



HEALTH For LIFE

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Issue 1
November 2006

Welcome to Health for Life

The **Health For Life Programme** is commencing at Banyule Community Health (BCH) this month.

This programme was developed by the Early Intervention in Chronic Disease (EICD) Project team at BCH in partnership with the North East Valley Division of General Practice and the Banyule Nillumbik Primary Care Alliance.

Health For Life is a multidisciplinary, service coordinated programme offering individually tailored services for individuals diagnosed with the following chronic diseases:

- ◆ Cardiovascular (Ischemic Heart Disease)
- ◆ Respiratory (COPD,

chronic asthma)

- ◆ Musculoskeletal (Osteoporosis)

- ◆ Diabetes Type II.



Health For Life offers a collaboration of allied health care providers, G.P's, health coaches, education and rehabilitation programmes and support

groups working together to encourage individuals to effectively self manage their chronic condition

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This programme is for people who are newly diagnosed or who have not progressed to serious complications of the disease requiring hospital level care or intensive outreach support.

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BANYULE
Community Health

Health for Life is for individuals diagnosed with one or more of the following diseases:

- *Cardiovascular (Ischemic Heart Disease)*
- *Respiratory (COPD, chronic asthma)*
- *Musculoskeletal (Osteoporosis)*
- *Diabetes Type II*

A Health For Life Programme information brochure is available from BCH.

Information about this Programme and other services is also available on the website www.bchs.org.au

Health for Life Consumer Working Group

Since the commencement of the EICD project, in February 2006, a Consumer Working Group has been meeting monthly to

advise the project team. Members of the group come from a range of backgrounds and chronic disease experience. Most

have attended or are carers for someone who has attended Banyule Community Health at some time.

Continued....

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Health for Life Consumer Working Group (continued)

This group has had an integral role in providing insight into what health care consumer's desire and have a right to expect from a Community Health Service programme.

The major achievement of this group to date has been their contribution to the development of the model for the Health For Life Programme and the

accompanying brochures. The group advised on the appropriateness of the language, pictures, graphics and colours used in the brochures.

Their enthusiasm and generous donation of time to this project is highly valued.



Consumer Working Group

Back L to R: Hildegaard Hopf, Alan Pearce, Roslyn Brown, Ian Brown, Gerry den Dulk
Front L to R: Gwen Roberts, Graeme Roberts, Leny den Dulk
Absent: Jack Beswick

Consumer Group Member - Alan Pearce

Why did I volunteer for this project you may ask? As a person who has had to self-manage a chronic disease (Diabetes) for a number of years, I believed that I could make a contribution by using the benefit of my personal experience, and the lessons I have learned over the period.

I had previously been a member of a consumer group and also a reference group in the HARP Diabetes project at Austin Health. All of my life I have been active in the community in various ways, and this project seemed to be an appealing



Alan Pearce

and appropriate way of making a further contribution, as well as learning more for myself about what others were doing in managing their chronic conditions.

To put my involvement into perspective, my initial feelings, after being diagnosed with a chronic disease, were feelings of shock and bewilderment. I thought, "Where do I go from here?" I knew it would not be easy nor will the condition go away, and if I don't do something about it, who else will? It took several

months for me to work through the processes and accept, and then utilise, the benefits of the advice received from others. I believed that given similar situations, other people would most likely go through the same thought processes.

Being involved with such projects has placed a different light on chronic conditions for me, and as a result I feel that I have learned as much as I have been able to contribute.

It certainly has reinforced for me the benefits of being in control through self-management of my own problem, and hopefully my contribution will be of some benefit to others in the future.

Early Intervention in Chronic Disease Project Team

The EICD Project team, which is responsible for the development of the Health For Life Programme, consists of:

- ◆ Louise Ryan - Project Leader (resigned October 2006)
- ◆ Victoria Smith and Fiona Bolton - Project Workers
- ◆ Carol Phillips - Health For Life Service Coordinator
- ◆ Kay Milner - General Practitioner Liaison Worker - appointed Project Team Leader November 2006

◆ Jodie Jordan - Administrative Support

Louise Ryan, Project Leader, commenced work at the end of January 2006 and has worked enormously hard, along with the key stakeholders, to provide the framework for this project. Her vision, enthusiasm, bubbly personality and drive will be sorely missed by the team she

has assembled to continue this exciting initiative at Banyule Community Health.



EICD Project Team

Back L to R - Carol Phillips, Victoria Smith, Jodie Jordan Front L to R - Fiona Bolton, Louise Ryan, Kay Milner

Kay Milner - GP Liaison Worker

Kay has enjoyed a diverse career over many years as a health professional. With a clinical background, specialising in Spinal Rehabilitation Nursing at Austin Health she moved on to managing a broad range of departments within this facility.



Kay Milner

Frontline and Administrative services

were part of her portfolio which honed her communication and service delivery skills.

This experience dealing with a diverse range of health care workers, clients and service providers has prepared her for her current role.

Kay is working with the EICD team and Banyule Community

Health GP's to develop a streamlined referral pathway to the Health For Life Programme.

The way forward includes plans to engage with the wider community of General Practitioners within the Banyule geographical area.

Kay Milner has also recently been appointed as the EICD Project Team Leader.

Carol Phillips - Service Coordinator

Carol is an experienced Registered Nurse who has had a variety of positions within the Community Health, Rehabilitation, Aged Care and chronic disease sectors.

Her most recent role has been with the HARP/CDMP (Hospital Admissions Risk Program/ Chronic Disease Management Program) in an outreach nursing role.

The current role of Service Coordination for the HFL programme will enable Carol to use her skills and experience to help the participants identify their needs in living with their chronic condition.



Carol Phillips—Service Coordinator (continued)

Carol will be the first point of contact for clients of HFL and can be contacted with any questions about the programme on 9450 2051.



Carol Phillips

Role of Health Coaches

The Health For Life programme includes the option of a Health Coach. The client completes an initial health questionnaire during the first meeting with the HFL Service Coordinator. They then discuss the individual needs of the client and determine whether a coach is needed.

Service Providers from within Banyule Community Health have received some training in the Flinders Model of

Health Coaching, as well as attending a Health Coaching Symposium conducted by the Deakin University Health Sciences faculty. Education in motivational interviewing techniques has also been undertaken.

A role description and resource pack is being developed and refined by the HFL Project team to assist the coaches with their role.

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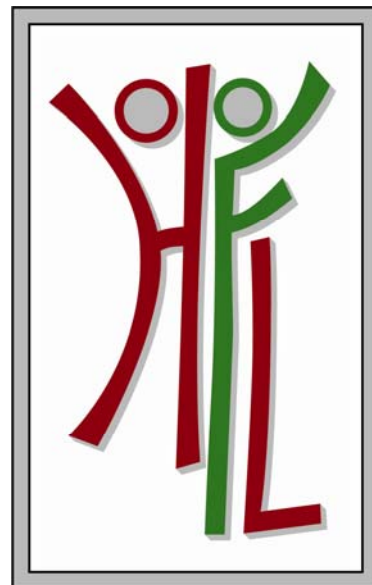
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**We're on the web
www.bchs.org.au**