Airedale NHS
NHS Foundation Trust

Patient engagement project

Cardiac rehabilitation telephone interviews

Background

The Cardiac Rehabilitation Team support people and their families following recent heart attacks or expected cardiac interventions. The team compromises of cardiac rehab specialist nurses, physiotherapists, a healthcare support worker and administration support. The team support patients both in hospital and in their own homes. They offer individualised care planning, comprising of specialist advice, symptom management, education sessions and an exercise programme.

The aim of the exercise programme element of the rehab service is to improve overall health and wellbeing and reduces the risk of future heart problems. The exercise programmes currently run at three venues; Airedale Hospital, Keighley Leisure Centre, and in Skipton at Broughton Road Community Centre.

In addition to the exercise classes at the hospital or in a community setting, there is the option of a home based exercise programme. This can be organised either by use of an exercise DVD specifically for heart patients or the heart manual which is a 6 week self-led programme which is supported by a cardiac rehab specialist nurse.

In February 2017 alongside gaining patient stories the cardiac rehab service organised a patient focus group to find out more about patients' experiences of the exercise programme in particular. In addition the team hoped to gain further insight into why some patients *decline* the exercise element of the service.

There are many research articles that discuss the barriers to cardiac rehab and the team hoped to learn whether locally there were similarities. Many cardiac rehab services discharge their patients if they do not attend the cardiac rehab exercise element, Airedale cardiac rehab services offers an individualised plan that may or may not include a set organised exercise programme. The team

also wanted to learn whether despite not attending the exercise programme patients achieved their goals and were happy with their recovery.

Methodology

11 cardiac rehab patients were contacted by telephone that had been discharged from the cardiac rehab service within the period of April 2017 to September 2017. All of these patients declined participation in the exercise programme and were consented to take part in the telephone questionnaire on discharge.

Members of the cardiac rehab team that were not known to the patients contacted the patient and asked them questions regarding why they chose not to attend the class.

Feedback and key themes

- Transport may have been an issue for 2 patients.
- 1 patient would have preferred evening sessions, 10 patients didn't state timing of the class as an issue.
- 3 patients felt they were active enough at work
- 2 patients couldn't commit to sessions as too busy and one of which lived away for 6 months of the year.
- 1 patient was a carer for his wife and felt he couldn't commit to the programme.
- 1 patient had an infection and wasn't well enough to attend.
- 1 patient had done the exercise programme before and didn't see the benefit.
- 3 patients mentioned that they wouldn't have wanted to pay for parking if attending the hospital class.
- All patients were happy with their recovery.
- 10 patients could not suggest anything we could have offered differently, one would have considered a home exercise programme.

Additional comments

"It was my second time round; I knew what it was all about this time and felt I didn't need to attend the exercise classes because I am more active."

“I couldn’t see the benefit to me” (when asked if the benefits were explained would this have made any difference?) “I know the benefits but thought I could do it myself.”

When asked if he would have considered a home based exercise programme “Yes I suppose I would have considered that, I would have probably stuck at that and liked to have had an assessment at the end.”

“Not the reason I didn’t attend but parking charges at the hospital would definitely have put me off, I have spent too much already!”

“I have recovered well and I am back at work.”

“100% recovered. “

“I am more or less back to normal, I am taking things easy I have just had my cataracts done and I am feeling fine. I am happy with my recovery.”

“Yes I am happy with my recovery, I am walking more than 30 minutes into town every day, and I do the stairs in bad weather several times.”

Discussion

Although a small sample of patients were interviewed, all were happy with their recovery and achieved their own goals. Whilst clinically we believe the exercise programme improves outcomes, this may not necessarily be in line with a patient’s own preference.

Many patients continue to exercise and achieve what they hope to without the exercise programme. The findings may support the team’s aims which are to have a role to play in aiding these patients to achieve their goals despite not attending a prescribed programme. Explaining the benefits of exercise to patients in a way that is meaningful to their lifestyles and working with them to help increase motivation and self-care skills.

It may be worth considering whether we can extend the use of home based exercise programmes as some of the barriers to exercise offered may be alleviated such as transport, parking and work. Exploring other methods to improve motivation to exercise more such as pedometers, mobile apps or community walking groups are some initiatives that the team are exploring.

Recommendations:

- To explore with the cardiac rehab team including the physiotherapy team leader further development of the home based exercise programme.
- Continue to encourage alternative exercise options to those patients that decline a set programme.
- To consider alternative aids to increase motivation such as mobile apps or pedometers.
- To continue to support our patients in a manner that is meaningful to them.
- To share this report with relevant people (including stakeholders, Multi Disciplinary Team, cardiac rehabilitation service webpage).