

Case Study: Cardiac Rehabilitation Outpatient Programme Royal Stoke University Hospital and County Hospital

Introduction

The Cardiac Rehabilitation Department at University Hospitals of North Midlands is an outpatient programme serving patients throughout North Staffordshire. Patients comprise a number of groups:

- Post heart surgery
- Post major event, e.g. heart attack
- Post day-procedure e.g. stent/pacemaker fitting
- Heart failure patients
- Patients with heart disease
- Patients referred directly via a consultant or GP

The team, recognised nationally by the Patient Safety Awards, comprises nurses, physiotherapists and exercise physiologists, assisted by pharmacists, doctors, consultants and administration.

Service Delivery- Traditional Model

Group rehabilitation sessions:

Pre-COVID-19, clinicians assessed patients from all patient groups defined above during face-to-face meetings. Those deemed suitable were offered group cardiac rehabilitation sessions, which took place at various community venues. The extent of the rehabilitation service was dependent on the number of clinicians, the availability of suitable venues and the capacity of each venue.

Group sessions could often exclude people with work or care commitments or those physically unable to get to the venue. By definition, they were tailored to a group of people, rather than the individual.

Social Media:

The department recognised the constraints of group sessions and produced educational material for Twitter, Facebook and YouTube, in an effort to be more inclusive. However, they found that using social media was a scattergun solution and had a number of shortfalls:

- How could they know if their patients were accessing materials?
 - How could they offer the right content to individual patients, at the right time?
 - How could they monitor week by week improvements?
 - How could they reach patients who did not have or want social media accounts?
- How could they obtain good patient feedback for improving educational materials?

The team concluded that they needed to introduce a digital delivery model where individual patients could access the right content for them, delivering tailored materials directly to each patient.

Then COVID-19 hit.

Resources:

The Cardiac Rehab Team quickly offered all patients an at-home service, but without the use of any digital system. This at-home offering went from 10% to 100% capacity immediately, putting enormous pressure on the Administration Team, who needed to assemble information packs and send materials to individual patients by post.

How does Recap Health work?

Patients often lack good information about their diagnosis, treatment options and support needs. This affects their ability to cope well after discharge from hospital. Clinicians may provide some basic information to their patients, but there is no way of assessing whether they have viewed the materials or how useful they have been.

Recap Health addresses both these issues. Through a simple to use digital platform, clinicians share relevant educational information (videos, links to trusted third party web pages and leaflets), with their patients. Because it's digital, they can easily see whether the information has been viewed by each patient and what their patients say about the usefulness of the materials they have received.

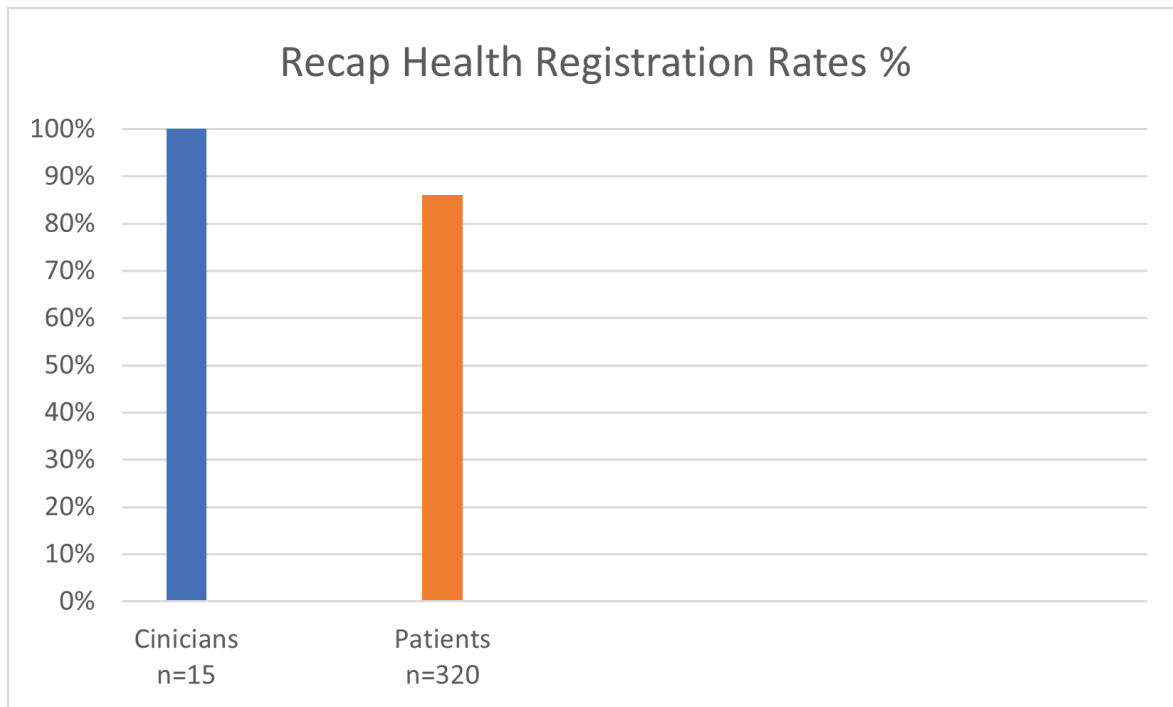
Methodology

It quickly became clear that the traditional service model was unsustainable. Luckily, UHNM had started to use Recap Health with heart failure patients and the Cardiac Rehab Team was made aware of this digital solution and how it could help them move to a digital-first model.

