

Wellington Primary Care Partnership



June 2010 Issue 142

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Meetings for 2010- all meetings to commence at 10:30

Date	Meeting	Location
28 June	Business Meeting	Conference room, CGHS
26 July	Executive Meeting	e-health room, CGHS
23 August	Business Meeting	CGHS
27 September	Executive Meeting	e-health room, CGHS
25 October	Business Meeting	Lecture Hall, CGHS
22 November	Executive Meeting	e-health room, CGHS
13 December	Business Meeting	Lecture Hall CGHS

Health Promotion Meetings

9.30am – 11am
Conference Room - CGHS

Chronic Disease Mgmt Meetings

2pm – 4:30pm
Conference Room - CGHS

Date	Date
20 July	3 August
21 September	5 October
16 November	7 December

Newsletter Publication Dates

Deadline for submitting articles	Publication Date	Deadline for submitting articles	Publication Date
25 June	2 July	24 September	1 October
30 July	6 August	29 October	5 November
27 August	3 September	26 November	3 December

Newsletter and Attachments

Newsletter and attachments can be downloaded from our website:

<http://www.wellingtonpcp.com.au/resource-unit>

Service Coordination

Jo Cockwill
EO Wellington PCP

Department of Health - Funding Incentives and Innovation Grants

Five grants from DH were promoted in late February and the Gippsland PCPs, in collaboration with Eastern Metro Region PCPs, were successful in their application for \$200,000 for *Electronic Care Planning*. This project will involve working with the vendor of the 'Service to Service' (S2S) e-referral product, InfoXchange to improve the care planning component of S2S.

The first meeting of the Steering Committee is on June 16 and I will be attending.

The Gippsland PCPs were also successful, via Wellington PCP, in submitting for funds under the *Dept. Health Care Planning Project (2007-10)*. This Care Planning Workforce Development Project supports the completion of a Mayfield Education Centre training package for 15 participants from Gippsland to complete 3 days training conducted over a three week period re 'Implementing Goal Directed Care Planning' based on the care coordination template from SCTT.

Members of the Regional Care Planning and Feedback Group have already been briefed as to the nature of the Workforce Development project and Mayfield Education will be conducting a workshop in Traralgon on June 17 to get feedback from Gippsland Health Professionals as to the nature and level of the training and the best way to roll it out in Gippsland. An invitation to this workshop will be sent out in the next few days.

Statewide SC/ICDM 2009 Survey

DH conducts this survey annually in September with results made available by the end of the year so PCPs and agencies can address issues requiring improvement. Participation in the survey process is a component of the PCP funding and reporting requirements. Unfortunately, data analysis has been held up at DH and the survey outcomes due in December have only just been released. This presents some problems for identifying and implementing changes before the next survey is due in September 2010.

In Wellington PCP Catchment

The results are now being analysed. A report outlining priority areas will be made available to members and will be part of the WPCP review of the strategic and operational plans.

Chronic Disease Management

Emily Durbridge

Another month is over and we are almost half way through the year! There has been a lot happening in the world of chronic disease lately so here is my update for this month.

I will be working in the WPCP office on Wednesdays with the possibility of an extra day each week so I will be in contact with you all shortly to make appointments for a catch-up.

I am on leave from Monday June until Friday 2 July. Any queries during this time can be directed to Jo Cockwill.

If you have any questions about the content of my report, or anything else CDM related please do not hesitate to contact me via email emilyd@glch.org.au or phone 5152 0022.

Some key information about Self Management

What is Self Management?

The Centre for Advancement of Health states that Self Management:

'involves (the person with the chronic disease) engaging in activities that protect and promote health, monitoring and managing the symptoms and signs of illness, managing the impact of illness on functioning, emotions and interpersonal relationships and adhering to treatment regimes.'

Kate Lorig (1993), one of the leading researchers in this area, adds that self-management is also about enabling:

'participants to make informed choices, to adapt new perspectives and generic skills that can be applied to new problems as they arise, to practise new health behaviours, and to maintain or regain emotional stability.' (p11))

The Six Principles of Self-Management

The following characteristics could therefore be seen to summarise a 'good' self-manager.

