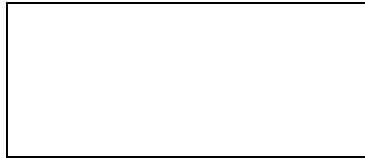
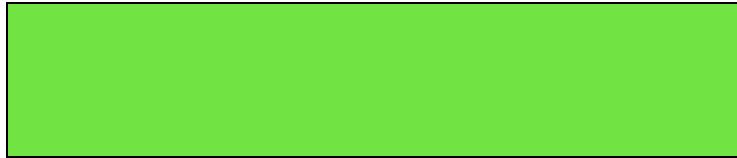


Mission	A systems approach to provide integrated chronic disease prevention and management services		
	Roles and Responsibilities		
Components	Community Capacity and Integration	Individual and Family Capacity	Health Care Organizations
Health Promotion Is everyone –people, communities and governments – working together to build a lifetime of good health for all. It is bold, collective action to create healthier homes, schools, workplaces and communities	Leadership role in health promotion awareness and education activities Organize skill building opportunities Create environmental supports – healthy homes, schools, workplaces and eating establishments Provide consumers with clean water and air Create safe communities Engage in establishing healthy public policy Support healthy community development Enhance and build social capital Advocacy to address the social determinants of health issues Participate in participatory action research	Engaged in healthy lifestyle behaviours Engage in low risk behaviours Participate and promote awareness and education opportunities Experience skill building opportunities Remain socially connected within the community Community champion of wellness Consumers involved in wellness planning Participate in participatory action research	Collaborates with the community to develop a system of promoting health and preventing illness, disease and injury Support community health promotion awareness and education activities Offer skill building opportunities Ensure consumers have clean water and air Engage with the community to develop environmental supports for healthy lifestyles Provide resources to support creating healthy environmental supports – healthy homes, schools and workplaces, eating establishments and safe communities Advocate for healthy public policy development to address the social determinants of health issues Create opportunities for knowledge transfer amongst health care professionals Play an active role to establish healthy “health care organization” workplaces Leadership role in research, surveillance and evaluation
Primary Prevention Targets people who are healthy and those who are at risk of developing health problems	Provide programs to address social determinants of health Participate in determining/identifying community population health needs Organize and promote strategies to improve determinants of health Engage consumers in disease prevention strategy	Work towards establishing healthy lifestyle behaviours Engage in behaviour modification programs Attend self management education opportunities Consumers involved in wellness planning Participants involved in research studies	Provide immunization clinical services Promotes and provide screening for early detection of disease Provide behaviour modification programs Provide group/individual assessment and teaching

	<p>development</p> <p>Organize and promote opportunities for knowledge and skill development for residents in healthy lifestyle strategies, self-care, behaviour modification – i.e. libraries and health care providers offering information resources</p> <p>Promote use of evidence-based information resources</p> <p>Organize and promote strategies supporting healthy lifestyles, self-care – i.e. walking programs in the workplace, for seniors; healthy meal choices for school-age children</p> <p>Target risk reduction strategies for diseases prevalent within community population</p> <p>Organize and promote screening programs</p> <p>Foster and build partnerships to support community primary prevention strategies</p>	<p>Participate in screening and risk identification opportunities</p>	<p>Offer multidisciplinary programming i.e. Stroke strategy/ Diabetes strategy initiatives</p> <p>Provide injury prevention initiatives</p> <p>Provide episodic care</p> <p>Health care providers are incorporating health lifestyle teaching</p> <p>Leadership role in research, surveillance and evaluation</p>
<p>Secondary Prevention</p> <p>Targets people who are in the early stages of disease</p> <p>Care management</p> <p>Goal: To move consumers to optimal well-being</p>	<p>Engage consumers in disease management planning and strategy development</p> <p>Organize and promote opportunities for knowledge and skill development for residents in chronic disease self-management geared to diseases prevalent within the community</p> <p>Educate consumers on expected impact of secondary prevention strategies on individual wellness and community health care system</p> <ul style="list-style-type: none"> - individual – fewer acute exacerbations - health care system – fewer emergency visits due to acute exacerbations <p>Promote, engage in and support development of disease specific education and management strategies and programs – i.e. diabetes, CV, stroke</p> <p>Organize and promote strategies supporting disease self-management – i.e. walking programs, restaurants offering heart healthy choices</p> <p>Educate consumers in use of community secondary</p>	<p>Attend self-management education and behaviour modification opportunities</p> <p>Where appropriate, attend disease specific secondary prevention programming</p> <p>Seek out quality, evidence-based disease management information</p> <p>Client, family, caregiver participate in care planning to optimize well-being and reduce complications</p> <p>Advocate for self/client in care planning with health providers</p> <p>Utilize social support and health resources as planned/needed</p>	<p>Provide diagnosis</p> <p>Develop early intervention plan of care to help minimize the negative impacts and prevent disease progression</p> <p>Provide programs such as Cardiac Rehab program, Stroke clinic, Diabetes Clinics</p> <p>Provide active follow up</p> <p>Consumers receive multidisciplinary care that is high quality and easily accessible</p>



prevention strategies/programming



Tertiary Prevention

Case Management
(highly complex patients)

Educate clients/patients in use of health system – i.e. expectations at tertiary level and movement between secondary and tertiary

Work with client/patient to plan for future needs – i.e. supportive care, end of life planning

Promote and support strategies (when appropriate) to integrate the client/patient back into the community using linkages and defined roles and responsibilities

Promote and support use of system navigation role

Develop caregiver support strategies including education, communication, support and respite

Optimize functioning with limitations of conditions/diseases and reduce complications

Client, family, caregiver participate in care planning anticipating future needs

Client, family, caregiver engage/utilize system navigation, social support and health resources as planned/needed/required

Family/caregiver participate in caregiver support opportunities

Provide a set of measure to reduce the impact of the disease

Prevent worsening of the disease avoid acute episodes and complications, and to maximize the consumers health and quality of life.

Provide supportive care

Provide palliative/end-of-life- care