

# Meeting needs for ongoing care

**THIS ISSUE** of *Australian Health Review* has a primary focus on meeting needs for ongoing health care for people with chronic conditions. The first paper in this issue is our *n=1* feature written by Claire Williams. Claire provides a personal account of her experiences as a carer. Her story is not uncommon — while often made to feel like an intruder in the formal care processes of her partner, with very little support, she is then required to deliver, organise and coordinate care when her partner is discharged from the system.

This theme is further explored by Dow and McDonald (*page 193*), who discuss the impact of the shift from care in the hospital to care in the home, and Walker (*page 203*) who outlines consumer inequality associated with chronic illness. Other papers present some effective and some not so effective models for ongoing care delivery (*page 223, 231, 239, 256 & 267*). Monaem et al illustrate the issues associated with engaging men in the health care system (*page 211*), and Jessup and colleagues discuss the lack of best practice in managing acute diabetes-related foot complications (*page 217*).

A team from the University of York Centre for Reviews and Dissemination completed a comprehensive review of studies exploring self care support networks. They found little evidence for self care support networks as a generic intervention.<sup>1</sup> Harvey and Docherty suggest a paradox of self-management similar to the fate of Sisyphus, doomed to roll a rock up a hill, only to watch it roll back down as it nears the top (*page 184*), yet the potential benefits of mutual help groups in mental health are identified in another paper (*page 246*).

This collection of papers illustrates what many of us have suspected. While we are beginning to have a greater understanding of what comprises best practice health care for people with chronic conditions, insufficient

numbers of Australians living with chronic conditions receive such care. There is increasing evidence that “many chronically ill patients have socioeconomic factors, disabilities, and comorbid conditions that make it harder for practitioners and practice systems to help them”.<sup>2</sup> (p. 945) But there is also increasing evidence that our health care system is not appropriately structured for the ever increasing prevalences of major chronic diseases, with the suggestion that “*the system is the chronic condition that needs managing*”.<sup>3</sup> (p. 487)

## Models of care

In this section, Roberts and colleagues discuss a short-term case management model for elderly people at risk of hospital admission that has demonstrated some success in “managing the system” (*page 173*).

## Also in this issue

A team from the Centre of Research Excellence in Patient Safety at Monash University discusses the use, and the limitations, of quality indicators in measuring health care quality (*page 276*). Other papers address the issues associated with using average length of stay to plan hospital food services (*page 282*), a review of recommendations of root cause analyses (*page 288*), and the use of a behavioural assessment room in an emergency department (*page 296*). The final paper models the effect of the private health insurance reforms, finding that the Lifetime Health Cover in particular would result in a reduction in public hospital utilisation (*page 305*).

As editor I have continued to be amazed at the variety of topics related to health management and policy that are addressed in high

quality submissions to *Australian Health Review*. The number of submissions to *AHR* continues to increase and I would like to thank our authors and reviewers for their enthusiastic participation.

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- 1 Woolacoot N, Orton L, Beynon S, et al. Systematic review of the clinical effectiveness of self care support networks in health and social care. London: Centre for Reviews and Dissemination, University of York, September 2006.
- 2 Wagner EH. Meeting the needs of chronically ill people. Socioeconomic factors, disabilities and comorbid conditions are obstacles. *BMJ* 2001; 323: 945-6.
- 3 Teasdale C. Management of chronic disease. System needs managing better. *BMJ* 2002; 324: 487. □



The Case Management Society of Australia (CMSA) is a collaborator with the Australian Healthcare Association. The combined and unique strengths of both organisations aim to provide readers with the most up-to-date, relevant research articles in the *Australian Health Review*.