



AREA	INFORMATION (Dot-points, general detail only)
Gender	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
First name	Theresa
Age (years)	29
Living arrangements	<input type="checkbox"/> Alone <input checked="" type="checkbox"/> With partner/family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input type="checkbox"/> Public <input checked="" type="checkbox"/> Own <input type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input checked="" type="checkbox"/> No assistance needed <input type="checkbox"/> Needs assistance: Please outline:.....
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	weight issues, borderline diabetes
SOCIAL – EMOTIONAL	Carer stress, depression
MENTAL	Stressed caring for 2 Autistic children
FINANCIAL (If relevant)	Impacted from health conditions of children -
MEDICATION/S	
SUMMARY KEY ISSUES FOR THIS CASE:	
	Consumer cares for two of her children both of them are Autistic. Consumer is hoping for short term respite and information about workshops/support and funding. Consumer stated they are trying to get funding for an iPad for child. Consumer stated she also has depression and since they found out child has also got autism she has gained 10 kilo's Consumer stated her weight is currently 110 kilos and last year in January she was 90 kilo's. Consumer stated she gets tired and does not want to cook and buys take away and this impacts further on financial issues and health issues
HEALTH PROFESSIONALS INVOLVED (Referrals):	
	Noah's Arc
	Counselling (LCHS)
	Commonwealth Carer Respite Centre (LCHS)
	Dietetics (LCHS)
OTHER RELEVANT INFORMATION:	

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AREA	INFORMATION (Dot-points, general detail only)
Gender	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
First name	Emma (2)
Age (years)	57
Living arrangements	<input type="checkbox"/> Alone <input checked="" type="checkbox"/> With partner/family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input checked="" type="checkbox"/> Public <input type="checkbox"/> Own <input type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input checked="" type="checkbox"/> No assistance needed <input type="checkbox"/> Needs assistance: Please outline:.....
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	Type 2 diabetes
SOCIAL – EMOTIONAL	Depressed – grieving for loss of Grandchild
MENTAL	
FINANCIAL (If relevant)	Low income - HCC
MEDICATION/S	
SUMMARY KEY ISSUES FOR THIS CASE:	
	Consumer presented at on site with her husband and 20 year old daughter who is a single mother and Grandparents have been living with the family and sharing the care of the children. The family have re-located from Queensland after the floods they were living in Ipswich and lost most of their possessions. They have received the flood relief grant. They have four grandchildren three of them with learning disabilities. The family are currently homeless but have been staying with a friend but this is not sustainable as they have not been getting along with her. Worker from VACCA Morwell is providing the family with a motel to stay in and a house is available for them soon. They have not got any money for food and need assistance with vouchers to feed the family. Consumer has diabetes type 11 and stated her readings are currently at 9-13 and has requested a referral to see the diabetes ed. Consumer stated she has her diabetes under control and is currently looking for a GP in the area. Consumer has also requested to attend grief counselling as her granddaughter passed away 4 years ago and she would like to attend counselling with her husband as the family are suffering from this a referral for grief counselling for all of the family will be sent as consumer stated it has affected them all in different ways
HEALTH PROFESSIONALS INVOLVED (Referrals):	
	Counselling (LCHS)
	Emergency Relief (LCHS)
	Diabetes Education (LCHS)
OTHER RELEVANT INFORMATION:	
	St Vincent's
	VACCA
	Quantum

