



Government of **Western Australia**
Department of **Health**

Western Australia Chronic Conditions Self- Management (CCSM)

CCSM Program Criteria

Health Strategy & Networks

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Executive summary

The WA Chronic Conditions Self-Management Strategic Framework (2011-2015) reflects the need for significant and sustainable changes to be made in a health system which is undergoing large-scale reform whilst dealing with the expanding impact of chronic health conditions in our society.

Self-management is one of the guiding principles in the WA Chronic Health Conditions Framework 2011-2016, and is incorporated in Models of Care produced by WA Health Networks.

Self-management is critical to the overall effective management of chronic health conditions, emphasises the person's central role in managing their health and employs a holistic, lifelong approach to health and self-care. Underpinned by consumer empowerment and engagement with community resources, specific strategies include enhanced capacity, knowledge and skills, a holistic assessment, goal setting, problem solving, and regular follow-up with a health care team.

The purpose of this Chronic Conditions Self-Management (CCSM) Program Criteria document is to outline a set of standards to guide providers in the development, delivery and evaluation of Chronic Conditions Self-Management programs in WA. Based on population needs, the program criteria will inform evidence-based, best practice programs and services to assist with capacity building of consumers, carers, clinicians and the community overall.

These criteria are intended to provide guidance to organisations and individuals planning to engage in Self-management program activities.

“Self-Management is not something new.

For 95% of our waking hours we are self-managing our chronic conditions.

There are ways we can do better, and we all want that.”

Jenni Ibrahim (Health consumer living with chronic lung disease)

Introduction

Self-management involves consumers and carers adopting attitudes and learning skills to facilitate a partnership between themselves, their support network, including family and carers, and service providers in the treating, monitoring and managing of a long-term health condition

Chronic Condition self-management is part of the Strategic Framework for WA Health. The delivery of chronic conditions self-management programs and services are funded by the WA Department Health under the WA Chronic Conditions Self-Management Strategic Framework 2011-2015.

While the Strategic Framework identifies some priority chronic conditions, a self-management approach has relevance for any long-term health condition across the continuum of care.

To support the broader development and implementation of CCSM programs across WA, it was determined that key program criteria for CCSM programs should be identified.

Self-management support describes the techniques and strategies that health providers, consumers, carers, organisations and systems employ to assist those living with chronic conditions to practice self-management. It is recognised that consumers and carers self-manage most of the time and that self-management programs are designed to enhance their capacity to do so.

The purpose of this document is to outline a set of standards to guide providers in the development, delivery and evaluation of Chronic Conditions Self-Management programs in WA. Self-management programs simultaneously address symptom and disease management, through opportunities for competence mastery, vicarious learning, social persuasion and re-interpretation of symptoms, teach problem-solving and decision-making, goal-setting and action planning. Self-management programs rely on a range of strategies including peer support groups, information, education and targeted programs. Based on population needs, the program criteria will inform evidence-based, best practice programs and services to assist with capacity building of consumers, carers, clinicians and the overall community.

A Self-Management Assessment Guide has also been endorsed by the CCSM Reference Group, and aims to highlight a selection of audit / assessment tools which can be used to support the philosophy of self-management in practice, including assisting organisations to evaluate the effectiveness of their program services and other interventions.

1. Purpose of the Self-Management Program Criteria

The **Purpose** of the Program Criteria is to ensure a quality and consistent approach to the delivery of self-management programs. Program Criteria are designed to:

- Set a **standard** on what must be included, and able to be demonstrated, in a quality self-management program
- Function alongside **evidence based, self-assessment, feedback** and **quality improvement tool(s)** (NB: refer to the CCSMRG endorsed Self-Management Assessment Guide)
- Inform **funding decisions** (i.e. fund programs that can demonstrate adherence with the criteria)
- Support **program development** by ensuring inclusion of the criteria as part of the required elements of all self-management programs, and using feedback to ensure consumer and population needs are being met
- Support organisations to determine **optimal performance** in supporting self-management
- **Identify gaps in policy, resources, services** and other program supports
- **Guide Quality Control** - to provide confidence that programs listed as 'self-management' comply with essential self-management criteria, have content validity and consistency.

