

Long-Term Conditions Bulletin NZ



Long-Term Conditions Network & Health Navigator Charitable Trust

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Welcome to the Long-Term Conditions Bulletin – March 2015

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News

THE LANCET

Obesity

The Lancet obesity series: Global progress towards tackling obesity has been "unacceptably slow", with only one in four countries implementing a policy on healthy eating by 2010, according to The Lancet's new six-part series on obesity, edited by World Obesity's Policy and Prevention co-chair, Professor Boyd Swinburn. <http://www.thelancet.com/series/obesity-2015>

New Zealand has one of the highest obesity rates in the developed world and the prevalence of obesity in Maori and Pacific communities is disproportionately high. A recently released report finds that the social and economic costs of obesity to New Zealand are significant and recommends additional research to better quantify and understand these costs

<http://www.superu.govt.nz/news/2015/the-wider-economic-and-social-costs-of-obesity>

Concurrent with the release of this report Health Minister Jonathan Coleman has announced the Government are looking at introducing a health target to control child obesity. Read more

http://www.nzherald.co.nz/lifestyle/news/article.cfm?c_id=6&objectid=11400501



Health literacy

New Health Literacy Toolkit The South East Asia Regional Office of the World Health Organization (WHO), in partnership with Australia's Deakin University, has launched a set of health literacy tools and resources created to improve health and reduce inequalities for much of the world.

- Toolkit: www.ophelia.net.au/news/health-literacy-toolkit-for-low-and-middle-income-countries

Health professionals' understandings and their perceptions of barriers that Indigenous patients encounter.

This study describes health professionals' knowledge of the barriers to health literacy that their indigenous patients face. It concludes that they have little understanding of the consequences of poor health literacy for these patients. New Zealand content.

- <http://www.biomedcentral.com/content/pdf/s12913-014-0614-1.pdf>



Health literacy and the Internet: A study on the readability of Australian online health information
This study evaluated the readability of Australian online health information and investigated whether it matches the average reading level of Australians.

Their findings suggest that the "... readability of Australian health websites is above the average Australian levels of reading. A quantifiable guideline is needed to ensure online health information accommodates the reading needs of the general public to effectively use the Internet as an enabler of health literacy". <http://onlinelibrary.wiley.com/doi/10.1111/1753-6405.12341/abstract;jsessionid=7BC744691631DEEE1DD3A349587466E9.f03t03>

Recommended Resources

New blood pressure and cholesterol resources from Heart Foundation



New blood pressure and cholesterol resources are hot off the press with a fresh new look. The new resources are a result of extensive research and testing and while they provide information on blood pressure and cholesterol, they also invite people to think about what options are available to them to lower their risk of heart attack and stroke.

The new blood pressure and cholesterol resources; are based on shared decision making principles, where there are two experts in the room; the health professional and the person. The information is accompanied by pictures and plain language and all the options for managing overall risk are presented.

The new resources replace the old A5 information sheets on blood pressure and cholesterol and are supported by updated online information, including infographics and animations.

- Order the [blood pressure resource here](#) and the [cholesterol resource here](#).
- View the online information and [video on blood pressure here](#) and [cholesterol here](#).

Training

Stanford Chronic Disease Self-Management Programme – Master Trainer course

Hawkes Bay, 4+ days, commencing 24 March 2015

This excellent self-management course has been well and truly trialled for mental and physical health.

A few places remain so contact Health Hawkes Bay PHO if interested.

Contact Faye Milner Faye@healthhb.co.nz



Health Literacy Master Class 30-31st March 2015

Learn about **The Ophelia Approach**. A system that supports the identification of community health literacy needs, and the development and testing of potential solutions.

Registration: \$745

Further information Email: HL-Training@deakin.edu.au Tel: 03 9244 5405

Deakin City Centre, Level 3, 550 Bourke St, Melbourne

Book Online: <http://imlink.info/master-health-literacy>



MI module by Steve Rollnick now available free online

A new module called 'Motivational Interviewing in brief consultations' is available on the BMJ learning webpage for those who want to learn about how MI can be integrated into busy general practice.

The module takes about 1 hour to complete and has been created by Prof Stephen Rollnick, one of the originators of MI. It provides knowledge and demonstration of MI skills that can be used to address common lifestyle and behaviour change problems that clinicians face in general practice.

