- Diabetes medication update

Diabetes WA also presented the poster Diabetes Telehealth: Using Telehealth to Upskill Health Professionals in Regional WA which was awarded best poster at the ADEA-WA Conference in April.

Fast Facts

- 576 Total attendance at all sessions.
- 23.5 Hours of training and education held.
DESMOND - Train the Trainer

Program Outline

The DESMOND Australia team offer training for health professionals throughout Australia and New Zealand to deliver the Newly Diagnosed and Foundation and Walking Away from Diabetes modules.

Once a health organisation has chosen to adopt the program into their delivery platform, health professionals involved in diabetes care within the health organisation are trained to become DESMOND educators. They attend a two-day training program to ensure they incorporate the learning theories and philosophies of DESMOND within their delivery of the program.

They are then mentored and assessed by DESMOND Australia and work towards accreditation, ensuring quality and consistency of delivery of the program.

Year in Review

The endorsement by the NDSS of the Diabetes WA DESMOND program as the national comprehensive structured diabetes self-management program has led to increased numbers of trained educators outside Western Australia.

The rigorous quality assurance process of the program means there were a number of lapsed educators that were advised this year that they could no longer facilitate the DESMOND workshops, as they had not completed the Quality Development (QD) Pathway that is necessary to gain and maintain accreditation.

There are currently around 168 trained facilitators actively delivering DESMOND around Australia and New Zealand. Previously trained educators continued to progress through their DESMOND quality development pathway and 10 became accredited in 2017/18.

Diabetes WA travelled to Brisbane to train educators from the Cairns Diabetes Centre, who were supported by Diabetes Queensland to attend. Educators from the Cairns Diabetes Centre are now equipped to deliver DESMOND programs in the Cairns/Hinterland region on behalf of Diabetes Queensland.

We also ran two DESMOND Study Days and took the opportunity to upskill two of our own DESMOND Trainers to deliver DESMOND Study Days, increasing our training capacity. The Study Days were used as an opportunity for some of the regional DESMOND educators who have not been able to deliver the program to re-enter the Quality Development pathway and return to delivering the program.

Trained DESMOND educators are filmed during program facilitation and must display 35 person-centred behaviours, deliver content consistent with the curriculum and meet quality controls for the percentage of time they are speaking versus the time participants are contributing before reaching accreditation.
Engagement with Health Professionals

Year Ahead

Engagement with Health Professionals

We are planning to enable training to take place in the coming year so that regional Smarts programs can be delivered by external facilitators.

Several discussions have taken place with Aboriginal Medical Services across the regions with regards to the presentation of Telehealth upskilling sessions specifically targeted to Aboriginal Health Workers and clinicians working with Aboriginal people, recognising that a different style of delivery and content is required. There has been specific interest from the Kimberley Aboriginal Medical Service and Puntukurnu Aboriginal Medical Service (PAMS). PAMS will trial their access to the regular upskilling sessions in July 2018 and if attendance and connection is problematic targeted sessions will be offered via Video Call.

Diabetes WA is also hoping to upskill more educators as DESMOND Assessors to aid in the Quality Development assessment and to increase the number of accredited DESMOND educators in the coming years.

We continue to work in collaboration with local primary care providers to integrate DESMOND as part of referral pathways for people with type 2 diabetes, and be actively involved in primary care engagement strategies.

A Facilitator Foundations and Fidelity (FFF) ‘Train the Trainer’ program is to be developed by Diabetes WA to enable FFF training and assessments to be conducted in other states. This will be an investment by Diabetes WA external to the NDSS. A ‘Train the Trainer’ program will also be developed by Diabetes WA to enable localised training in Smart programs.

Fast Facts

**DESMOND Training**
- 7 Sessions
- 51 Attendees

**DESMOND Study Days**
- 2 Sessions
- 15 Attendees

**DESMOND Walking Away Training**
- 2 Sessions
- 10 Attendees

**DESMOND - Train the Trainer**

Net Promoter Score: 74.4

Participants highly likely to recommend program to others
IN THE REGIONS

“Living in a rural area and being able to have direct contact with a diabetes educator via video call was, in my opinion, extremely helpful.”

Telehealth client
People with diabetes who live in rural and remote communities often experience geographical barriers that limit their access to diabetes services. To address the discrepancies, the strategy recommends potential areas of action:

- Coordinate regional services across primary, secondary and tertiary care to facilitate access to care and the necessary support services.
- Support community-based health workers through training and education.
- Ensure the availability of telehealth and internet medical services and ensure equitable access to other technologies and services as appropriate.
- Develop partnerships and linkages between local clinicians and health professionals and major specialist diabetes centres.

When looking at the breadth of services that Diabetes WA delivers to people in rural and remote areas of Western Australia, it is clear that our programs tend to many of these areas of action.

Rigorous evaluation of the effectiveness of Diabetes WA’s diabetes education workshops in regional WA has shown that participants become more engaged in managing their own health, with potential savings to the healthcare system through fewer hospitalisations due to diabetes and its complications.
Year in Review

Diabetes WA has continued to consolidate and expand the telehealth service, commencing the diabetes endocrinology service, as well as a specialised service to address the increasing number of gestational diabetes referrals.

A big highlight of the year for the Telehealth team was being named the winner of the highly prestigious Director General’s Award at the Health Department’s WA Health Excellence Awards 2017. The team also won in the category of Overcoming Inequities, for which we were a finalist last year.

August 2017 saw endocrinologist Dr Gerry Fegan conduct his first Telehealth appointment, starting with a client in Albany. Delivered by Diabetes WA and supported by WA Country Health Service (WACHS) and WA Primary Health Alliance, the free clinic began operating from the Diabetes WA Subiaco office once a month and is available to regional patients who are unable to access an endocrinologist locally. With a GP referral, patients can link in from a local WACHS facility, GP surgery or their home via Scopia or Skype.

