

Community Cardiac Rehab Update

NHS Wandsworth



‘LOVE YOUR HEART’ PROGRAMME

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COMMUNITY CARDIAC REHAB
COORDINATOR**

INTRODUCTION



- Nadia Dallsingh

Community Cardiac Rehab Coordinator commenced employment with WPCT since 3rd August 2010

- Sally Finlay

Community Cardiac Rehab Chartered Physiotherapist commenced employment with WPCT since 7th September 2010

Setting Up CR



- During the months of August to November 2010
- Induction
- Working with Project Manager
- Meeting Commissioners
- Meeting members of MDT
- Meeting other allied health professionals
- Meeting with DC Leisure managers
- Developing policies and protocols for CR
- Liaising with other CR Programmes in SW London ie SGH, QMH, GSTT, Surbiton Hospital, C & W, Teddington Memorial Hospital

Setting Up CR



- Compiling brochures and flyers
- Advertising on intranet and internet
- GP cluster group meetings
- Liaising with QMH, SGH, GSTT, C & W and other London Hospitals
- Organising equipment for CR
- Recruiting patients
- BACR training for Physio

DC Leisure Centres



- **Latchmere**

Ready to go Oct/Nov 2010
but due to
refurbishments did not
start until mid January
2010

- **Wandle**

Ready to go Oct/Nov 2010
but due to roof
replacement gym not
available until end
January 2010

Recruiting Patients



- From August to December patient referrals were very few and far between
- First referral from GSTT in October 2009
- Only 10 referrals from October to December 2009
- 16 referrals from Jan to Feb 2010
- 34 referrals from March to May 2010
- Referrals picked up after CR process mapping in March/April 2010
- Due to unavailability of both gyms some patients were given a home based exercise programme in the interim to phase 3 in Jan 2010

PR



- Advertising, although brochure was complete these were not disseminated to GP's and hospitals due to impending externalisation with SGH
- Flyers were created and disseminated widespread
- GP cluster group meetings attended
- CR programme publicised on Intranet and Internet

Barriers and Challenges



- Advertising
- Referrals were slow in the early stages and not all patients referred were suitable for CR
- Slow recruitment of patients
- Non compliance and DNA's
- Language barriers
- Illiteracy
- Resources ie Heart Manual was not adaptable to some patients (wordy and lengthy)

Barriers and Challenges



- 'Road to Recovery' programme not available until 23rd April 2010 and not all patients owned a dvd player or cd player
- Supervision of home based programme particularly for HF patients
- Patients meet the criteria for CR but due to other factors ie physical health, mental health, transport, locality
- Cover for CR sessions during absences of a member of the team
- Small group size, maximum to date are 8 patients at both gyms and have the capacity for 10 patients (rolling programme)

Barriers and Challenges



- Capturing the data done manually until May 2010
- Frameworki for CR not available until May 2010
- Phase 2, phase 3 exercise sessions and follow up appointments carried out by two members of staff
- Time for backlog of data input onto Frameworki and NACR databases
- No phase 4 sessions at Wandle
- Rotational physio – no cross over, induction and familiarisation of CR, BACR training, ILS training etc
- ICD and HF patients

Conclusion



- Those patients who are dedicated and have attended phase 3 have enjoyed it and now attending phase iv at Latchmere LC, Tooting LC and Putney LC and will be followed up at 3-6months and 12 months respectively
- Empowerment of patients to attend gym sessions
- Scope for cover for CR during leave and absences
- BACR training for CR staff
- Uptake of more referrals by strategic advertising
- Externalisation with SGH will facilitate early contact and identification of suitable patients and provide cover for CR services in SWL
- Staff to supervise home base programme
- Percentages of patients referred, recruited and completed CR will now be easily accessible due to up and running Frameworki

Thank You



- Questions?