



Cardiac Rehab In My Pocket

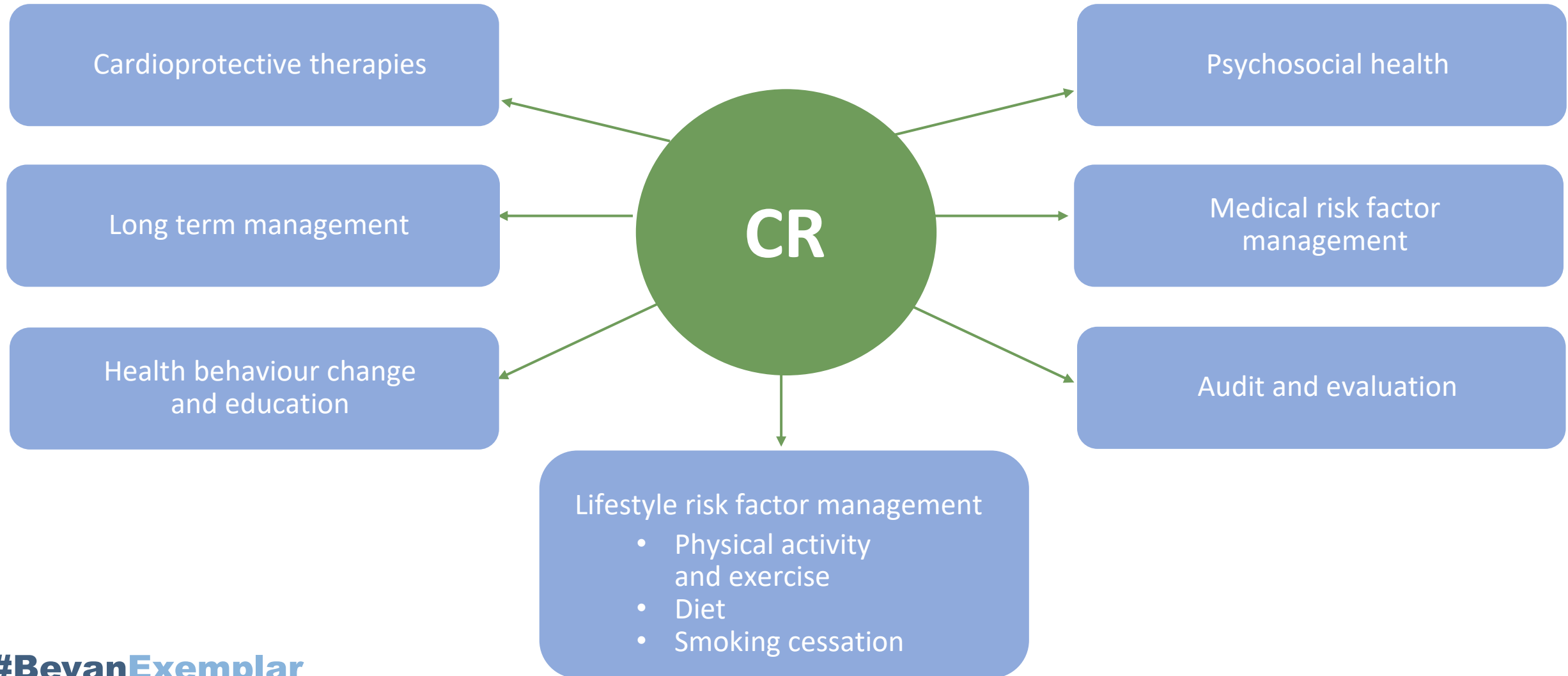
Drew Scard

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Components of Cardiac Rehabilitation



The Challenge

- Roughly 8,500 people are referred to CR each year in Wales.
- 50-60% of these complete CR (NACR report 2019).
- Currently more people referred than spaces on F2F programs.
- No money for extra staff to provide more F2F slots.
- Service provision varies drastically across each Health Board.
- NHS England have announced an ambitious target that they want to achieve 85% of eligible patients completing CR.
- We expect Wales to announce a similar target soon.
- So the challenge is how do we manage more patients in a service that is already at capacity?

Cardiac Rehabilitation - Benefits

“Cardiac rehab saves lives,” says Professor Patrick Doherty, Director of the National Audit for Cardiac Rehabilitation (NACR). “People who complete cardiac rehab live longer and have a better quality of life.”