2. Minimum criteria for Self-Management Program

The **Minimum** criteria for a program include:

- 2.1 An evidence-based development cycle is used to develop the program, including a structured, written curriculum and/or documentation.
- 2.2 A validated Quality Assessment Framework (e.g. a tool such as the Q-SAF, or equivalent) is used to establish a program profile; and an action plan to build on further quality program components is developed.
- 2.3 An ongoing evaluation and agency-wide quality improvement process is in place.
- 2.4 Evidence of program fidelity i.e. the extent to which delivery of an intervention adheres to the original protocol, program model or underlying theory (e.g. the Stanford Model or Behaviour Change Theories).
- 2.5 Enables consumers and carers to acquire the knowledge and skills for self-management to the level of the individuals' capacity and, incorporates use of a consumer and carer measure to provide evidence of this (e.g. the PACIC or equivalent validated measure or a feedback process such as pre and post questionnaire to measure elements such as change in knowledge, attitude, motivation and action planning).
- 2.6 Professional staff, consumers and carers delivering the program have completed training in self-management support and in delivery of the program. Training must include assessment of level of skill required within a 'scope of practice' approach for the trainee.

3. Principles underlying the program criteria

It is recommended that self-management principles are reflected in the values, mission and policies of organisations delivering the programs. These should be linked to the principles and key drivers in the WA Chronic Conditions Self-Management Strategic Framework 2011-2015.

Organisations should demonstrate:

- Consumers and Carers are equal partners in the planning, development and delivery of self-management programs.
- Plans to address program elements of sustainability, evaluation and adequate resourcing to support self-management in the community.
- A willingness to support and participate in WA CCSM events, networking and research to further the evidence-base of self-management in WA.
- Capacity building of consumers, carers, clinicians, other service providers and the broader community.
- Programs should reflect the principles and philosophy of self-management. For example, such as those noted in the Flinders™ Program (Appendix 1).

4. Future opportunities

Development of the program criteria provides a platform for future opportunities including:

- 4.1 A wider stakeholder engagement process to provide feedback on self-management program criteria, inclusive of consumers, carers, non-government organisations (NGOs), community service and primary care providers, academics, program deliverers and other identified stakeholders.
- 4.2 Investigate opportunities to facilitate training and research supporting the consistent use of a validated Quality Assessment Framework, such as the Q-SAF or an equivalent measure.
- 4.3 Providing a reliable profile and description of quality CCSM programs to facilitate the further development of clinical pathways, and increase referrals into CCSM programs.

5. Influencing factors

The following factors were identified and taken into consideration in the development of the CCSM Program Criteria:

- 5.1 The terms “programs” and “services” are defined differently and are not used interchangeably. CCSM program elements need to be integral to self-management programs but CCSM services may incorporate a CCSM support approach as well as other interventions and service elements.
- 5.2 Service development was outside the scope of this document and criteria proposed are for CCSM programs, not services.
- 5.3 Once minimum criteria for CCSM programs are identified, ongoing funding/resources will be required to monitor that programs continue to meet these minimum criteria.
- 5.4 CCSM minimum program criteria would need to be supplemented by existing government procurement criteria when funding CCSM programs.
- 5.5 The Quality Self-management Assessment Framework (Q-SAF) tool was identified as a suitable tool to guide self-management program content. However, the following limitations should be noted:
 - it was not developed for comparing one program with another, or to determine which programs can or cannot be included in a self-management directory
 - there has been limited use of the Q-SAF
 - the current manual requires additional detail
 - further investment is required in training and research to ensure consistent use of the Q-SAF.
- 5.6 A quality CCSM program can be informed by the elements of the Q-SAF Section 1 Self-management Program Content and Delivery; the Flinders Program TM and other process elements.

