

Chronic Disease Community Program

The Chronic Disease Community Program (CDCP) targets people with the following conditions:

- Cardiovascular diseases, in particular heart failure and unstable angina
- Diabetes
- Chronic obstructive pulmonary disease (COPD)

What does the program offer?

Enrolment in the Chronic Disease Community Program allows improved access to a range of services including:

- Telephone coaching
- Chronic Condition Self-management Support programs
- Easy Breathers Program
- Allied Health Service: including Diabetes Nurse Educator
- Diabetes Regional Education Group
- Oral health interventions
- Home Medicines Review

Who is the program for?

- People with heart failure, unstable angina, COPD and diabetes who are resident in the community
- People who may benefit from a range of self management options including education, skill development and support and monitoring to assist in managing their chronic disease and are motivated to participate
- People who are not in the stage of their chronic disease where palliative care is their primary focus

Who can refer?

- General practices in the Southern metropolitan region
- Hospital inpatient staff at Flinders MC, Repatriation General Hospital and Noarlunga Hospital
- Selected specialist outpatient clinics
- Selected community agencies

What are the benefits?

- Faster access to appropriate health care services closer to or in the home
- Easy systems of referral including common entry points and accredited providers
- Access to a CDCP Liaison Officer who will support and coordinate services for your chronic disease management.
- Guaranteed feedback from service providers in the community
- Ongoing multidisciplinary training for providers and referrers
- Consistent and accurate information available to consumers

Questions?

For further information about the CDCP please contact the CDCP liaison team, ph: 0434 079 205 or 8201 7814