

# Long-Term Conditions Bulletin NZ



Long-Term Conditions Network & Health Navigator Charitable Trust

ISSN: 1179-6693

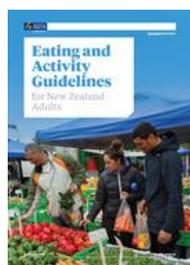
No.41: May 2017



## Welcome to the latest e-bulletin:

- News
- Recommended resources
- Training
- Articles of interest
- What's on – conferences & workshops
- Subscription information

## News



### How We Eat – Reviews of the evidence on food and eating behaviours related to diet and body size

This review examines the evidence on the effect of selected eating behaviours on diet and body size. The topics reviewed are:

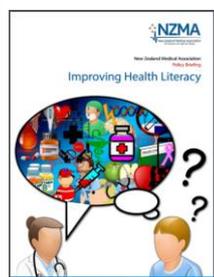
- breastfeeding, parental feeding practices and parenting style,
- adult role modelling,
- responsive eating, mealtimes and health literacy.
- [View the guidelines on the Ministry of Health website](#)



### Sit Less, Move More, Sleep Well: Active play guidelines for under-fives

Just published by the Ministry of Health, these guidelines provide “population health advice to support health practitioners, early childhood educators, regional sports trusts and others who provide advice to parents, caregivers and whānau or families on physical activity for children under five years of age.”

- [View the guidelines and resources – Ministry of Health website](#)



### New Zealand Medical Association Policy Briefing Improving Health Literacy

The New Zealand Medical Association has published a policy briefing on Improving Health Literacy, that seeks to promote a shared understanding of what health literacy means, why it is important, and what can be done to improve it.

Three of the 10 key recommendations:

1. *Doctors and healthcare professionals should take a ‘universal precautions’ approach to health literacy. This means assuming that anyone could have poor health literacy, finding out what is actually known, then helping build knowledge and skills as needed.*
2. *Universities, training institutes, regulators and colleges should ensure that health literacy education and training are included in undergraduate and postgraduate curricula, as well as in continuing professional development.*
3. *Improving health literacy should underpin all national health and wellbeing strategies.*
  - [View the report](#)

## Recommended resources



### Updates on the Health Navigator Website

Keep visiting the website as new topics are continually added. Here are just some of the latest topics:

- [Spirometry](#)
- [Tuberculosis](#)
- [Ear Drops & video](#) – how to give ear drops
- [Eye drops & video](#) – how to give eye drops
- [Pregnancy and immunisation](#)
- [Tips on how to give medicines to babies & children](#)
- [Medicines & travel](#)
- [Nitrofurantoin](#)

Videos including:

- [Disability Connect \(series of videos\)](#)



### 'Journeys' A New Programme from the Heart Foundation

This is a new programme launched by the Heart Foundation, where people share their own personal experience of heart disease to help others as they go through their own journey with heart disease. Real people with real stories of their first-hand experience.

Visit [heartfoundation.org.nz/journeys](http://heartfoundation.org.nz/journeys) to read the stories and watch the videos



### New or updated resources – Health Ed website/Health Promotion Agency

The Health Promotion Agency and MOH are continually reviewing and updating their resources. Here are some you may not have seen yet.

- [Big change starts small](#)
- [Parental supply of alcohol to under 18s](#)

## Training



### AUT Certificate of Proficiency in Pacific Nutrition

The AUT Certificate of Proficiency in Pacific Nutrition will teach you about the relationship between the types of food we eat, and the effect they can have on our health. You will learn how to make everyday traditional foods healthier. Every life stage is covered from age 0 - 65+.

Next course is at the Heart Foundation offices in Auckland starting 1<sup>st</sup> August 2017. Enrol before 16<sup>th</sup> June 2017. Registration information can be found [here](#)



### Certificate in Public Health and Health Promotion

Applications are now open for this programme starting in July 2017

For more information click [here](#)

	<p><b>PHARMAC Seminars</b></p> <ul style="list-style-type: none"> <li>• Advanced travel medicine <b>22 June 2017 (full)</b></li> <li>• Paediatric allergy <b>Monday, 26 June 2017</b></li> <li>• Dementia update <b>Friday, 4 August 2017</b></li> <li>• Cardiovascular disease for Primary Care <b>Wednesday, 9 August 2017</b></li> <li>• <a href="#">Visit website for details</a></li> </ul>
---	--

## Articles & trends of interest

<p>THE CONVERSATION</p>	<p><b>To be ill is human: why normalising illness would make it easier to cope with</b></p> <p>Serious and chronic disease is common, yet why are we so shocked when we, or someone we know, becomes ill? Why are many people scared of illness and unable to support their loved ones when illness strikes? And why do so many people still think “it won’t happen to me”?</p> <p>These questions are discussed in an interesting <a href="#">blog</a> posted on the ‘Conversation website.</p>
-------------------------	--

	<p><b>Developing and implementing a social prescribing initiative in primary care: Insights into the possibility of normalisation and sustainability from a UK case study</b></p> <p>Social prescribing, an initiative becoming increasingly popular in primary care, refers to prescribing a range of social, cultural, arts and educational activities to promote physical and mental health and wellbeing to patients.</p> <p>This UK paper presents a process-based evaluation of the inception and early implementation of a social prescribing program in two general practices. Findings of this case study suggest that not only had the initiative been broadly successful but that these social prescribing practices were becoming normalised into the routines of the primary care team.</p> <p>The authors describe enablers and barriers for success with social prescribing into the future.</p> <p>Click here to access the <a href="#">abstract</a></p>
---	--

