Patient Flow: RWF Diabetes Self Management Project

Patient keeps appt. with CDE and is enrolled in one-on-one sessions (5-6). Patient sets up self management goals. → one-on-one only

CDE provides follow-up phone calls to controlled diabetics and collaborates on uncontrolled diabetics with nurse manager

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RWJ Project Potential Enrollee: 4 Ways to Recruit

1) Patient self refers → Self referrals ask for appt. at desk.

2) CDE calls from list → A CDE gives name of a “hit” to appt. clerk to enter into CDE’s template.

3) MA refers → Patient referred by MA or PCP takes referral to appt. clerk.

4) PCP refers → PCP can refer to CDE only or also to mental, behavioral and other health services. It is hoped that eventually the patient can be persuaded to see a CDE

CDE refers or ensures referrals to:

→ mental health
→ behavioral health
→ RN Case manager for uncontrolled diabetes or other issues.

Case manager refers to VNA, home health aides and, with CDE, makes frequent phone calls to patients

→ podiatry
→ ophthalmology
→ dental