The Team quickly loaded 39 own-produced rehabilitation videos into the Recap Health library, covering various seated, standing and strength exercises.

“The information provided can be tailored to the individual and can cover a wide variety of topics, not only exercise, but nutritional advice, mindfulness and wellbeing and also information on different cardiac conditions. The patient can access the information at a time that suits them. It reinforces what was covered during the clinic and they can access it as often as they feel necessary.”

*Catherine Regan, Staff Nurse in Cardiac Rehabilitation
Royal Stoke University Hospital, UHNM*



- 91% of patients registered to use Recap Health say it is very useful or useful
- 93% rate the content sent via Recap Health to be very useful or useful

Clinicians conducted a telephone or video consultation to assess the needs of each patient, before inviting them to register on the Recap Health digital platform to access their personal exercise plans, with the correct exercise intensity. Patients could log on to the platform whenever they wished. Clinicians could see which patients had accessed their content and how frequently. They followed up with telephone calls to determine whether patients were ready for new content.

“Patients have access to our information as soon as the clinic has finished, so they can look at content whilst the clinic conversations are fresh in their minds. Before any follow-up calls with the patient, I can check Recap Health to see which materials the patient has accessed and tailor further information to help that patient progress through their cardiac rehabilitation journey.”

*Catherine Regan, Staff Nurse in Cardiac Rehabilitation
Royal Stoke University Hospital, UHNM*

Results

Cost savings:

Annual figures projected from savings already experienced during the first six months:

• Venue costs	£ 14,000
• Postage/stationery	£ 3,200
• Clinician travelling expenses	<u>£ 3,000</u>
TOTAL	<u>£20,200</u>

Further cost savings:

In addition, work is now being undertaken on an impact analysis on patient groups to assess whether using Recap Health has positively affected readmission rates and therefore whether further cost savings can be made.

Reinvestment into the service:

Approximately **£17,500** per annum for clinician time previously spent travelling to/from venues has been reinvested into direct patient care and service provision.

“Prior to implementing this approach 12 clinicians would need to travel across 12 sites within their working week. Offering the rehabilitation model via the Recap Health digital platform has saved an average of 24 hours per week in clinician travel. This has afforded clinical staff greater flexibility, improved work-life balance, increased patient interactions and the curation and production of further online content as necessary.”

*Sonya Lockett, UHNM Cardiac Rehabilitation Service Lead
Royal Stoke University Hospital, UHNM*

Effectiveness:

The scattergun approach of using social media platforms has been eliminated.

- Clinicians could send the right information to the right patient at the right time.
- Patient feedback has provided clinicians with access to data that was previously unavailable and they can use it to make decisions about content.

Resources:

Using Recap Health to deliver targeted information to patients, has meant that no additional administrative resources were needed, which was the case with a manual at-home service delivery. This has enabled the Administration Team to concentrate on delivering their normal duties more effectively.

Group rehabilitation sessions:

Moving to a digital-first service with Recap Health removed the barriers that existed in the traditional service delivery model comprising local group sessions:

- More people have access as places are not limited by locality or venue capacity.
- Exercise plans are individually targeted.
- Content can be reviewed and improved by assessing patient feedback.
- Patients access their programme at a time suitable for them and exercise in the comfort of their own home

“Receiving patient feedback is also useful and can be used to improve the information we are providing. Positive feedback reinforces the knowledge that patients find Recap Health useful, and we can also inform new patients of this.”

*Catherine Regan, Staff Nurse in Cardiac Rehabilitation
Royal Stoke University Hospital, UHNM*

“RECAP is full of relevant information, I’ve found it really helpful. Full marks to the team.”

“It keeps me on track and motivated. Offering me reassurance and answering questions about my present condition whilst recovering.”

“The information given is very good, the videos help me to understand things better, are easy to follow and make things clearer.”

“For the first 3-4 weeks of my recovery it is very reassuring to have somewhere to look and now I’m back to normal I can still look back on them if required.”

“Simply your app is superb. The exercise programmes are extremely useful. It is a credit to the NHS for what you are providing.”

Conclusion

Recap Health has enabled the Cardiac Rehabilitation Team to offer a more personalised and convenient service to their patients. It has saved money, freed up clinician time, and produced invaluable patient feedback about the exercises provided and the level of care they feel they have received from the team.

Going forward, the Cardiac Rehabilitation Team intends to use Recap Health to enhance their service offering and extend their reach within the community:

“Post-pandemic we envisage a blended approach to rehabilitation delivery, whereby patients can attend face-to-face sessions and/or complete a comprehensive independent programme. This model has been facilitated by the allocation of content through Recap Health, affording patients greater choice and additional access.”

*Sonya Lockett, UHNM Cardiac Rehabilitation Service Lead
Royal Stoke University Hospital, UHNM*

Published by Recap Health, April 2021