**Assessing The Impact Of Pre-Clinical Preparation In A Dedicated Integrated Model Of Diabetes Care**

**Introduction:**

Timely referral to specialist diabetes care is crucial for optimising glycaemic control. Prior to the first appointment, patients referred to the Western Sydney Diabetes (WSD) service receive a continuous glucose monitor (CGM) in a diabetes educator-led session, along with access to a lifestyle education application and a self-reflective patient survey. The impact of this pre-clinical preparation is currently unknown.

**Aims:**

To compare glycated haemoglobin A1c (HbA1c) at time of referral to glycaemic values at the time of first appointment based on CGM data. Secondary outcomes included identifying self-reported clinical factors influencing glycaemic change.

**Methods:**

Newly referred patients with type 2 diabetes who attended the WSD clinic from 1 March to 30 April 2025 were evaluated. Patients were eligible if they attended the pre-clinical preparation. Demographic, clinical, and biochemical data were collected.

**Results:**

A total of 44 patients were included (mean age 59.9 years; 47.7% male). Mean HbA1c at referral was 10.2% ± 2.5%. The corresponding HbA1c-estimated average glucose (13.7 mmol/L) was significantly higher than the CGM-derived average glucose at the first appointment, with a mean reduction of 2.8 mmol/L (p<0.001). Survey responses indicated that 63.6% (28/44) made dietary changes, 34.1% (15/44) increased physical activity, 25% (11/44) improved medication adherence, and 40.9% (18/44) had their medication regimen adjusted by their general practitioner. The majority (88.6%) responded positively to CGM use.

**Conclusion:**
While HbA1c and CGM-derived average glucose reflect different timeframes and methodologies, the observed difference provides a practical estimate of early glycaemic improvement between referral and specialist review. These findings suggest that early CGM exposure, digital engagement tools, and timely general practitioner involvement may foster patient activation and early behavioural change. Further research is warranted to assess the long-term impact of this model on diabetes outcomes.