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AREA	INFORMATION (Dot-points, general detail only)
Gender	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
First name	Sharon Norwood (3)
Age (years)	51
Living arrangements	<input type="checkbox"/> Alone <input type="checkbox"/> With partner/family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input checked="" type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input type="checkbox"/> Public <input type="checkbox"/> Own <input checked="" type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input checked="" type="checkbox"/> No assistance needed <input type="checkbox"/> Needs assistance: Please outline:.....
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	Type 2 diabetes, Crohns, ABI, MS, vision impairment, hearing impairment, had a stroke, rheumatoid arthritis, heel spurs, poor circulation in toes, incontinence, learning disability, impaired kidney, UTI & kidney infections, epilepsy grand mal, restless leg syndrome, asthma
SOCIAL - EMOTIONAL MENTAL	anxiety & depression, agoraphobia,
FINANCIAL (If relevant)	Low income - HCC
MEDICATION/S	Panadeine forte, Pethidine - fortnightly, Valium, Lexapro, sexatide, puffer and pump
SUMMARY KEY ISSUES FOR THIS CASE:	
	Consumer phoned today wanting to access Podiatry: Consumer stated she has heel spurs, her toes are deforming and she feels circulation to her toes is getting worse daily, she also has fallen arches and functional incapacity. She usually uses a roll aid for walking but this has broken and at times she has to crawl; Continence nurse: Consumer stated she has constant urine leaks and is becoming concerned with her bowel; Physiotherapist - Consumer stated she has aches and pains from head to toe and has rheumatoid arthritis with the pain worsening over the past few months, her knees lock and bruise she also has twitches in limbs. There are only a few medications she can take due to allergies; Counselling - Consumer stated she is agoraphobic possibly due to incontinence, also suffers anxiety and depression, has no one but her sister and brother to talk to and has been feeling hopeless at the moment; Dietician - to assist with Crohn's disease and T2 Diabetes - SAO mentioned nutrition basics group, Consumer stated she loves groups but talks all the time and due to incontinence has an unpleasant odour and she's not sure if others will be able to cope with it.; Diabetes Educator - T2 Diabetic needing education, Consumer stated she is not doing anything about being diabetic; CDM CC for care coordination
HEALTH PROFESSIONALS INVOLVED (Referrals):	
	Podiatry, Continence Nurse, CDM CC, Counselling, Physio, Dietetics, Diabetes Ed, (LCHS)
OTHER RELEVANT INFORMATION:	
	HACC was involved

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AREA	INFORMATION (Dot-points, general detail only)
Gender	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
First name	Florence (4)
Age (years)	73
Living arrangements	<input type="checkbox"/> Alone <input checked="" type="checkbox"/> With partner/family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input type="checkbox"/> Public <input type="checkbox"/> Own <input checked="" type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input type="checkbox"/> No assistance needed <input checked="" type="checkbox"/> Needs assistance: Please outline: Attended with Transport from family friend.
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	breast cancer with bone and liver mets
SOCIAL – EMOTIONAL	Until last few months had been independent and active including caring for horses and volunteering
MENTAL	
FINANCIAL (If relevant)	
MEDICATION/S	Insulin, antiemetic's
SUMMARY KEY ISSUES FOR THIS CASE:	
	Palliative client recently discharged home from hospital. Palliative care client- Requires review by dietician- having chemotherapy, has mouth ulcers. Poor oral intake. And Podiatry- unable to cut own nails now. Also some nails beginning to become loose due to chemotherapy..
HEALTH PROFESSIONALS INVOLVED (Referrals):	
	Dietetics
	Podiatry
	Palliative Care
	Continence
OTHER RELEVANT INFORMATION:	
	PAC
	HACC
	HITH