They are individuals who:

1. Have knowledge of their condition
2. Follow a treatment plan (care plan) agreed with their health professionals
3. Actively share in decision making with health professionals
4. Monitor and manage signs and symptoms of their condition
5. Manage the impact of the condition on their physical, emotional and social life
6. Adopt lifestyles that promote health.

What is Self Management Support?

Self-management support is what health care practitioners provide to assist a person with their self-management practices, and to support their self efficacy and ability to effectively self-manage. Self management support:

- Can be provided through a range of strategies and approaches - individual and group based, face-to-face or by phone, as part of clinical intervention and/or as a separate interaction with the person with a chronic disease.
- Includes not only provision of information, but also assistance in practical application of health information in the individual context through goal setting and problem solving.
- Is not just an intervention, it is a philosophy or entire approach to how a clinician works in partnership with people with chronic diseases.

What is the Stanford program?

While there are many different chronic conditions, the problems people experience are often quite similar. Known as the Stanford Model based work of Lorig KR, Sobel DS, Ritter PL, et al. (2001) Stanford University, US.

The Arthritis Foundation Victoria conducts the facilitators training course: 'The Better Health Self Management Program' for consumers.

- How to manage your symptoms
- How to communicate more effectively with your doctor/health professional
- How to lessen the frustration and deal with emotions
- How to fight fatigue
- How to get more out of life
- How to make daily tasks easier
- How to negotiate the healthcare system and select the most appropriate services and programs appropriate for your health care needs

The Chronic Disease Self-Management Program is a workshop over two and a half hours, once a week, for six weeks, in community settings such as senior centres, churches, libraries and hospitals. People with different chronic health problems attend together. Workshops are facilitated by two trained leaders, one or both of whom are non-health professionals with a chronic disease themselves.

Subjects covered include: 1) techniques to deal with problems such as frustration, fatigue, pain and isolation, 2) appropriate exercise for maintaining and improving strength, flexibility, and endurance, 3) appropriate use of medications, 4) communicating effectively with family, friends, and health professionals, 5) nutrition and 6) how to evaluate new treatments.

Who are the trained leaders currently running courses in Wellington?

- Sheila Cross (CGHS HARP)
- Judy Hoffard (CGHS HARP)

Please contact Sheila via email for course dates and locations:

sheila.cross@cghs.com.au

During the last month ...

Rural Health Conference

Jo, Rachael and I were fortunate enough to attend the Rural Health Conference in Ballarat at the end of April. There were some interesting speakers and all of the presentations are available for you to download at your leisure. A couple of highlights for me were:

Communication strategies to motivate and support change in ICDM – Donna Bridge, Wimmera PCP

- Ideas for how to develop the ICDM network
- Case studies and local showcasing
- Champions of change
- Use DH to authorise ICDM prioritisation to CEOs in agencies
- Use PCP executive for communicating
- Use network so agencies can learn how programs and services could help their clients, how shared management of clients can be of benefit

Their network is at a different stage to ours but it was interesting to see how we could develop into something similar

ViTCCU: Virtual trauma and critical care unit project Innovative pilot telehealth project – Peter Wallis/Bruce Winzar

- Clever networks program
- System of clinical management enabled by broadband connectivity that will allow Melbourne based trauma and clinical care physicians to assist rural doctors
- Basically high tech videoconferencing, managed network that links Loddon Mallee services to Melbourne service providers: The Austin, The Alfred, St Vincent's, Royal Children's Hospital and Adult Retrieval Victoria
- Very expensive – funded project, including in-kind donations
- Interesting to see that level of technology and the benefits to patients

The presentations can be accessed by clicking on the link:

<http://www.rh2010.com.au/program.php>

The month ahead...

Life! Meeting

Jo and I will be attending a meeting with the Life! Program Facilitators and a representative from Diabetes Australia – Victoria on the 7 June. Key items on the agenda will be barriers to referring into the program, the referral process and how to improve the numbers of people completing the program.

It is hoped that by bringing the facilitators from East Gippsland and Wellington together, that we will be able to design a campaign to drive the program.

Regional Community of Practice Forum: Improving Chronic Disease Care - Together we can do better!

