

# Supporting anticipatory care for long term conditions



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## Supporting Anticipatory Care for Long Term Conditions Management

### Introduction

Better management of individuals with long-term health problems has been an important priority of the Scottish government since the beginning. This is because Scotland has been under influence of alcohol misuse, smoking, physical idleness and poor dietary habits. All these are the critical risk factors for a number of chronic diseases like, cardiovascular disease, diabetes, arthritis, hypertension, dementia and chronic lung disease. Moreover, ageing population is also increasing at an unprecedented rate and is constantly under the risk of developing several of these chronic conditions simultaneously; thus necessitating support and care (Epping, Pruitt, Bengoa, & Wagner, 2004). The effect of multi-morbidity is intense as well. Individuals with numerous long-term conditions have noticeably pitiable quality of life, financial issues, and bad clinical outcomes, in addition to staying longer at hospitals (Department of Health, 2005).

A long term condition is basically the one that is unable to cure, remains for a longer duration of time, for instant, more than a year and have an effect on any aspect of a human's life. It also needs ongoing medical help and restricts a person for what he/she can do. In Scotland, approximately 2 million people have either one or more long term health problems (N. H. S. Scotland, 2010). This demonstrates considerable work is needed to fulfil the requirement of people having long term conditions and tackle the broader determinants of health like standard of living, behaviours, attitude and socioeconomic deficit.

With the present transformed political attention on social and health care, there is a prospect in the Scotland to redefine the framework of care. The nature of health care is also transforming; the focus is towards a system that not only considers physical health of public but also wellbeing and overall health, and which distinguishes public as co-makers of their health and its care. The endeavour is showed in the idea for services which emphasises on capacities and management of health problems and recognises notions like optimism, social inclusion, happiness, revival, and autonomy (N. H. S. Scotland, 2010). Anticipatory care planning comes true to such efforts because it involves the personal outcomes to health care planning in society care. It is generally applied to help people living with any long term health problem to prepare for an anticipated change in health condition (Baker, Leak, Ritchie, Lee, & Fielding, 2012). It also includes health enhancement and living healthy. Overall, vision of anticipatory care planning to reduce acute hospital admission, effectively manage chronic condition, acknowledged and empowered health education and provides social care services. Thus, in order to provide practical means for elucidating, detecting and improving patient outcome, the health model and theories can be used and these include the Mutual Care Model for Long Term Condition (CEL 23, 2009), the House of Care model (Coulter, Roberts, & Dixon, 2013) and the Chronic Care Model (Wagner, 2001). Though the description of all these models varies yet all focus on one point i. e. betterment of patients. They also offer vision for professionals in offering quality care not only for patients, but also for their families (Eaton et al, 2015).

The aim of this paper is to examine the existing approaches for providing and supporting anticipatory care for proper management of long term conditions. It will use and highlight different care models, policies and strategies applied by the Scottish government in providing anticipatory care.

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