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AREA	INFORMATION (Dot-points, general detail only)
Gender	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
First name	John (5)
Age (years)	33
Living arrangements	<input checked="" type="checkbox"/> Alone <input type="checkbox"/> With partner/family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input checked="" type="checkbox"/> Public <input type="checkbox"/> Own <input type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input type="checkbox"/> No assistance needed <input checked="" type="checkbox"/> Needs assistance: Please outline: Physiotherapy input for transfers and mobility, which you are looking into and will refer as per previous conversations OT working on the funding application for chair to increase its stability
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	DVT, PE, ABI (Post assault 2005), Epilepsy, L) BKA 25/6/10 for chronic L)leg ulcer. Bone scan May 2010- osteomyelitis L)Tibia. Prosthetics notified of pts admission
SOCIAL – EMOTIONAL	
MENTAL	ABI (post assault)
FINANCIAL (If relevant)	Low income - DSP
MEDICATION/S	Epilem, clexane, Kapanol (Now ceased and commenced oxycontin this admission)
SUMMARY KEY ISSUES FOR THIS CASE:	
	Client presented to site for food assistance. Client stated that he had tried to call his case manager but was unable to reach her so came into LCHS to see if someone could help him. Client presented quite out of breath and stated he was feeling unwell. Writer asked client how he got to site and client stated that he wheeled himself down on his wheel chair as he had lost his taxi card so could not catch a taxi. Client stated that he had been feeling unwell for a few days and had been having epileptic fits on and off for a few days. Writer asked client if he was ok and offered to call for medical assistance. Client stated that he was fine but that he had run out of money for food. Client stated that he had been paid his DSP this week but had run out of money as he had an unexpected water bill come in for \$173. Client stated that he paid the water bill but that it had left him short and after he centre pays his rent, gas, elec and pays for his medications he has little extra remaining and the water bill meant that he had no money left over for his food. Client stated that he was having some of his medications funded by a PBS but that it ran out in December and he wished to speak to his Case manager about getting it re-instated as he could not afford to fund his own medication ongoing. Writer asked if client had scripts with him as CSO ER can cover scripts at Funded pharmacy but client stated that his scripts were held at the Priceline pharmacy. Writer informed client that CSO ER did

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	<p>not have funding to pay for scripts at this pharmacy and client stated that he would be ok without the scripts until he could speak with his Case Manager about other options. Writer told client that we could give his some food vouchers to use at Coles or a food parcel if he preferred not go to the shops as he was feeling unwell. Client stated that he would prefer vouchers. Writer informed client that she would provide him with \$40 Coles vouchers and would go and get the vouchers and try to contact his Case Manager for him and ask the Case Manager to contact Consumer so Consumer could speak with her about his prescriptions and Taxi card as Consumer was distressed that without his taxi card he could not get places he needed to go. As writer was preparing vouchers and leaving a voice message for the Case Manager, Consumer used the disabled toilet and had a fall - Consumer was seen on site by Ambulance Officers and was deemed well enough to return home - Riskman / VIHMS was completed by writer.</p>
HEALTH PROFESSIONALS INVOLVED (Referrals):	
	DNS
	Case Management
	OT
	Physio
	Financial counselling
OTHER RELEVANT INFORMATION:	
	HITH
	PAC
	GP
	HACC

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AREA	INFORMATION (Dot-points, general detail only)
Gender	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
First name	Jason (6)
Age (years)	45
Living arrangements	<input type="checkbox"/> Alone <input type="checkbox"/> With partner/family <input checked="" type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input checked="" type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input checked="" type="checkbox"/> Public <input type="checkbox"/> Own <input type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input checked="" type="checkbox"/> No assistance needed <input type="checkbox"/> Needs assistance: Please outline:.....
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	Client stated that he is also having a lot of tooth pain and saw our dentist yesterday and is booked to come to the dentist for more treatment. Client stated that he needs to have all of his teeth extracted and is on a 7 month waitlist to go to Melbourne to be anesthetised and then have his teeth removed. Client stated that in the meantime he is coping with the pain by smoking marijuana and that his other drug use has decreased since leaving Melbourne. writer spoke with client about A&D counselling to help him refrain from using the other drugs and client stated that he was pretty good at giving up bad habits and that he thought he would be fine on his own, was provided with drop in clinic times & days
SOCIAL – EMOTIONAL	Client stated that he had recently moved to Moe after living in Melbourne. Client stated that he had to get out of the place he was staying at in Melbourne because there were lots of drug dealers and users there and he was using drugs too much and started injecting drugs. Client showed writer his track marks and stated that after three weeks of injecting that he no longer wanted to live there as he did not want to live that sort of lifestyle. Client stated that he had been trying to get a house for a few years now but that he had trouble getting approved for rentals as he was young and people worried that he would pay his rent. Client stated that he would always pay his rent and found it really hard trying to plead his case to community housing all the time. Client stated that he has been filling out forms for housing rentals for the past week with no response
MENTAL	Client also stated that he has an 11 month old who is in DHS custody in Sale who he wants to get contact to but needs to improve his lifestyle before DHS will let him be part of her life.
FINANCIAL (If relevant)	Client stated his financial situation was as follows: Paid on Tuesdays. Last paid 9 days ago. Paid DSP \$815 but had to centre pay his c/link loan, payment plan for outstanding fines, plus paid back a C/Link loan he accessed for \$40. After these Centre pays client had \$750 which he stated was spent \$400 rent in Melbourne \$80 for loan from friends \$40 phone credit