I will be attending this forum next Wednesday (2 June), along with Jude Deedman and Sheila Cross, who will be participating in a panel discussion.

The EliCD/HARP Forum aims to bring together clinicians, program managers and other professionals from various disciplines involved in providing chronic disease management services within the context of the Dept of Health EliCD and HARP strategies with a view to better understanding the policy context and evidence behind these programs, sharing learnings about the issues being encountered in practice and developing plans for improvement

We will share learnings with you after the forum.

Chronic Disease Network Meeting Dates for 2010

Chronic Disease Network Meeting Dates for 2010 to be held from 2:30pm till 4:30pm at CGHS Conference Room, Community Health Building, Palmerston St, Sale:

- Tuesday 1 June
- Tuesday 3 August
- Tuesday 5 October
- Tuesday 7 December

Please ensure your agency is represented at the network meetings, as we have guest speakers at each meeting providing some professional development and we are developing the network to incorporate the partnership plan. We are doing some interesting work on the Human Services Directory and Infoxchange Service Seeker Database.

Chronic Disease Resources

1. Department of Health Website:
<http://www.health.vic.gov.au/communityhealth/cdm/resources.htm>
2. Diabetes self-management - Guidelines for providing services to people newly diagnosed with Type 2 diabetes:
http://www.health.vic.gov.au/communityhealth/downloads/dhs_diabetes_guidelines.pdf
3. Better Health Care in Gippsland Resource Kit:
http://www.health.vic.gov.au/communityhealth/cdm/res_bhig.htm
4. Care Planning with General Practice – FAQs about the use of CDM Medicare Items:
http://www.health.vic.gov.au/communityhealth/downloads/care_planning_gp.pdf
5. What is Self Management:
http://www.health.vic.gov.au/communityhealth/downloads/fact_sheet4.pdf
6. Evidence-based Guidelines and Clinical Pathways for ICDM planning:
http://www.health.vic.gov.au/communityhealth/downloads/fact_sheet_1.pdf
7. General Practice Engagement in ICDM:
http://www.health.vic.gov.au/communityhealth/downloads/gp_engagement_icdm.pdf
8. Population health data sources for ICDM planning:
http://www.health.vic.gov.au/communityhealth/downloads/fact_sheet3.pdf
9. Wellington Health and Community Directories – are available to assist you working with clients with chronic disease. The Directory contains information about programs and services that may assist your clients. Please contact Emily at PCP to request copies.
10. Integrated Chronic Disease Management Online Clearinghouse:
<http://clearinghouse.adma.org.au>

Health Promotion

Rachael Dooley

GippSport Access for All Abilities

The GippSport Access for All Abilities program requests your club's cooperation by completing a short survey that gives your club a chance to win \$400. Clubs have until 12.00pm on Monday 14 June to complete the survey. By completing the 'Disability Programs in Gippsland Sporting Clubs' survey your club will assist GippSport in conducting a mapping exercise to determine which Gippsland sporting clubs are currently providing activities that specifically cater for people with disabilities. The mapping exercise will serve as a very important resource that will allow GippSport to link people with disabilities to Gippsland sporting clubs in the future. Visit our website - www.gippsport.com.au to complete the survey. Patrick Kilday GippSport; Access for All Abilities

Community Kitchens

Linde Coggan

Community Kitchens are groups of people who regularly meet at community-based venues to socialise and cook fresh and nutritious meals together.

They encourage members to develop new friendships, whilst further developing skills in cooking affordable meals. Community Kitchens help people:

- Regularly access affordable and nutritious food;
- Meet others and socialise in a friendly and welcoming environment; and
- Connect to their community by strengthening bonds between community members, providing volunteer opportunities and establishing links with other community programs and organisations.

Trained Facilitators guide the Kitchens to ensure they run smoothly however each group member is equally responsible for how their Kitchen runs. Community Kitchen Facilitator Training is being offered on Monday 28 June 2010 with modules covering Nutrition, Food and Kitchen Safety, Budgeting and Group Facilitation.

For further information on the Community Kitchen Facilitator Training please contact Linde Coggan, Health Promotion Worker, at Central Gippsland Health Service on 5143 8803 or email linde.coggan@cghs.com.au

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