To register go to www.learning.bmj.com and then [access the MI module here](#)

Articles of Interest

Care Planning, Coordinated Care and the Chronic Care Model

Personalised care planning for adults with chronic or long-term health conditions (Cochrane Review)

Systematic review of randomised controlled trials and cluster-randomised trials to assess the effects of personalised care planning for adults with long-term health conditions compared to usual care. The authors found that personalised care planning leads to improvements in certain indicators of physical and psychological health status, and people's capability to self-manage their condition when compared to usual care.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD010523.pub2/full>

Are nurses well placed as care co-ordinators in primary care and what is needed to develop their role: A rapid review

Nurses often take on roles as care co-ordinators for chronic disease (CD) management. In this rapid review of previous systematic reviews, the authors investigate if they or other disciplines are best placed to take on this role. Nurses required specific training for these roles, but performed co-ordination more often than any other discipline. There was, however, no evidence that discipline had a direct impact on clinical or service outcomes, although specific expertise gained through training and workforce organisational support for the co-ordinator was required. Hence, skill mix is an important consideration when employing care co-ordination, and a sustained consistent approach to workforce change is required if nurses are to be enabled to perform effective care co-ordination in CD management in primary

care". <http://onlinelibrary.wiley.com/doi/10.1111/hsc.12194/abstract>

Facilitators and barriers of implementing the chronic care model in primary care: A systematic review

The purpose of this review is to synthesise findings of studies that implemented the CCM in primary care, in order to identify facilitators and barriers encountered during implementation. The major emerging themes were those related to the inner setting of the organisation, the process of implementation and characteristics of the individual healthcare providers. These included: organisational culture, its structural characteristics, networks and communication, implementation climate and readiness, presence of supportive leadership, and provider attitudes and beliefs. The authors conclude that these findings highlight the importance of assessing organisational capacity and needs prior to and during the implementation of the CCM, as well as gaining a better

understanding of health care providers' and organisational perspective.
<http://dx.doi.org/10.1186/s12875-014-0219-0>

Measurement: Developing Measures of Peoples Self-Reported Experiences of Integrated Care – Picker Institute http://www.pickereurope.org/wp-content/uploads/2014/10/Developing-measures-of-IC-report_final_SMALL.pdf

Self-Management Support

Reducing Care Utilisation through Self-management Interventions (RECURSIVE): a systematic review and meta-analysis

184 studies were included, with most studies in patients with cardiovascular, respiratory and mental health problems. Generally, self-management support was associated with small improvements in quality of life. Some self-management interventions also reduced utilisation of health care, with the best evidence in respiratory and cardiovascular disorders. However, the effects were generally modest. The authors concluded that further research is needed to explore self-management in patients with more than one long-term condition, and to test how self-management can be better encouraged across the wider population of patients.

<http://www.journalslibrary.nihr.ac.uk/hshr/volume-2/issue-54#hometab0>

The influence of social networks on self-management support

The authors conclude that policy and interventions relating to LTC could be extended towards: raising awareness about the structure and organisation of personal communities; building individual and network capacity for navigating and negotiating relationships and environments; maximising the possibilities for social engagement as a way of increasing the effectiveness of individual and network efforts. <http://www.biomedcentral.com/1471-2458/14/719>

Lay and health care professional understanding of self-management: A systematic review and narrative synthesis

Themes emerging from the analysis related to traditional and shifting models of the professional-patient relationship; quality of relationship between health care professional and lay person; and putting self-management into everyday practice. Health care professionals conceptualised self-management as incorporating both a biomedical model of compliance and individual responsibility, while lay people understood it in wider terms reflecting biomedical, psychological and social domains and different expectations of responsibility. The authors suggest that different understandings help to explain how self-management is practised and may assist in accounting for the limited evidence of effectiveness of self-management interventions. Implications for policy and future research are presented. dx.doi.org/10.1177/2050312114544493

On the Web and Patient Portals

A web-based intervention to support self-management of patients with type 2 diabetes mellitus: Effect on self-efficacy, self-care and diabetes distress (Canada)