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	<p>\$100 food - all eaten or left in Melbourne \$40 - drugs in Melbourne \$50 cigarettes - enough to last him the fortnight Anglicare financial counselling referral discussed for budgeting, client declined at this stage</p>
MEDICATION/S	ADHD and depression medications.
SUMMARY KEY ISSUES FOR THIS CASE:	
	<p>Client stated that he paid off his owing rent and any owing debts and bought a train ticket and came to Moe to stay with a friend until he can get his own place. Writer spoke with client about IHSY and client stated that Neil is just what he needs as he is having trouble advocating for himself and linking himself in with the services he needs. Client was given IHSY workers mobile number and also consented to a referral being made to IHSY program.</p>
HEALTH PROFESSIONALS INVOLVED (Referrals):	
	DHS, IHSY, Community Housing, Quantum,
OTHER RELEVANT INFORMATION:	
	Client presented to LCHS Moe requesting food assistance.

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AREA	INFORMATION (Dot-points, general detail only)
Gender	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
First name	Cherry (7)
Age (years)	22
Living arrangements	<input type="checkbox"/> Alone <input checked="" type="checkbox"/> With partner/family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input type="checkbox"/> Public <input type="checkbox"/> Own <input checked="" type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input checked="" type="checkbox"/> No assistance needed <input type="checkbox"/> Needs assistance: Please outline:.....
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	Consumer presented for food assistance.
SOCIAL – EMOTIONAL	Consumer states that she has been evicted from her house and has to leave on Friday. Consumer lives with her partner and their daughter 2 yrs old. Consumer states that she has been to Quantum and they have advised her that the landlord can't evict her if he hasn't given her enough notice or acquired the appropriate paper work. Consumer states that the house is unliveable and is supposed to be torn down. Consumer states that she has had nothing but trouble anyway at this property as she has had no hot water and the land lord won't fix the problem
MENTAL	
FINANCIAL (If relevant)	2 adults 1 child. Request for ER Moe Had to attend funeral at Yarram last week of Partners Uncle and had to contribute funds towards expenses as well as travel etc. Purchased food but did not buy enough to last for the fortnight. Accounts are not current rent is fine but utilities are not. Is next paid Friday 2.4.10, Partner is on Carers Pension and is paid the same day as Consumer. They have 22 month old Daughter
MEDICATION/S	Nil known
SUMMARY KEY ISSUES FOR THIS CASE:	
	Consumer's mother came in with her and states that if Consumer has nowhere to go they can stay with her until she finds other accommodation but her mother lives in a 2 bedroom unit and the other room is occupied by her other daughter and grandchild so there isn't enough room. Consumer is at risk of homelessness as of Friday. IHSY referral discussed & consented to referral being sent. Financial counselling for budgeting discussed & information brochures provided.
HEALTH PROFESSIONALS INVOLVED (Referrals):	
	IHSY, Quantum, Community Housing
OTHER RELEVANT INFORMATION:	