Patients who participate in Cardiac Rehab are likely to experience:

- 26% reduced cardiovascular mortality
- 18% reduced hospital admissions
- 13% reduced all-cause mortality
- Reduced risk of further events
- Improved quality of life

Cardiac rehab saves lives- so why do half of patients fail to show up? **Siobhan Chan 2018**



Service Shutdown Limitations

Covid-19 changed CR drastically

- Face to face delivery wasn't allowed.
- Health system stretched.
- Limited Staffing in many areas due to redeployment.
- Limited resources to send to patients.
- Patients unable to get effective CR that helps to boost confidence.
- Patients scared to come into the care setting.

The pandemic did however start the process of CR staff becoming more inventive and looking for solutions that would move the service forward.

Why is this a problem

Patients who do not attend Cardiac Rehab are more likely to:

- Suffer major CV events
- Repeat admissions to hospital
- Increase their cardiovascular mortality

If access to Cardiac Rehab is harder, more people will be impacted.

What are we looking to achieve?

Aims:-

- Easy Access to CR materials for more patients.
- Increase Uptake of CR for eligible patients.
- Encourage better self-management of their condition.
- Menu based approach to care.
- Allow staff to manage the new virtual workload more efficiently.
- Manage majority of virtual patients at a glance.
- Reduce risk of re-admission from repeated events.
- Embrace modern technologies into our treatment plan.

Changes made to date...

To address the restrictions imposed by Covid, we created Virtual Cardiac Rehab Program.

ABUHB Virtual Program



- Private patient Facebook page
- Exercise and Education YouTube Videos
- Weekly Virtual Follow Up Calls for patient care
- Content that Cardiac Rehab staff were confident to give to patients
- Use of YouTube videos limited to more computer literate patients
- YouTube videos hidden due to not meeting Welsh Language standards

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Virtual resources feedback

ABUHB conducted a patient survey to help discover the best method of delivering their virtual resources.



Patient Feedback

- Over 80% patients surveyed would use Internet to access CR material
- 70% people used Facebook
- Over 90% have a smartphone/device
- Over 90 % felt an App would make accessing/managing their Cardiac rehab simpler than finding resources online or through Facebook.

BCUHB also produced some videos and, after discussions with them, a working group of CR staff across Wales was formed to look at the next steps for virtual resources.

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New opportunities

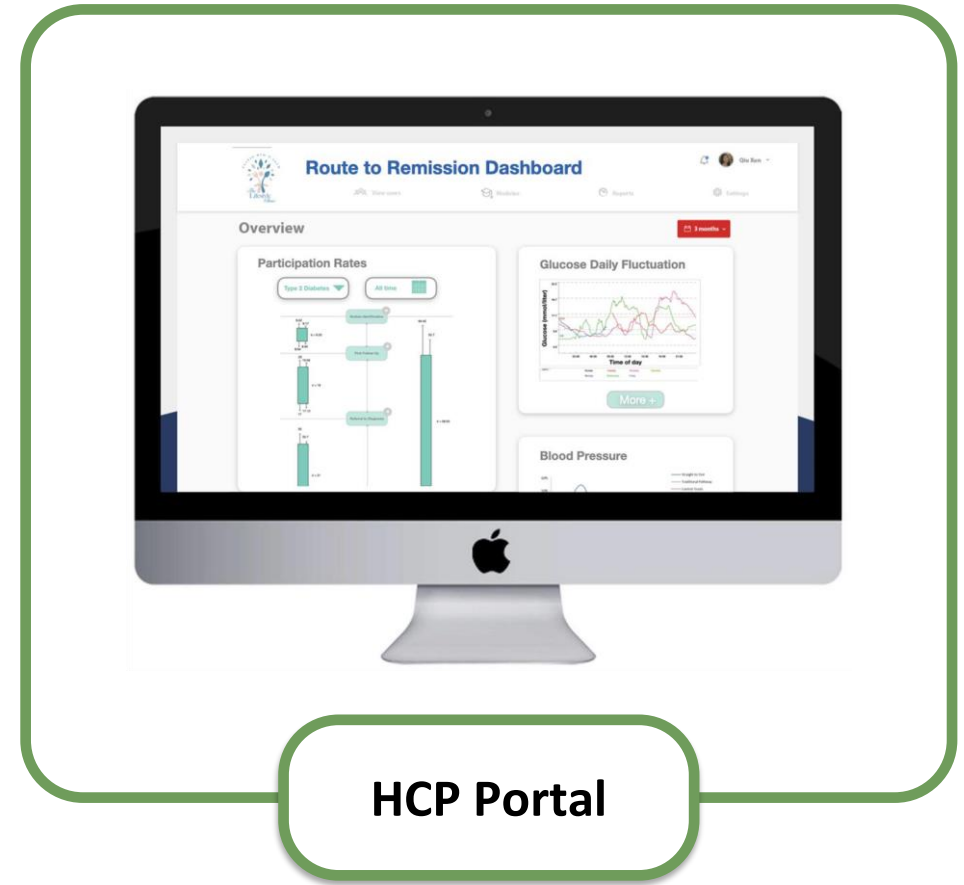
There is evidence to suggest that Virtual delivery has no detrimental impact on clinical or quality of life outcomes. This has been seen in studies from Lear, Singer et al. 2014 and Dalal, Doherty et al. 2021.