The objective of this study was to determine the effect of a web-based patient self-management intervention on psychological (self-efficacy, quality of life, self-care) and clinical (blood pressure, cholesterol, glycaemic control, weight) outcomes. The authors conclude that this self-management website for patients with type 2 diabetes did not improve self-efficacy. Website use was limited. Although its perceived reliability, availability of a blog and emailed reminders drew people to the

website, participants' struggles with type 2 diabetes, competing priorities in their lives, and website accessibility were barriers to its use. Future interventions should aim to integrate the intervention seamlessly into the daily routine of end users such that it is not seen as yet another chore. <http://dx.doi.org/10.1186/s12911-014-0117-3>

Online health portal empowers patients (Midlands Health Network)

"The family of a Gisborne patient needing emergency care while in Auckland was able to log into the ManageMyHealth Patient Portal to access vital information for the clinicians". To read the full story, go to: <https://www.midlandshn.health.nz/news/online-health-portal-empowers-patients>

Flipping primary health care: A personal story

One doctor's personal story of how the use of technology helped him 'flip' patient care. He describes how the dynamics of the relationships have changed and how much more productive the time spent face to face with his patients has become.

<http://www.sciencedirect.com/science/article/pii/S2213076414000979>

What's on

Health Promotion Calendar

MARCH 2015

- 1 – 31 Melanoma Awareness Month / Go Spotty Day on 27 March www.melanoma.org.nz
- 9 – 15 Kidney Health Awareness Week / World Kidney Day on 12 March www.kidneys.co.nz/
- 9 – 15 Red Cross Awareness and Appeal Week www.redcross.org.nz
- 11 Walk To Work Day www.livingstreets.org.nz/walk2work
- 16 – 22 Brain Awareness Week www.neurological.org.nz
- 20 World Oral Health Day www.nzda.org.nz www.worldoralhealthday.com
- 20 – 21 Child Cancer "Beads of Courage" street appeal www.childcancer.org.nz
- 21 – 29 Muscular Dystrophy Awareness and Appeal Week www.mda.org.nz
- 23 – 29 Hearing Week www.nfd.org.nz
- 24 World Tuberculosis Day www.stoptb.org
- 26 International Purple Day – Global day of epilepsy awareness www.epilepsy.org.nz

APRIL 2015

- 2 World Autism Day www.autismnz.org.nz
- 7 World Health Day www.who.int
- 7 – 12 Fight Stroke Week www.stroke.org.nz
- 13 - 19 Order of St John's Appeal Week www.stjohn.org.nz
- 24 April – 1 May World Immunisation Week www.health.govt.nz www.immune.org.nz
- 25 World Malaria Day www.rbm.who.int/worldmaliaday/





Surgeon and writer Atul Gawande to visit NZ on 16–18 May 2015

Dr Atul Gawande, is coming to New Zealand as a guest of the 2015 Auckland Writers Festival. Festival director Anne O'Brien says Dr Gawande is a must-see for anyone with an interest in health, medicine and mortality. "Atul Gawande is a brilliant mind; a world-leader in how to make our experiences in health care safer and healthier, what it's like to get old and where our ideas about death have gone wrong." Dr Gawande will appear in two major public events at the Festival: and will also be part of a Health Quality and Safety Commission Forum on Monday 18th May in Wellington.

- For more information, <http://writersfestival.co.nz/2015/03/world-renowned-surgeon-and-writer-atul-gawande-to-feature-at-festival/>
- Wellington HQSC Forum www.hqsc.govt.nz/atul-gawande

Goodfellow Symposium – Theme: ‘Skills for Next Monday’ Viaduct Events Centre, Auckland, 27 – 29th March 2015



In its 10th year, the popular Goodfellow Symposium is happening at the end of March next year. The multi-disciplinary programme caters for "general practitioners, primary health care nurses, pharmacists, urgent care physicians, registrars, specialists and others working in primary health care... and has been designed to provide engaging and informative sessions, the latest clinical updates and increased opportunities to participate in our popular practical sessions so you return to work armed with new knowledge and skills."

Keynote speakers – Tony Fernando – Sleep disorders expert and Nigel Latta

Pre-Symposium Workshops - 'Skin Lesions and Dermatoscopy and Principles of Advanced Cardiac Life Support (ACLS) Refresher.

Website - www.goodfellowsymposium.org/

Speakers www.goodfellowsymposium.org/programme/speakers/

International Forum on Quality and Safety in Healthcare London, 21–24 April 2015.

See www.internationalforum.bmj.com/home for more information

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