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AREA	INFORMATION (Dot-points, general detail only)
Gender <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	
First name	Grace
Age (years)	67
Living arrangements <input type="checkbox"/> Alone <input checked="" type="checkbox"/> /family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:	
Transport <input type="checkbox"/> Public <input type="checkbox"/> Own <input type="checkbox"/> Family/friend <input type="checkbox"/> Other:	
MOBILITY <input checked="" type="checkbox"/> No assistance needed - Described as a bit unsteady on feet. <input type="checkbox"/> Needs assistance: Please outline:	
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH Asthma, 1997 Diabetes Mellitus - Type II, 08/04/1999 Angiogram - Coronary, 2002 Depression, 13/08/2003 Hypertension, 13/08/2003 Hyperthyroidism, 21/11/2003 Post Traumatic Stress Disorder, 25/02/2004 GORD, 25/02/2004 Hypercholesterolemia, 2005 Vaginal repair - Anterior & Posterior, 13/02/2005 IHD, 03/08/2005 IBS, 22/08/2005 Angina, 10/2005 Echocardiography, 10/2006 CT Colonography - Polyps in sigmoid	
SOCIAL – EMOTIONAL Lives with daughter who is carer	
MENTAL Requires some assistance with medication; shopping;	

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AREA	INFORMATION (Dot-points, general detail only)
Gender	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
First name	Lilly (8)
Age (years)	67
Living arrangements	<input type="checkbox"/> Alone <input checked="" type="checkbox"/> /family <input type="checkbox"/> With Friends <input type="checkbox"/> Hostel <input type="checkbox"/> Group house/supported accommodation <input type="checkbox"/> Carer assistance <input type="checkbox"/> Other:
Transport	<input type="checkbox"/> Public <input type="checkbox"/> Own <input type="checkbox"/> Family/friend <input type="checkbox"/> Other:
MOBILITY	<input checked="" type="checkbox"/> No assistance needed - Described as a bit unsteady on feet. <input type="checkbox"/> Needs assistance: Please outline:
RELEVANT PERSONAL HISTORY:	
PHYSICAL HEALTH	Asthma, 1997 Diabetes Mellitus - Type II, 08/04/1999 Angiogram - Coronary, 2002 Depression, 13/08/2003 Hypertension, 13/08/2003 Hyperthyroidism, 21/11/2003 Post Traumatic Stress Disorder, 25/02/2004 GORD, 25/02/2004 Hypercholesterolemia, 2005 Vaginal repair - Anterior & Posterior, 13/02/2005 IHD, 03/08/2005 IBS, 22/08/2005 Angina, 10/2005 Echocardiography, 10/2006 CT Colonography - Polyps in sigmoid
SOCIAL - EMOTIONAL	Lives with daughter who is carer
MENTAL	Requires some assistance with medication; shopping;
FINANCIAL (If relevant)	Aged pension
	<p>Consumer struggles with paying bills: Consumer stated she has a lot of bills to pay and brought them all to show the writer.</p> <p>Consumer stated that her daughter has always been/is currently her carer but she went away for a while this year so Consumer hired a carer that she found in the paper. Consumer advised that the carer and her 2 children moved in with her while her daughter was away (6 months), when they moved out Consumer received her Telstra bill which was \$3000. Consumer stated that the children had been making overseas phone calls while she was sleeping, she has been in contact with legal aid and they stated it would be very difficult to get money from her. Consumer stated she has made a deal with Telstra to pay \$100 a fortnight until it's paid off.</p> <p>Consumer states she hires a couch and 2 chair for \$146 a month, but has got behind in her payments and now owes \$587. The writer asked Consumer if she would accept second hand furniture if it could be organised from the Salvos or St Vinnie's, as this would save Consumer \$146 a month. Consumer stated she would and it would be great if she could get second hand furniture.</p> <p>Consumer states she has a bill from the plumber for \$230 (also has another bill from a different plumber for \$320, but her daughter is paying this bill for her), Consumer states that the landlord (XXXXXXX) told her she has to organise to get the pipes fixed and pay for it. The writer stated that as Consumer is paying rent it's the owners responsibly to pay for the pipes to be fixed if she didn't cause any damage. Consumer also advised she hasn't had an oven for around 5 months now. The writer asked if Consumer would like someone to speak with landlord or maybe Consumer Affairs Victoria. Consumer stated she would.</p>