6. Glossary of terms

Term	Meaning
Criteria	'Criterion' a standard on which a judgement or decision may be based Reference: www.merriam-webster.com/medlineplus/
Program	A program is a title used to describe a more structured intervention where the content is with a fixed commencement, content and end period
Service	Consists of a range of interventions and service events and programs e.g. the Community Physiotherapy Service supports several programs.
Self-management	'The active participation by people in their own health care' as defined by National Chronic Disease Strategy and WA Chronic Condition Self-Management Strategic Framework 2011-2015 Self-management includes the ability of the client to manage three key areas: <ol style="list-style-type: none"> 1. The disease/condition process. 2. The emotional consequences of living with the condition. 3. The changes to daily life that are a consequence of the condition. Self-management describes the actions taken by individual to manage their condition(s). Reference: www.selfmanagement.health.wa.gov.au
Self-management approach	The self-management approach emphasises the person's central role in managing their health. It includes strategies of assessment, goal setting, problem solving and follow-up; client empowerment and enhanced capacity, knowledge and skills; links them to personal and community resources; and employs a holistic, lifelong approach to health and self-care.
Self-management principles	<p>WA CCSM Strategic Framework–Self-Management Principles</p> <ol style="list-style-type: none"> 1. Person-centred care 2. Promoting life-long health and well being 3. Sustainability <p>Key Drivers</p> <ol style="list-style-type: none"> 1. Partnerships 2. Building Capacity 3. Information and communications technology 4. Continuous improvement 5. Equity and access <p>Self-Management Principles *</p> <ol style="list-style-type: none"> 1. Person-centred approach 2. Consumer empowerment and enhanced capacity 3. Participation by consumer, family and carers 4. Participation between consumer and health providers 5. Shared responsibility for health care outcomes

Term	Meaning
	<p>6. Coordination of support along the consumer journey</p> <p>7. Appropriate information: accessible, timely and understandable</p> <p>8. A holistic, lifelong approach to health and self-care</p> <p>*Endorsed for CCSM Banners</p>
Self-management programs	<p>The WA Chronic Condition Self-Management Strategic Framework defines self-management programs as programs and/or services (group, individual, online or other format) that:</p> <ul style="list-style-type: none"> ▪ simultaneously address symptom and disease management, emotional consequences AND daily life with a chronic condition (Corbin & Strauss 1988) ▪ provide opportunity for competence mastery, vicarious learning, social persuasion AND re-interpretation of symptoms ▪ teach problem-solving and decision-making (Bandura, 1997) ▪ Include instruction on developing partnerships, goal setting and action planning. <p>Self-management programs are not:</p> <ul style="list-style-type: none"> ▪ peer support groups alone – though they play an important role ▪ information/education alone ▪ exercise alone ▪ cognitive behaviour therapy programs alone. <p>Reference: www.selfmanagement.health.wa.gov.au</p>
Self-management support	<p>Self-management support is what health care providers, organisations and systems do to facilitate improved client self-management.</p> <p>This includes providing education and supportive interventions to increase clients' skills and confidence in managing their health problems, as well as regular assessment of progress and problems, goal setting, and problem-solving support.</p> <p>Reference: www.selfmanagement.health.wa.gov.au</p>

7. Abbreviations

CCSM	Chronic Condition Self-Management
PACIC	Patient Assessment of Chronic Illness Care – MacColl Institute for Health Care Innovation
Q-SAF	Quality Self-management Assessment Framework [®] Department of Health, State of Western Australia & Curtin University of Technology 2008
SM	Self-management
WA Health	Western Australia Department of Health

8. Appendix

Appendix 1: FlindersTM Program

The FlindersTM Program chronic care philosophy and tools present an assessment, planning and motivational process which has been applied to chronic medical or mental conditions and co-morbidities.

The seven Principles of Self-Management refers to the capacity of individuals to:

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
7. Have confidence, access and the ability to use support services.

Reference: <http://www.flinders.edu.au/medicine/sites/fhbhru/self-management.cfm>



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