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TASK AND ROLE PERCEPTIONS OF GDM MANAGEMENT AS REPORTED BY MULTIDISCIPLINARY TEAM MEMBERS IN AUSTRALIA

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Gestational diabetes mellitus (GDM) is increasing and innovative models of care (MoC) are required to ensure women receive adequate care within finite health resources. An understanding of current practices and multidisciplinary team (MDT) member perceptions towards roles and tasks is important for developing MoC. The aim of this survey was to examine the task and role perceptions of the GDM MDT in Australia. A 64-item electronic questionnaire was sent to all Queensland Health facilities between May and June 2017, and was available nationally through professional organisations. Of the 183 respondents, all agreed that a MDT approach is best for managing GDM. However, there was lack of clarity around which MDT members should undertake specific tasks. Most respondents agreed that dietitians can provide medical nutrition therapy but there was also a perception that this can be done by diabetes educators (53%), endocrinologists (35%), midwives (19%), obstetricians (15%) or general practitioners (15%). Similarly, over 50% of respondents believed that advice on how to achieve appropriate gestational weight gain could be given by any of the GDM MDT. Similar results were assessed for 11 other tasks. The results of this national survey indicate there is a lack of role identity in the management of GDM. Potential reasons may be due a lack of evidence to support specific roles, health professionals' beliefs, or lack of appropriate resourcing for MDT members. The results of this research have been used in the development of a novel, dietitian-led MoC to be trialled in Queensland in 2018.

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