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	<p>Consumer states she owes Cash Converters \$170, which she borrowed to pay bills. The interest keeps accumulating as Consumer is unable to pay the debt.</p> <p>Consumer advised she rents an air conditioner for \$90 a month, she states that she can't afford the air conditioner but needs it for her health. Consumer states she has angina and needs the air conditioner until she can save up \$6000 for an oxygen machine. The writer asked Consumer if it's possible to get assistance with paying for the machine. Consumer stated she isn't sure.</p> <p>Consumer advised she lives with her daughter and her two grandchildren.</p> <p>Writer provided Consumer with DHS phone number for the home wise program, which might help with purchasing an oven and consent was given for the writer to pass this information onto Consumer's Case Manager.</p>
<p>MEDICATION/S</p>	<p>Actos Tablet, Anginine S/L Tablet, Astrix 100 Tablet, Clarithro 250 Tablet, Diabex Tablet, Diamicron 30mg MR SR Tablet, Efexor, Gopten Capsule, Oroxine Tablet, Panamax Tablet, Ventolin CFC-Free Inhaler, Symbicort, Singulair</p>
<p>SUMMARY KEY ISSUES FOR THIS CASE:</p>	
	<p>TCA - Continance Nurse, Diabetes Educator, Respiratory Educator, Podiatry.</p> <p>Continance Nurse - Consumer has irritable bowel syndrome. As a result of this, she requires continence pads. I am hoping you may be able to assist her with this, as well as some other strategies to manage her condition.</p> <p>Respiratory Nurse - Consumer has emphysema, type two diabetes, depression and several other health issues. She states that she sees you regularly, and I would like to include you as one of the Care Providers on her Team.</p> <p>Diabetes Educator - Consumer has type two Diabetes, as well as several other health concerns. She states that she has updates with you approximately 6-monthly. Her random BGL at home vary between 6 - 10mMol/L> Her latest HbA1C showed 7.3%.</p> <p>Podiatry - Consumer has type two diabetes. She attends you regularly for nail paring and assessment of her feet. I would like to include you as one of the Care Providers on her Team.</p> <p>Consumer stated that earlier today 06/07/11 she had an Asthma attack in GP Clinic. BGLs have been between 6 - 10.</p> <p>Discussion of CDMCC - sometimes, can accidently forget to attend appointments, can get anxious and overwhelmed at times in attending the number of appointments that are required to attend.</p> <p>Consumer suffers from restricted mobility - stating the GP has informed Consumer that she suffers from Sciatica, with pain experienced at times shooting down both legs. Consumer has suffered 2x minor falls (in which she hurt hip and leg a bit, nothing serious) in the last month. Described as a bit unsteady on feet. Pain that shoots</p>

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	<p>down the legs is described as severe, however, doesn't last for long when experienced. Pain in legs not noticed during the night.</p> <p>Consumer requires cutting of toenails. Consumer stated that her toenails are a greenish colour - she has been informed by GP to watch this, and if anything changes; for her to see GP. Consumer also has a few callouses on both left and right feet.</p> <p>The Healthcare Centre nurse, Ruth Harvey stated that Consumer only has one rail in the bathroom, requiring home and gait assessment from OT.</p>
<p>HEALTH PROFESSIONALS INVOLVED (Referrals):</p>	
	<p>Continence Nurse. Appointment booked at Morwell on Wednesday 03/08/11 at 3.30pm</p> <p>Respiratory Educator. Appointment booked at Morwell on Wednesday 03/08/11 at 2pm.</p> <p>Diabetes Educator, Low Priority. Client is booked to attend diabetes Info. session at Morwell on 1/09/11.</p> <p>Podiatry/Foot care, Medium Priority. Client has appointment (previously booked) at Morwell on 26/08/11..</p> <p>CDMCC, Cat 1.</p> <p>Occupational Therapy, Medium Priority. Client has been added to O/T wait list.</p>
	<p>CACP (Community Aged Care Package) - LCHS</p>
<p>OTHER RELEVANT INFORMATION:</p>	
	<p>Allergies: Horseradish</p>

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