Exam notes HNN319

Chronic illness:

- Chronic duration of 3+ months. Impacts upon a person's physical capabilities
- Ongoing adaptation is required by pt + families to deal with the changes of illness

Models of chronic disease management:

Wagners Chronic care model

- Implementing person centered care approach
- All stakeholders know their roles and work towards a common goal (more united towards 1st world country health services) Incorporating everyone (doctors, nurses, pt, communities etc)
- Self care = important aspect in model
- Nurses role: assist pts to become empowered set goals

Innovative care for chronic conditions framework

- More population health view focus' on targeting whole population rather than individual
- More preventative based approach and more flexible + adaptable to any healthcare context (can be applied in any world health setting)
- Where Wagners model does not fit
- Requires integration of all healthcare systems
- Based on 6 principles:
 - Evidence based decision making
 - o Population health approach
 - o Focus on prevention
 - Quality focus
 - Integration
 - Flexibility + adaptability
- E.g. swap it don't stop it program targets whole population

Shifting perspectives model

- Views chronic illness as ongoing, continually shifting process where people experience a complex dialectic between themselves
- Cycle of illness vs. wellness at the forefront of the pts mind. Can affect the ability to achieve goals depending on where they are in the cycle.
- Illness in foreground times of being unwell, lots of appts
- Wellness in foreground: pt is not ill, can concentrate on everyday life

Heart Failure:

Definition: Heart has difficulty pumping blood efficiently throughout body OR heart does not pump as much as body needs

- Cardiac output (Co): total amount of blood pumped every minute normal = 5L/min
- Stroke volume: amount of blood pumped out every beat
- SV x HR = CO
- With heart failure SV ↓ + CO ↓

Systolic HF: heart can't pump blood with enough force