The attendance rate for the Telehealth Endocrinology service was 95.2% with only three appointments that were not attended by the client. Such a high rate of attendance is evidence of both the need for the service, and the value placed on it by those who are referred.

Additionally, to improve patient access to health services in Western Australia, WACHS, via their state-wide chronic conditions program, requested that the Department of Health provide Diabetes WA with access to Video Call, a suite of services and web-based management software designed for healthcare providers. In April 2018, Diabetes Telehealth introduced the new video conference platform and patient appointments using this program commenced in June 2018. A link to access Video Call is available on the Diabetes WA website.

Through active promotion of the Diabetes WA Helpline service to regional health professionals and health services, a greater awareness of the service has been established in regional WA. We successfully initiated utilisation of the helpline service as a frontline conduit to a telehealth appointment. This is particularly beneficial to Aboriginal Medical Services where availability of opportunistic appointments greatly improves the
chances of an appointment occurring. Video Call is used for this service.

The Diabetes Telehealth Service recognised the service gaps in local antenatal care pathways for women with Gestational Diabetes Mellitus (GDM) in regional WA. With an increase in GDM referrals a new service model was developed. The service offers access to credentialed diabetes educators via video conferencing supporting usual care delivery for regional women, facilitating timely access to GDM monitoring data, and mitigating care burdens without compromising maternal and foetal outcomes. Care is coordinated through networks with local health professionals. By offering prompt and frequent face to face contact women are empowered to acquire self-management skills essential for a healthy pregnancy as early as possible. Timely referrals are also made to nurse practitioner led insulin initiation services via video conference at King Edward Memorial Hospital.

To date, we have provided 127 occasions of service to women with GDM, which has saved a total of 70,943 kilometres of travel. The service proactively contacts local health professionals to offer consultations, resulting in a 37% rise in GDM referrals from January 2018.

Evaluation results continue to demonstrate the positive impact of the Diabetes Telehealth service, which received 349 referrals and delivered 957 occasions of service in 2017/18.

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**Fast Facts**

**Diabetes Telehealth**

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<th>349</th>
<th>Occasions of service</th>
<th>957</th>
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</thead>
<tbody>
<tr>
<td>Clients seen</td>
<td>735</td>
<td>KM’s saved*</td>
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**Occasions of Service by region:**

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</table>

**Referral sources:**

- Self: 11
- GP: 227
- Health Navigator: 16
- Nursing Staff: 44
- Allied Health: 38
- Other: 5

**Service delivery methods:**

- Telehealth (VC): 432
- Phone: 472
- Skype/Scopia/Facetime: 43
- VC/Phone: 1
- Video Call: 2

**Diabetes WA Telehealth Endocrinology**

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**Feedback**

- Patients:
  - "Would recommend this service highly as it has really benefited me and my family financially and I was still able to go to work without taking time off."
  - "No improvements needed for me in a remote area who needs to wait for a visiting specialist or fly to Perth for an appointment."
  - "First time was a good result, time effective and informative."

- Health Providers:
  - "Could not be happier with the professional expertise, efficient coordination and excellent communication which benefits our rural patients."
Regional DESMOND

Program Outline
The ‘Diabetes Education Self-Management Ongoing and Newly Diagnosed’ (DESMOND) program was introduced to Australia in 2011 and is currently the only evidence-based, one day (6 hours) self-management program available for Australians with type 2 diabetes, with rigorous quality assurance. Diabetes WA runs DESMOND workshops in both metro and regional areas. (See page 20 for a report on the DESMOND program in metro Perth)

Year in Review
A DESMOND self-management grant, specifically targeting regional and rural areas of Western Australia, commenced in July 2017. The key outcomes of this contract are to deliver a quality, evidence based self-management program to meet the needs of people living with type 2 diabetes, and to improve health outcomes for people with type 2 diabetes in regional and remote areas. The areas targeted by the regional DESMOND programs are; the Kimberley, Peel, South West, Midwest, Great Southern, Goldfields and Wheatbelt. The delivery of our Aboriginal DESMOND program in the regions was funded by the self-management grant, while the research component was funded by the National Health and Medical Research Council (NHMRC) (see page 24).

Some new, or long unvisited, locations were added to the DESMOND schedule this year which has bought care closer to home for those in regional WA. These areas include: Collie, Harvey, Manjimup, Busselton, Bridgetown, Geraldton, Dongara, Rockingham, Ravensthorpe, Norseman, Broome, Derby, Mt Barker, Kalgoorlie, Katanning, Kojonup, Kendenup, Kununurra, Gnowangerup, Gingin, Bindoon, Quairading, Pingelly, Bruce Rock, Dalwallinu, Beverley, Dumbleyung, Narembeen, York and Moora.

To provide regional health professionals with more support, all marketing efforts for promoting the programs and bookings for regional DESMOND sessions were undertaken by Diabetes WA. The feedback on this approach was very positive as it took time and administrative pressure off the regional facilitators and ensured consistency across the program.

The DESMOND team have invested time in engaging with local stakeholders, including Integrated Chronic Disease Care providers and local diabetes services, about their capacity to deliver DESMOND in the regions and having discussions with each region to embed the DESMOND program into local integrated diabetes pathways. Time has also been spent on sourcing locations for the DESMOND program to be delivered based on identified need.