- BACPR Guidelines 2017 State there is data supporting the benefits of different modes of CR delivery with no apparent difference in either clinical or quality of life outcomes when comparing supervised centre-based CR with that undertaken in a domestic environment, nor any major variation in healthcare costs.
- This should allow CPRPs to be more flexible in their CR offer and to be more innovative when attempting to attract either new or hitherto hard to reach “in-scope” groups.



The new solution

A platform designed for Patients and HCPs to deliver a Virtual Rehab Clinic



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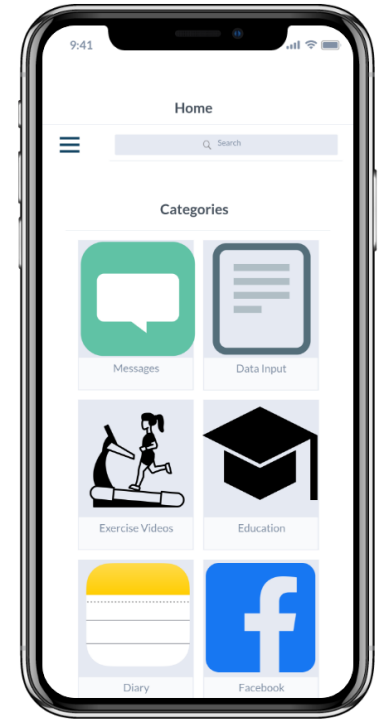
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Patient App

- Easy Access to CR materials for more patients at their convenience.
- 2 way messaging with their CR team (this feature locks after discharge).
- Notifications.
- Encourage better self-management of their condition.
- Compliment their F2F program enabling them to get extra exercise sessions.
- Multi Lingual-Initially English and Welsh but options to expand.
- Continued access to the exercise and education material after discharge to keep managing their condition after rehab.

HCP portal

- Enrol and discharge patients.
- Control over app features for different patients, lock certain exercise videos deemed not appropriate, discharge removes 2 way messaging.
- Send notifications to patients to view videos, complete questionnaires etc.
- See what patients have accessed.
- Automatically see daily observations outside recommended levels.
- Manage majority of patients at a glance.



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Testing

3 stage trial in ABUHB

Stage 1:- Bevan Exemplar Cohort 7 project

- Background work with working group of CR staff across Wales.
- Creation and trial of prototype for functionality and content.
- Feedback from staff and patients via questionnaire.

Stage 2:-

- Trial of downloadable app for patients to use in ABUHB-subject to funding .
- Some features locked (like messaging).
- This trial will take place while the staff hub goes through ABUHB to be accepted and implemented into DSPP system.
- Feedback via questionnaire.

Stage 3:-

- Full trial of App and staff hub in ABUHB.
- Feedback via questionnaire.

Feedback will enable changes to be made before launching across Wales.