	<p><b>Multimorbidity, clinical decision making and health care delivery in New Zealand Primary care: a qualitative study</b></p> <p>Multimorbidity is a major issue for primary care. The authors explored primary care professionals’ accounts of managing multimorbidity and its impact on clinical decision making and regional health care delivery.</p> <p>The authors found that Primary care professionals encountered challenges in providing care to patients with multimorbidity with respect to both clinical decision making and health care delivery. The New Zealand primary care co-payment funding model was seen as a barrier to the delivery of care as it discourages sequential consultations, a problem only partially addressed through the use of the additional capitation based funding stream of <i>Care Plus</i>. Fragmentation of care also occurred within general practice and across the primary/secondary care interface.</p> <p>The authors concluded that the findings highlight specific New Zealand barriers to the delivery of primary care to patients living with multimorbidity. There is a need to develop, implement and nationally evaluate a revised version of <i>Care Plus</i> that takes account of these barriers. Full article can be accessed <a href="#">here</a></p>
---	--

 US National Library of Medicine National Institutes of Health	<p><b>Clinical and cost effectiveness of nurse-led self-management interventions for patients with COPD in primary care: A systematic review.</b></p> <p>This systematic review aimed to evaluate the clinical and cost effectiveness of nurse-led self-management for patients with chronic obstructive pulmonary disease in primary care. The authors concluded that some nurse-led self-management programmes in this systematic review produced beneficial effects in terms of reducing unscheduled physician visits, lowering patients' anxiety and increasing self-efficacy, but there is insufficient evidence to reach firm conclusions on the clinical or cost-effectiveness of the interventions. Further research should aim to identify the optimal components of these programmes and to identify those patients most likely to benefit. The inclusion of economic analyses in future studies would facilitate decisions by policy makers on the implementation of self-management interventions. Abstract can be accessed <a href="#">here</a></p>
<b>BMJ Open</b>	<p><b>Social prescribing: less rhetoric and more reality. A systematic review of the evidence</b></p> <p>A systematic review was conducted to assess the evidence for the effectiveness of social prescribing. Social prescribing programmes are being widely promoted and adopted in the UK National Health Service. They are a way of linking patients in primary care with sources of support within the community to help improve their health and well-being. Despite clear methodological shortcomings, most evaluations presented positive conclusions.</p> <p>The authors conclude that social prescribing is being widely advocated and implemented but current evidence fails to provide sufficient detail to judge either success or value for money. If social prescribing is to realise its potential, future evaluations must be comparative by design and consider when, by whom, for whom, how well and at what cost.</p> <p>Full article can be accessed <a href="#">here</a></p>
 US National Library of Medicine National Institutes of Health	<p><b>The Use of Telehealth to Reduce Inequalities in Cardiovascular Outcomes in Australia and New Zealand: A Critical Review.</b></p> <p>Telehealth, the delivery of health care services at a distance using information and communications technology, is one means of redressing inequalities in cardiovascular outcomes for disadvantaged groups. The authors of this review argue that there is sufficient evidence to move to larger-scale implementation of telehealth for acute cardiac, acute stroke, and cardiac rehabilitation services. For cardiovascular chronic disease and risk factor management, telehealth-based services can deliver value but the evidence is less compelling, as the outcomes of these programs are variable and depend upon the context of their implementation. Access article <a href="#">here</a></p>
 The Leading eHealth Publisher	<p><b>Development of a Culturally Tailored Text Message Maternal Health Program: TextMATCH</b></p> <p>This study describes the process of developing a culturally tailored text message-based maternal health program (TextMATCH: Text for MATernal and Child Health) for Māori, Pacific, Asian, and South Asian families living in New Zealand. The authors concluded that they had demonstrated the importance of an intensive approach to the development of a culturally adapted and tailored mHealth program for multiple different cultural minority groups within our population. Article can be accessed <a href="#">here</a></p>
 The Leading eHealth Publisher	<p><b>Use of Fitness and Nutrition Apps: Associations with Body Mass Index, Snacking, and Drinking Habits in Adolescents</b></p> <p>This study assessed whether the use of commercial fitness or nutrition apps was associated with a lower BMI and healthier snacking and drinking habits in adolescents. The authors concluded that commercial fitness and nutrition apps show some association with healthier</p>

eating behaviours and BMI in adolescents. However, effective behaviour change techniques should be included to affect key determinants of healthy eating.  
Article can be accessed [here](#)

## What's on



### Easy Evaluation workshops

These two-day Easy Evaluation workshops are offered throughout the country. The workshop focuses on developing a logic model and using the logic model to develop an evaluation plan. The workshop provides experiential, hands-on learning opportunities and a full set of workshop notes is provided. Participants apply learning to their own public health/health promotion programme.

These workshops are FREE of charge. Find out more [here](#) To register, email [easy.evaluation@massey.ac.nz](mailto:easy.evaluation@massey.ac.nz), call Jan Sheeran at 09 366 6136



### Tobacco control seminars /webinars

Registrations are now open for HPA's 2017 tobacco control seminar series. For more information and registration click [here](#)

## Subscription information



### Suggestions & regional news

We are always interested in receiving suggestions, regional news and articles for future editions of the *Long-Term Conditions Bulletin NZ*. Send to [editor@healthnavigator.org.nz](mailto:editor@healthnavigator.org.nz)

### Subscribe/unsubscribe

To subscribe or unsubscribe, email: [admin@healthnavigator.org.nz](mailto:admin@healthnavigator.org.nz)

**Editors:** Pat Flanagan and Dr Janine Bycroft