The Patient Activation Measure (PAM), is a validated predictive tool that measures how likely a person is to engage in managing their own health care such as self-monitoring, following treatment plans and adhering to medications. Diabetes WA started using PAM in the regions to assess whether a person’s likelihood to engage in managing their own health care, could be impacted through participation in a DESMOND workshop. (See page 47 for more about PAM)

In the first four months of 2018, 435 people with type 2 diabetes attended a DESMOND diabetes
workshop in regional Western Australia. They were sent a questionnaire before and after they attended the program. Seventy one per cent of the people who completed both questionnaires showed an increase in patient activation. The average activation increase across respondents was 13.4 points across the 100 point scale. International evidence suggests that for every one-point increase in PAM score, the likelihood of hospitalisation for a chronic condition decreases by 1.7%. Thus a 13-point increase in PAM score could decrease the likelihood of hospitalisations due to diabetes and its complications by up to 22%.

In a WA first for any health department funded program, significant increases were seen in the PAM result for DESMOND, demonstrating a 16.5% reduction in future risk of diabetes complications and hospitalisation demonstrating potential cost savings to the tertiary system.
Pilbara Diabetes Strategy

Program Outline
Working in collaboration with the WA Primary Health Alliance (WAPHA), the aim of the Pilbara Diabetes Strategy is to:

- upskill health professionals in the Pilbara to deliver DESMOND and Walking Away to people with, and at risk of, type 2 diabetes;
- link to Diabetes WA Telehealth for the management of diabetes; and
- deliver the revised and culturally adapted DESMOND program to Aboriginal people in the Pilbara.

"Our people need this education. Diabetes is a real issue up here and so many people in the community would benefit from this."

Roebourne DESMOND participant.

Year in Review
For the first time ever, people with type 2 diabetes in the Pilbara are receiving structured, diabetes self-management education, including programs that are aiming to be culturally appropriate delivered to Aboriginal people.

In total, seven Aboriginal DESMOND programs were delivered to 85 program participants in Roebourne, Karratha and Onslow. Additional funding from WAPHA to cover travel and accommodation costs enabled the Pilbara region to be included as part of the NHMRC research project (see page 24).

Twelve health professionals in the Pilbara were trained to deliver DESMOND in Tom Price, South Hedland and Karratha and 10 were trained to deliver Walking Away, the type 2 diabetes prevention program.

Ten DESMOND programs were delivered in Tom Price, South Hedland, and Karratha but, despite nine Walking Away programs being scheduled, only two went ahead due to insufficient participant numbers.

Throughout the year, challenges presented themselves in the form of stretched resources, the transient nature of staff, and the lack of programs being integrated into ‘core business’ for delivery organisations, as well as the lack of an established pathway for program referrals, consumer apathy and a lack of readiness to engage.

The ground swell from the community is being felt and longer term commitment will allow this to be capitalised on with time and continued efforts. Awareness of the DESMOND programs has grown within the Pilbara community because of Diabetes WA’s presence there.

Fast Facts

Evaluation results from DESMOND sessions often showed statistically significant improvements and results;

- **Net Promoter Score** was high, **96.8** showing that participants were highly satisfied with the program and would recommend it to others.

- Based on the Patient Activation Measure, participants were more activated to engage in their health care after attending DESMOND, which is often associated with decreased hospitalisations and ER visits.

- Post-DESMOND evaluations showed a statistically significant reduction in diabetes-related distress after attending DESMOND.

- Post-DESMOND participants reported feeling supported by facilitators in terms of making their own decisions regarding their diabetes self-management and not feeling judged.
In the Regions

Rural and Remote Product Supply

Program Outline

Diabetes WA supplies NDSS diabetes products to NDSS registrants who are located in Australian rural and remote areas. The original agreement initiated in June 2016 was due to expire 30 June 2018 but has now been extended for another year due to the success of the program.

Year in Review

Diabetes WA provides NDSS products to:
- users of rural and remote clinics, predominantly Aboriginal Medical Services (AMS); and
- other rural and remote NDSS registrants.

There is an ongoing need for the distribution of NDSS products to AMS and rural and remote NDSS registrants in WA. WA has significant areas classified as very remote, remote and outer regional. WA also has a significant Aboriginal population, with approximately 60% of its Aboriginal population residing outside of the Perth metro area. The NDSS Pharmacy Access Point network requires support to adequately address the needs of these groups because it is more culturally appropriate for Aboriginal registrants to attend an AMS or the registrant does not live near a NDSS Access Point.

Fast Facts

From July 2017 to June 2018 Diabetes WA has distributed the following quantities of NDSS product under the rural and remote agreement:

<table>
<thead>
<tr>
<th>NDSS Product</th>
<th>Aboriginal Medical Services</th>
<th>Other Registrants</th>
<th>TOTAL SUPPLIED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insulin Pump Consumables</td>
<td>0</td>
<td>11,683</td>
<td>11,683</td>
</tr>
<tr>
<td>Strips</td>
<td>8,796</td>
<td>11,715</td>
<td>20,511</td>
</tr>
<tr>
<td>Sharps</td>
<td>3,655</td>
<td>5,543</td>
<td>9,198</td>
</tr>
<tr>
<td>CGM Sensors and Transmitters</td>
<td>0</td>
<td>527</td>
<td>527</td>
</tr>
<tr>
<td>TOTAL PRODUCTS</td>
<td>12,451</td>
<td>527</td>
<td>13,978</td>
</tr>
</tbody>
</table>

Year Ahead

In the Regions

Diabetes WA were contacted by Lions Outback Vision in March 2018 requesting support for their patients who attend appointments with the ophthalmologists on the Outback Vision Van and have a diagnosis of diabetes. Often these patients request diabetes information and advice and are particularly motivated as they recognise they are experiencing eye complications due to poor blood glucose management. The clinicians do not have the resource or time to support these patients. An opportunity was identified for the Diabetes WA Helpline service to be available for these patients via Video Call on a laptop computer on the Outback Vision Van. A consult room on the van is available to them to ensure privacy. Patients would be given information and advice and linked in with a local diabetes educator if available, or referred to Diabetes Telehealth for an appointment as appropriate. Diabetes WA recently visited the van in Port Hedland confirming that the service is possible and further consultation is underway.