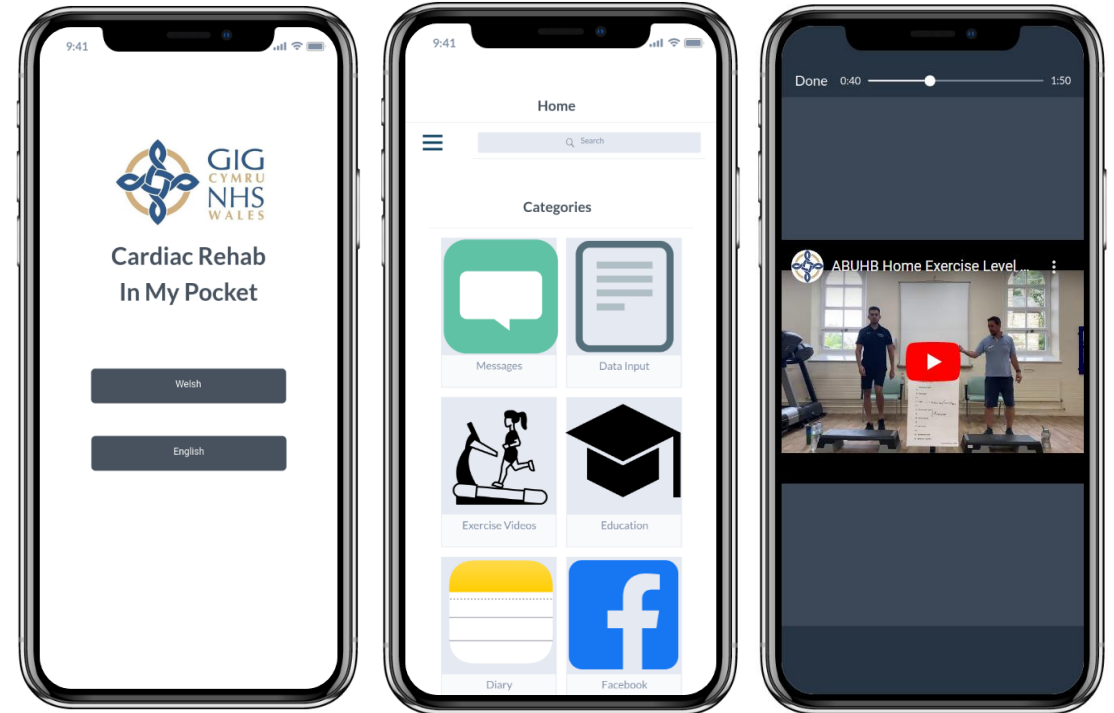
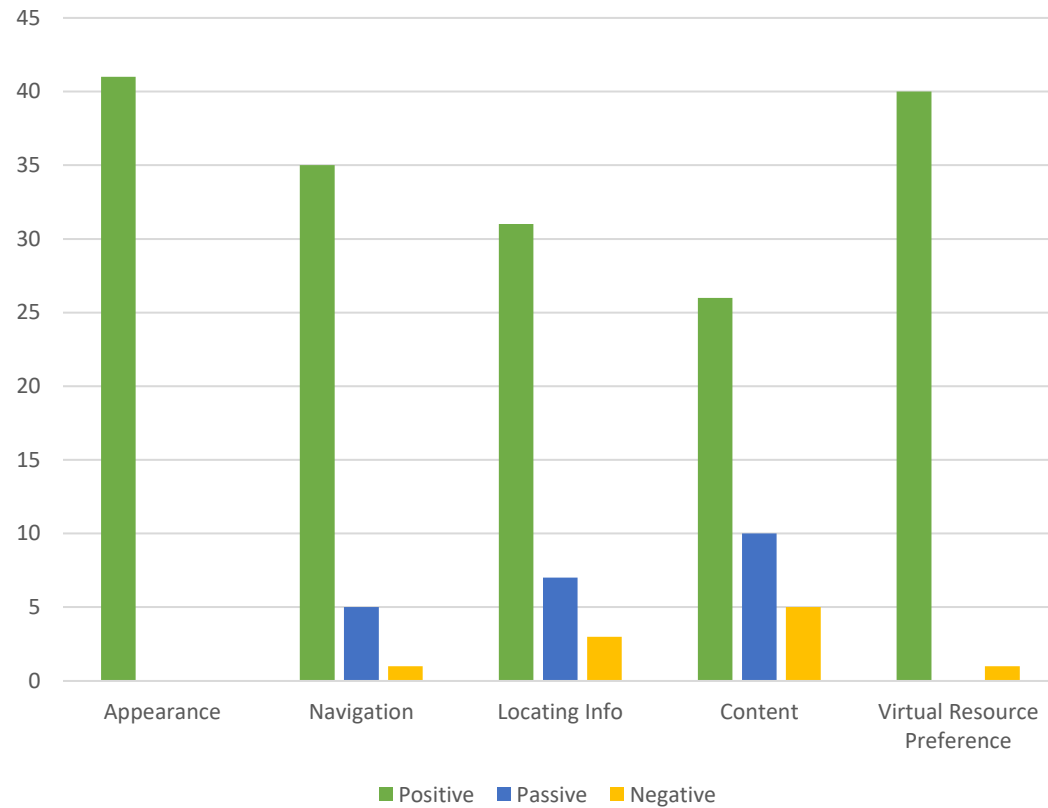


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Stage 1-Completed as part of the Bevan Project

Prototype Feedback



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Next steps



As of Dec 2022 the project has been granted funding through AgorIP to create a working/downloadable prototype which will allow us to move to testing stage 2.

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It does not matter who you are, your idea could change health care

Think big

Gain support from your employer and colleagues

Utilise services available to you-like the Bevan Exemplars

Accept that there will be ups and downs

Keep pushing towards your goal

Show everyone your passion for your project

Thank You

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