

2 July 2023

Mr David Laffan
Assistant Secretary
Pharmacy Branch
GPO Box 9848,
Canberra ACT 2601

Via email: NDSSTender@health.gov.au

Dear Mr Laffan,

RE: Public consultation on National Diabetes Service Scheme products

The Royal Australian College of General Practitioners (RACGP) thanks the National Diabetes Service Scheme for the opportunity to provide feedback on the [National Diabetes Service Scheme products](#).

Diabetes is the fastest growing chronic disease in Australia and affects approximately 5% of the population,¹ with Aboriginal and Torres Strait Islander Australians almost four times more likely than non-Indigenous Australians to have type 2 diabetes.² It is believed that around 30% of Australians with diabetes are undiagnosed.³ Metabolic syndrome is a significant problem, affecting 20–30% of Australian adults.⁴ Sixty-seven per cent of Australians are overweight and obese.⁵

According to the 2019–20 MedicinesInsight General Practice Insights report, patients recorded with type 2 diabetes accounted for 11.8% of encounters of the 13.3 million clinical encounters with general practitioners (GPs). Patients with type 1 diabetes ever recorded represented 0.9% of clinical encounters, and patients with gestational diabetes ever recorded represented 0.8% of encounters.⁶

GPs play a fundamental role in the prevention, diagnosis, and management of diabetes. As a national peak body representing over 46,000 members working in or towards a career in general practice, our core commitment is to support GPs from across the entirety of general practice address the primary healthcare needs of the Australian population.

The RACGP provides the following feedback to the NDSS.

Equity and access to new CGM technology

Technological innovations for monitoring of glycaemia – such as continuous glucose monitoring (CGM) and flash glucose monitoring, provide greater insights into glycaemic patterns for patients. Implementation and ongoing use of this complex technology, therefore, requires professional support to instruct users about the appropriate use and interpretation of outcomes.⁷⁻⁸ Presently, these services are restricted to specialised diabetes services that not all patients can access.

Specialisation of health services limits the support pathways that patients can access to support their clinical care. Such services are often lacking in regional/rural and remote communities and people from low socioeconomic status will encounter cost barriers in accessing these type of services.

GPs are usually the most accessible health service, but barriers have been unnecessarily created to inhibit GPs from supporting their patients access and use CGM systems.

As the RACGP has recently highlighted in a letter to the [Department of Health and Aged Care](#), GPs are excluded from the authorised certifier group to certify patient access to subsidised continuous glucose monitoring (CGM) and flash glucose monitoring products for patients with Type 1 Diabetes Mellitus (T1DM).

As expert generalists, GPs are professionals who work within their scope of practice and seek relevant education to gain the knowledge and skills they need to serve the needs of their patient populations.

Managing patients with T1DM within a specialist team is within the scope of specialist GPs. People with T1DM are managed by a healthcare team in which GPs are central.

It is unclear why other members of this healthcare team and not GPs are able to sign this form. This decision creates unnecessary barriers to patient access to appropriate and timely care, particularly for rural and regional patients who may rely completely on their GP for care. In circumstances when managing patients with T1DM is not part of an individual GP's usual practice or they don't feel they have the necessary skills to certify access, they would seek advice for certification from another member of the healthcare team.

It is important that GP education and resources are available to enable more GPs to support their patients in this area. However, the RACGP does not support any mandate for GPs to complete additional educational requirements as this will only increase barriers to patients accessing appropriate diabetes services.

Recommendations:

- The NDSS work to ensure all patients have appropriate health professional support for the management of their devices
- The Australian government reconsider and recognise that managing patients with T1DM within a specialist team is within the scope of specialist GPs who should be included in the authorised group for certifying continuous and flash glucose monitoring access forms.
- No additional requirements be imposed on GPs to provide access to these additional services and funding be allocated to improving GP access to manage CGM/Flash technology requirements.

Self-monitoring blood glucose products

It is important to have blood glucose test strips available for people who require them for self-monitoring blood glucose (SMBG). Self-monitoring of blood glucose (SMBG) is recommended for patients who are using insulin and have been educated in appropriate alterations in insulin dose. SMBG is most effective where the person with diabetes and their healthcare providers have the knowledge, skills and willingness to incorporate SMBG and therapy adjustments into diabetes care plans. Routine SMBG for people who are considered low risk and who are using oral glucose-lowering drugs (with the exception of sulfonylureas) is not recommended.

Recommendation: Better target SMBG to those who would benefit.



Thank you again for the opportunity to provide feedback to the public consultation on NDSS products. For any enquiries regarding this letter, please contact Stephan Groombridge, National Manager, Practice Management, Standards and Quality Care at 03 8699 0544 or stephan.groombridge@racgp.org.au.

Yours sincerely

Dr Nicole Higgins
President

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