With procedures more streamlined with the new endocrinology service, and staff now familiar with the requirements of the service, it has been agreed that there is capacity, and need, to move to two clinics a month. Initially the service was only able to offer new patient appointments but will now offer follow up appointments.

A new service model has been developed to offer a more complete service and will commence operation in September 2018.

Diabetes WA will continue to support those trained health professionals in the Pilbara to deliver the DESMOND program including centralised coordination of programs, marketing and engagement to promote programs.

We will work in collaboration with WAPHA, ICDC providers and local health services to shift both people with diabetes and the health professional community towards a person-centred approach and recognise structured, diabetes self-management education as an essential component of the multidisciplinary approach to diabetes care in the Pilbara.
“Evaluation provides the opportunity for reflection and continuous improvement to ensure our programs and services meet the needs of our consumers and assist them in their journey with diabetes.”

Natasha Watson,
Diabetes WA Research and Evaluation Manager
MEASURING OUR IMPACT

Diabetes WA has a commitment to evidence-based evaluation and is supported by a strong in-house research and evaluation team.

Ensuring our programs and services are as effective as possible, helping participants to make real improvements in their diabetes management, is important to us. Diabetes WA is proud to be home to the team that manages and coordinates the NDSS National Evaluation Framework, funded by the NDSS. Our evaluation team are contracted by Diabetes Australia to oversee the evaluation of NDSS programs and services as the National Evaluation Team.

Year in Review

This was the first year in which Diabetes WA's self-management programs, DESMOND and the Smarts series, were delivered nationally under the NDSS. Following rigorous evaluation of the programs, they were selected by the NDSS National Services Group and Diabetes Australia as the only programs in their category that met the NDSS standards for structured self-management education.

The National Evaluation Team monitored the national rollout of the programs to ensure the previously established high quality of program delivery and robust consumer outcomes, were maintained.

The national data set is very robust – amongst the biggest of its kind in the world, with over 2,000 people attending DESMOND and approximately 5,000 participating in one or more of the Smarts programs nationally.

The national evaluation results highlight that DESMOND and the Smarts series are successful in reducing diabetes-related distress and helping people feel more empowered to manage their diabetes. DESMOND received a Net Promoter Score (NPS) of 82 and the Smart series a NPS or 74.4 meaning participants are highly likely to recommend the program to others. To provide context the average NPS quoted in the NPS Benchmarks survey across the health industry was 62.
International Attention

Diabetes WA’s Research and Evaluation Manager, Natasha Watson, was invited by conference organisers to present a poster on the NDSS National Evaluation Framework at the International Diabetes Federation congress in Abu Dhabi. The conference attracted over 5,000 people from 152 countries, and a number of representatives from Denmark, the Netherlands, Korea and South Africa expressed a strong interest in learning from Australia’s achievements of the Framework.

Patient Activation Measure - Meet PAM

During 2017/18, the Diabetes WA evaluation team introduced the ‘Patient Activation Measure’ (PAM) into the evaluation of DESMOND programs run in rural areas, to determine whether the program can increase activation among those who attend. Patient activation is a behavioural concept that provides a better understanding of why some patients engage fully with their health and others do not.

PAM captures a person’s beliefs about their ability to self-manage and the likelihood that they will put these beliefs into action. Patients who are more highly activated have lower rates of hospitalisation, and are more likely to adhere to medications and to adopt healthy behaviours. They are therefore likely to have better clinical outcomes.

PAM data collection takes place at pre-session, post-session, and three-month follow-up evaluation, and comprises 10 questions. Responses are given a score (0-100) and a level (1-4) (see table below for a description of the different levels of activation). Activation levels are examined for all participants with a valid pre-session PAM level, to inform if the program is engaging people at all activation levels.
Results showed a significant increase in PAM scores after attending the regional DESMOND program. (n=233, p<0.001). Scores increased from 65.8 to 75.5 post-session, indicating an activation of 9.7 (p<0.001). International research estimates a 1.7% decrease in chronic disease-related hospitalisations for every 1-point increase in total PAM score. Therefore, an increase of 9.7 equates to a 16.5% potential decrease in hospitalisations.

**Diabetes WA Evaluation Consultancy**

2017/18 also saw the birth of Diabetes WA’s evaluation consultancy business, with the assignment of two new external evaluation contracts:

- Evaluation of the ‘Ear, Eye and Oral Health Initiative’ - a $6M investment from the WA State Government to increase access to ear, eye and oral health services in remote Aboriginal Communities.
- Evaluation of the National Gestational Diabetes Register, which aims to prevent progression to type 2 diabetes among women who have previously been diagnosed with gestational diabetes.

A comprehensive evaluation will take place of our *Let’s Prevent* prevention program that is being carried out in 2018/19 in the South West region (see page 15 for more information on the program). The primary aim will be to determine if the program is successful in reducing risk of developing chronic disease and increasing patient activation.

The PAM evaluation will be used across all DESMOND and Smart series programs, including metro areas, to determine the level to which Diabetes WA’s programs can impact a person’s readiness to become more involved in their own healthcare. This will enable a quantifiable assessment of predicted cost savings to the health system as a result of attending our structured self-management education programs.

A plan is also in place to grow the evaluation consultancy business by offering evaluation services and supporting other organisations in conducting rigorous, evidence-based evaluation planning and outcomes assessment.
“(My Child) came home from camp with a new attitude towards his diabetes. He made friends who ‘just get it’ and it was the only time he has agreed to be any further than across the road since diagnosis. I am so grateful to the camp.”

Michelle, Parent of a Kids Camp participant
We strive to improve knowledge and increase awareness of diabetes amongst the people of Western Australia. Whether we are working with a group of local health providers in a remote community in the Pilbara, or a family in the northern suburbs of metropolitan Perth, their needs shape our services and programs.

We continue to invest our time and resources to engage with these communities and to foster productive partnerships with them. We receive enormous support and encouragement from those we work with.

We are committed to our community. The WA community within which we operate is one of our most important stakeholders.
World Diabetes Day

World Diabetes Day (WDD) is the world’s largest diabetes awareness campaign. This year’s theme was *Women and Diabetes*, recognising and celebrating women living with diabetes or supporting someone with the condition. Across Australia, we channelled female empowerment with the “Super SHEro” campaign – acknowledging the women who never give up, using their super inner strength to ride the rollercoaster of living with diabetes.

Diabetes WA raised awareness of WDD by using radio, television, newspaper and social media to tell the story of the Cobby family – a mother and her two adult daughters all living with type 1 diabetes. “Despite my diabetes battles, I am not defined by the disease,” said Hollymaree Cobby. And we challenged people to tell us who their Diabetes Super SHEro was.

Generous fundraisers (see information on page 55) also helped us to raise money for the campaign.
Young People

Kids Camp

- **28 attendees**
  - Wild West Kids Camp

- **36 attendees**
  - Superheroes Kids Camp

- **27 attendees**
  - Telethon Type 1 Family Centre Teen Camp

Perth Children’s Hospital (PCH) and Diabetes WA run two annual camps for kids living with type 1 diabetes. A Wild West camp in September was held for 9 and 10 year olds and a Superheroes-themed camp in April hosted 11 and 12 year old kids. Diabetes WA, through the NDSS, this year also supported the Telethon Type 1 Family Centre Teen Camp for 13 -16 year olds at Kulin.

This year, 11-year-old Ryan from Kalgoorlie was able to join in on the fun thanks to a generous donation from a high tea hosted by Anita Gray and her sister Trudi Campaign (see page 56). The camp was Ryan’s first time away from home since being diagnosed.

“Ryan has been a different boy since he came home from camp. He has a much better attitude and seems to have realised how important it is to look after his health.”

Mother of Kids Camp participant, Ryan.

---

**Kids Camps Evaluation**

**Diabetes Strength and Resilience**

<table>
<thead>
<tr>
<th>Junior campers</th>
<th>Senior campers</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRE (n=48)</td>
<td>POST (n=48)</td>
</tr>
<tr>
<td>49.1 / 60</td>
<td>51.5 / 60</td>
</tr>
<tr>
<td>p&lt;0.001</td>
<td>★</td>
</tr>
</tbody>
</table>

**Diabetes Distress**

| PRE (n=25) | POST (n=25) |
| 7.4 / 28 | 5.1 / 28 |
| p<0.002 | ★ ★ |

**Benefits of Camp**

- J: 85.2% (n=23)
  - I got to practice skills at camp that will help me look after my diabetes.

- S: 88.9% (n=24)
  - I learned things about living with diabetes from other people at camp.

- J: 89.9% (n=24)
  - I met people I would like to keep in touch with after camp.

- S: 96.3% (n=26)
  - I got to practice skills at camp that will help me look after my diabetes.

**Net Promoter Score**

- J: 77.8% (n=21)
- S: 77.8% (n=21)

- Average Health Industry NPS Score = 62
Diabetes Awareness in Schools

Diabetes Awareness Training in Schools aims to increase staff understanding and knowledge of diabetes management within the school. The sessions can be delivered face-to-face or via video conference. Camp training is also available to assist education staff for the preparation of taking children with diabetes on an overnight school camp.

There was once again an increase on the number of teacher training sessions held this year, due to demand. Though there were fewer participants in total, more schools were reached, which was aided by the use of video conference for teachers in isolated areas.

<table>
<thead>
<tr>
<th>Sessions</th>
<th>Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary and Secondary Schools</td>
<td>58</td>
</tr>
<tr>
<td>Child Care Centres</td>
<td>7</td>
</tr>
<tr>
<td>Education Support Centres</td>
<td>4</td>
</tr>
<tr>
<td>School Camp Training</td>
<td>3</td>
</tr>
<tr>
<td>TOTAL</td>
<td>72</td>
</tr>
</tbody>
</table>

Leeuwin Adventure

Diabetes WA sponsored two young people, aged between 14 and 20 years, with type 1 diabetes to take part in the Leeuwin Ocean Adventure Youth Explorer Voyage. The voyage is designed to enable young people to surround themselves with active new friends, develop skills for the workplace and test their personal limits on the rewarding week-long adventure. This year 18-year-old Kaela Blackburn and 17-year-old Ryley Butson joined in on the adventure of a lifetime.

Jamie’s Ministry of Food

The Jamie’s Ministry of Food Program is a hands-on seven-week cooking course, using Jamie Oliver’s recipes and his philosophy on cooking, buying, storing and eating good, fresh, healthy food. The program has a purpose built, fully equipped mobile kitchen classroom, that can hold intimate cooking classes for young people.

The generous donation from the fundraising high tea event (see page 55), which also supported a young person to go on our Type 1 Kids Camp (see page 52), allowed six teens living with type 1 diabetes, and a parent, to attend the mobile cooking course. Though the classes do not specifically have a diabetes focus, we provided diabetes support from a diabetes educator.

“My new cooking skills will help me in everyday life. I am now cooking my Dad’s steak on the BBQ. I also learnt that you can cook a simple healthy meal quickly and it can be easier than going out for take-away.”

Thomas, aged 13, Jamie’s Ministry of Food participant
EXPOs & Forums
Diabetes WA attended the following expos and forums:

- Care & Ageing Expo
- Dowerin Field Day
- Aged Friendly Expo Armadale
- Seniors Have a Go Day
- Richmond Wellbeing mini health expo
- Everywoman Expo
- South West District Lions Club annual conference
- Lions Eye Institute World Diabetes Day seminar
- Men’s Shed health day seminar

Connect with Diabetes

Connect with Diabetes is a free 2.5 hour presentation for people with type 2 diabetes, carers, families and those at risk of diabetes.

Topics included:
- find out if you or your family are at risk
- better understand diabetes and the importance of self-management
- find out what you are entitled to receive under the NDSS
- find out what local health services are available in your area
- make small changes to live a healthier life with your loved ones

Each Connect with Diabetes is held in partnership with local government who assist with room bookings and help with promoting the event to their networks. Overall the sessions received an average Net Promoter Score of 60.8 meaning that participants would be likely to recommend the session to others.

<table>
<thead>
<tr>
<th>Connect Location</th>
<th>Local Government</th>
<th>Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melville</td>
<td>City of Melville</td>
<td>43</td>
</tr>
<tr>
<td>Bridgetown</td>
<td>Shire of Bridgetown-Greenbushes</td>
<td>57</td>
</tr>
<tr>
<td>Armadale</td>
<td>City of Armadale</td>
<td>54</td>
</tr>
<tr>
<td>Bunbury</td>
<td>City of Bunbury</td>
<td>38</td>
</tr>
<tr>
<td>Dianella</td>
<td>City of Stirling</td>
<td>27</td>
</tr>
<tr>
<td>Cockburn</td>
<td>City of Cockburn</td>
<td>26</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>245</td>
</tr>
</tbody>
</table>

Type 1 Tech Night

Our Type 1 Technology Night is a workshop for people living with type 1 diabetes. It focuses on how to get started with an insulin pump and other technologies that are available such as CGM and flash monitoring. Attendees can discuss options with a diabetes educator and meet with diabetes device company representatives.

3 sessions - Belmont, Tuart Hill and Melville – 73 Attendees

Workplace Hypoglycaemia Management Workshop

Similar to our Awareness in Schools training, we provide practical training for workplaces that want to know more about diabetes management.

- 15 attendees VisAbility
- 20 attendees The Salvation Army
- 25 attendees Community First International

EXPOs & Forums

Diabetes WA attended the following expos and forums:

- Care & Ageing Expo
- Dowerin Field Day
- Aged Friendly Expo Armadale
- Seniors Have a Go Day
- Richmond Wellbeing mini health expo
- Everywoman Expo
- South West District Lions Club annual conference
- Lions Eye Institute World Diabetes Day seminar
- Men’s Shed health day seminar
Fundraising

World Diabetes Day

World Diabetes Day (WDD) provided a great opportunity for many fundraisers to support the work undertaken by Diabetes WA. Some of our fantastic supporters who raised funds for WDD included:

- Mirvac, in conjunction with VAULT Fitness, hosted a spin bike challenge in the lobby of their Allendale Square building in Perth City. Staff and tenants created teams, clocking their kilometres on a spin bike. The owner of VAULT Fitness managed to cycle the entire day – 8 hours non-stop – even eating his lunch on his bike.
- Glengarry Primary School in Duncraig hosted a dress in blue day to raise money for Diabetes WA. They also helped students to better understand diabetes by teaching them about the condition and gave the kids tips on healthy food choices and physical activity.
- The Department of Social Services in Perth CBD held a morning tea for staff serving healthy fruit and vegetables to create awareness about the condition while raising funds for Diabetes WA.

Community Fundraisers

We would like to thank Anita Gray and her sister Trudi Campaign who hosted a high tea in October at Santa Maria College with all proceeds being donated to Diabetes WA. Funds raised from the high tea enabled some young people living with type 1 diabetes to participate in two activities that they may not otherwise have had the opportunity to do.

Travelling to Perth for our kids camps, held in conjunction with Perth Children’s Hospital, can be difficult both logistically and financially for some families, so Diabetes WA was thrilled to be able to use the funds raised from the high tea to support 11-year-old Ryan Oberlin-Brown from Kalgoorlie to attend our April camp.

Ryan had never met another person with type 1 diabetes and the camp was his first time away from home, but he breezed through the experience, enjoying the abseiling and the flying fox and making several friends that he plans to stay in touch with.

The fundraising money also gave six teenagers living with type 1 diabetes, and their parents/guardians, the opportunity to learn how to cook from scratch at a seven week Jamie’s Ministry of Food cooking course. With an emphasis on fresh produce and nutrition, the group received lots of Jamie Oliver’s hints, tips and shortcuts along with his incredible recipes.

- In lieu of gifts for her birthday this year, Amanda Lee (above) asked her guests to donate to Diabetes WA.
- Mount Lawley TAFE held a Sausage Sizzle during March.
- Scarlett James and friends from Floreat Park Primary School held a Bake and Art Sale in May at their local park. The girls raised money for Diabetes WA by selling biscuits, cakes and artwork made by the girls and their families.
- We are also grateful to have the generous support of businesses around WA who host collection tins and raffle books to raise funds for Diabetes WA.
Volunteers

Our volunteers generously gift us their time to provide support in our Subiaco and Belmont offices. We thank them for their commitment and kindness.

761.35 hours of Voluntary Office Support

Community Events

- The West Australian Marathon Club held the annual Regis Aged Care Fremantle Running Festival - a 5km, 10km and half marathon running event along the coast of Fremantle. Proceeds from the run were donated to Diabetes WA.
- Supporters of Diabetes WA raised funds as part of the annual Chevron City to Surf for Activ.
- The Lions District 201W1 held their annual Lions Children's Razzamatazz Festival - a live interactive theatre show with part of the funds raised being donated to Diabetes WA.
- Diabetes WA was once again a major charity partner in the annual HBF Run for a Reason with 40 amazing supporters raising funds as part of their run.
  - Our top 5 fundraisers included:
    » Carly Pink-O’Sullivan
    » Stefan Papalia
    » Jackson Plange-Korndorfer
    » Pete Ferguson
    » Kaarin Patterson
- We are also incredibly grateful for the support of our HBF Run Ambassadors - West Coast Fever’s Verity Charles and Perth Running Club’s Kaarin Patterson who helped us spread the word.

Total Fundraising Income: $547,777

Diabetes WA Fundraising Activities

Along with the support from community fundraisers and events, we also undertook our own activities, administering three raffles, selling Entertainment Books and running Christmas and tax time appeals.

We are also grateful to our members who donate throughout the year as part of their membership renewals.

We sadly lost Quizmaster Ian Anderson to illness this year. Perth police officer, Ian’s annual quiz night was legendary and raised a huge $39,000 since its inaugural event in 2005.
Thank you to the people who have contributed to helping the people of WA living with, and affected, by diabetes.

Monetary and In-kind Support

Amanda Lee
Anita Gray
Benjamin Nicholls
Beryl Meldrum
Carly Pink O’Sullivan
Chelsea-Lee Cobby
Colin Savory
George Botica
Holly-Maree Cobby
Jackson Plange-Korndorfer
Jamie Cripps
Jane Davies
Jeffrey Ash
John McKenney
Kaarin Patterson
Karen Cobby
Mavis Domingo
Neville Smith
Pete Ferguson
Sohir Azim
Stefan Papalia
Trudy Campaign
Verity Charles
Walter Johnson

BDO Audit (WA)
Beef By The Reef
Brookfield Australia Investments Limited
Bunbury Cathedral Grammar School
Church of Christ Dorcas Clothing
Commonwealth Bank
Curves WA
Donna Barlow Travel
Entertainment Publications of Australia
Glengarry Primary School
Grill’d Brookfield Place
HBF
K&L Gates
Lions Club of Fremantle Inc
Lions District 201 W1
LSA
Podiatrist Perth
Programmed
Quality Press
Royal Life Saving Society WA
Tanita Australia
Walton’s Consulting
West Australian Marathon Club
Willcraft Estate Planning

The Walker Society

Ken Walker and his wife were instrumental in establishing what is now known as Diabetes WA.

Named in honour of Ken Walker, the Walker Society was established in 2007 to acknowledge the generosity of people who have made a bequest to Diabetes WA.

When people make a bequest to Diabetes WA they are invited to become a member of the Walker Society. This is an honorary membership that acknowledges the forethought, kindness and commitment of a very special group of people.

We would like to acknowledge the generous legacies left to Diabetes WA from Benjamin Nicholls, Mavis Domingo and Walter Johnson.

The Walker Family

If you would like to know more about donating, fundraising or leaving a bequest to Diabetes WA, please visit our website or get in touch with us at fundraising@diabeteswa.com.au or call us on 1300 001 880.
We developed a 30 second television commercial that had a regional campaign on GWN.

Our Members’ magazine

Targeted e-communications

Social Media Platforms: Our Twitter, Facebook, LinkedIn and Instagram pages have a strong following

Our website (diabeteswa.com.au) is one of our main channels of communication

SPREADING THE WORD

This year, we trialled Facebook advertising campaigns reaching 19,055 people, resulting in increased DESMOND workshop bookings and engagement with our followers. One particular campaign received a great response in likes, comments and shares, contributing to our brand awareness.

In the news

We developed a 30 second television commercial that had a regional campaign on GWN.

As part of our advertising campaign with Red FM in the Pilbara, Diabetes WA’s Jennifer Sweeting was interviewed on the radio station eight times to discuss diabetes awareness and issues.

Our story about Ryan Shand beating diabetes featured in the Weekend West.
MEMBERSHIP

Our members are the cornerstone of our organisation.

We support our members on their diabetes health journey by providing knowledge and up-to-date information on diabetes-related issues, and give them a powerful voice where they may not have one.

Our members have access to the following benefits:

- quarterly editions of Diabetes Matters magazine
- monthly e-newsletters
- information resources including fact sheets, wallet guides and booklets
- access to free advice from our Diabetes Educators
- discounted or free attendance at educational workshops
- discounts and promotions with our member benefit partners
- access to our discount buying service

Our Members

Annual membership fee:
$50 (full)
$26 (concession)

Our Member Benefit Partners in 2017/18

Our Member Benefit Partners provide exclusive offers to members of Diabetes WA. We thank them for their support of our members and our organisation.

- Donna Barlow Travel
- Royal Life Saving Society WA
- Tanita Australia
- Curves WA
- Willcraft Estate Planning
- Podiatrist Perth

8,336 Members
294 New Members

$250,552 Membership fees generated
$25,578 Donations from members
OUR GOVERNANCE

Diabetes WA Ltd is an Australian Public Company, limited by guarantee, effective as of June 2017. We are driven by our dedicated staff, the guidance of our volunteer board and a strict adherence to sound governance standards.

The principles of responsible corporate citizenship are fundamental to our Mission and are inherent in all aspects of our operations.

Our Constitution
The Board’s responsibilities and processes are set out in our constitution, ‘Constitution of Diabetes WA Ltd trading as Diabetes WA’. Included in our constitution is information on the goals of our organisation and the role, powers and election of the Board and its members.

Commitment to Best Practice
Diabetes WA is committed to delivering quality programs and services and continuous improvement. We have been independently assessed by BSI against internationally recognised standards and ensure quality is delivered by adopting a Quality Management System that complies with ISO 9001-2015, Quality Management Systems.

Specifically, we will:
- Ensure all programs and services offered have an evaluation plan, including clear and measurable objectives;
- Comply with all relevant legislation and all other applicable requirements;
- Use consumer feedback and evaluation outcomes in a continuous quality improvement cycle;
- Ensure all employees throughout the organisation are aware and understand how they contribute to the Quality Management System;
- Promote the value of monitoring, audit and review throughout the organisation using a circular Plan Do Check Act approach; and
- Celebrate the quality improvements we make.

Our Board
The Board of Diabetes WA continue to be very active working with the management team to ensure our organisation is well placed to address the many challenges our Mission presents. This financial year, the Board has initiated several important projects that aim to examine future opportunities for our organisation to achieve the continued financial growth required to meet these challenges. You can read about these initiatives on the proceeding pages.

Our Board consists of eight dedicated voluntary directors who are legally responsible and accountable for the organisation’s ongoing stewardship and strategic development. Members are selected for their complementary skills and are drawn from a wide range of backgrounds.

The Board meets every two months and provides direction and guidance to the Chief Executive Officer and through him to the Management Team.

The Board met eight times in this financial year – seven standard board meetings and one strategic development meeting with the management team.

Our Committees
The Board forms two specialist committees based on experience and qualifications for further independent scrutiny of management and policy.

- Governance Committee
  4 members – met 6 times.
- Finance, Audit and Risk Management Committee
  4 members – met 5 times.
**Dr Moira Watson**  
Chair. Member since 2006  
Holding the position of Chair since 2009 Moira also sits on the Board of Diabetes Australia Australia Limited and the Board of Diabetes Australia Research Limited plus a range of Diabetes Australia and Diabetes WA committees. She is a delegate to the International Diabetes Federation (Western Pacific Region) with qualifications in management and education.

**Andrew Burnett,**  
Chair of Governance Committee. Member since 2009  
Andrew is Counsel at Squire Patton Boggs. With some 30 years of experience in workplace law, Andrew has assisted government and private employers on managing legal, commercial and reputational risks associated with employment, occupational health and safety and industrial relations issues.

**Gary Walton**  
Chair of Finance, Audit and Risk Management Committee. Member since 2010  
Gary is a chartered accountant and consultant and was previously the Chief Executive Officer of the WA Football Commission and the Chief Operating Officer of the Fremantle Football Club. Professionally, Gary has championed the need to build strong commercial management principles and procedures within the not for profit environment. He has had type 1 diabetes since he was 12 years old.

**Paul Vivian**  
Director. Member since 2010  
Paul is currently General Manager (Products and Pricing) for Bankwest. He has more than 28 years’ experience in financial services management roles both in Australia and internationally.

**Jim Dodds**  
Director. Member since 2011  
Jim is Director of Environmental Health of the Public Health Division within the Department of Health Western Australia. He has been active in the field of environment and health for over 30 years, having worked in various Australian state and federal governments, as well as holding international roles with development and aid organisations.

**Tony Lester**  
Director. Member since 2011  
Tony is founding Partner of Lester Blades, a Western Australian executive search and recruitment firm. He has over 30 years’ experience in executive level recruitment and has been exposed to the operations and activities of companies in the private, public and not for profit sectors. Tony has type 1 diabetes as does one of his children.

**Dr Alan Wright**  
Director. Member since 2012  
Alan is a general practitioner and brings to Diabetes WA a sound knowledge of the biopsychosocial impact of diabetes on individuals and the community. He previously held the Chair of Communication and Clinical Practice at the School of Medicine at the University of Notre Dame Australia. In addition he is involved in GP education, particularly in the areas of diabetes, men’s health and obstructive respiratory disease.

**Mary Anne Stephens**  
Director. Member since 2015  
Mary Anne is a senior executive and non-executive director with more than 25 years’ experience leading teams within the financial services, IT and not-for-profit sectors in Australia and the United States. She is currently the Chief Financial Officer for Amana Living Inc and is also on the board of the WA Country Health Service.
Responsible management of our resources will help us to achieve our Mission. Below we detail revenue, spending, assets and liabilities for the financial year 2017/18.

Sources of Revenue

2017/18: $7,789,699

Efficient Operations

Direct costs are spent in delivering our services. Indirect costs are overheads such as power, rates, and rent.
Expenses by Function

2017/18: $5,760,846

- Health Service Programs 50.9%
- Administration 23.4%
- Product Subsidy Program 13.4%
- Communications & Marketing 7.5%
- Surplus 4.8%

Strong Balance Sheet

A copy of the audited financial statements can be found on our website.

Visit diabeteswa.com.au/annual-review
PUTTING IT INTO PERSPECTIVE

108,067
Australians newly diagnosed with diabetes in the last 12 months

296
new diagnoses every day

1,276,939
people living with diabetes in Australia

126,222
of these people live in WA

For every person diagnosed, it is estimated that there is at least one other person living with pre-diabetes or undiagnosed type 2 diabetes

1 for 1

1 every 5
1 person every 5 minutes newly diagnosed with diabetes in Australia

5.1% ............ of the Australian population are living with diabetes

4.3% ............ Encouragingly, WA has the lowest percentage of people living with diabetes compared to the other Australian states

87% of those diagnosed are living with type 2 diabetes, a largely preventable chronic condition.

68% of people living with diabetes have also been diagnosed with another chronic condition (2011-12 statistics).

These statistics are provided by the National Diabetes Services Scheme dependent on registrants with the NDSS as at 30 June 2018.