



Name of project: Virtual lifestyle talk for cardiac rehabilitation

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Kent Community Health
NHS Foundation Trust

What was our aim?

To develop and implement a virtual, interactive cardiac rehabilitation lifestyle education programme that is accessible to 100 per cent of cardiac rehabilitation patients by May 2021.

To produce standardised lifestyle education talks via a virtual platform for cardiac rehabilitation patients to allow for an alternative to face-to-face during and following the COVID-19 pandemic, to increase accessibility for all.

Why is it important to service users and carers?

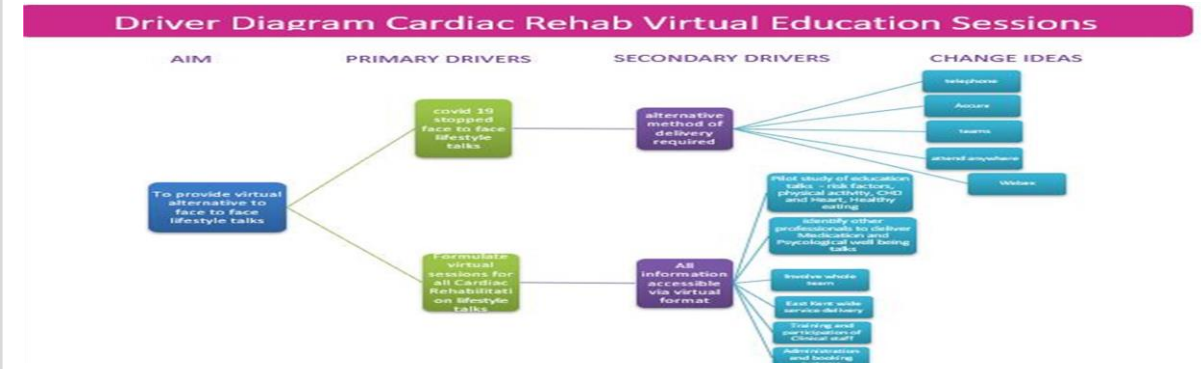
The lifestyle talks were traditionally provided face-to-face in group sessions before COVID-19. These needed to be delivered via a virtual platform, to increase access for service users during the pandemic.

The virtual lifestyle education falls under one of the core components that our service adheres to, as stated by the British Association for Cardiovascular Prevention and Rehabilitation Cardiac Disease and Rehabilitation (BACPR) Standards and Core Components 2017 (edition three), part of which is Health Behaviour Change and Education.

Kabboul et al (2018) constructed a comparative review of the core components of cardiac rehabilitation. They recommended that the greater number of components which could be included within the programme (including stress management, smoking cessation etc), the greater reduction in mortality and/or morbidity.

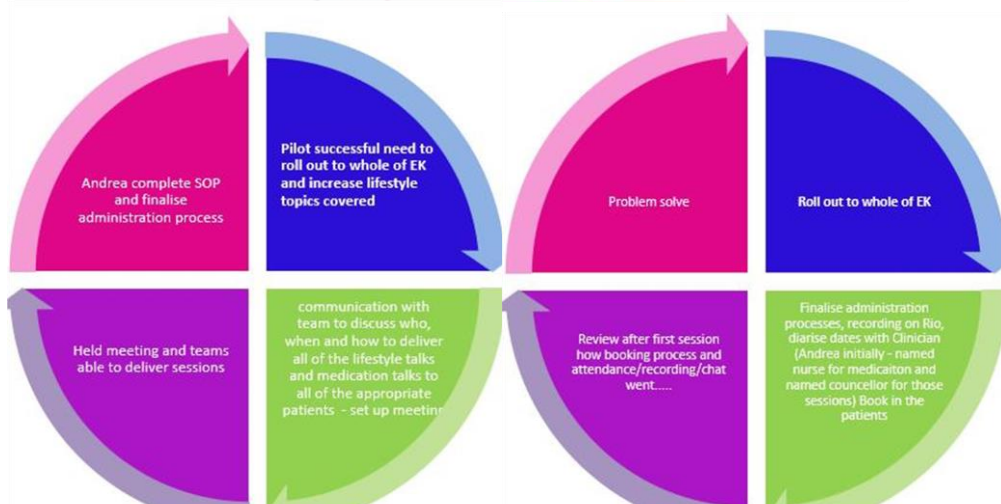
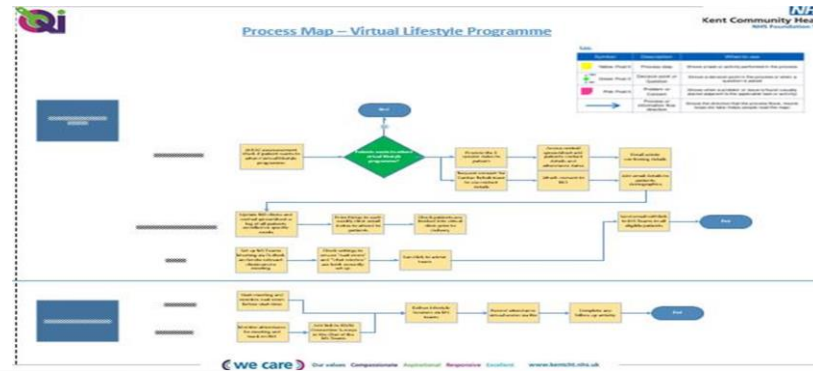
Ideas and tests of change

We used the driver diagram to capture all change ideas. The service is a multidisciplinary team across east Kent.



The tools we used

We used a driver diagram, stakeholder mapping, process mapping and PDSA cycles.



Results/How did we do

Microsoft Teams was identified as the virtual platform to deliver the talks, due to the accessibility and ease of use to participants. Microsoft Teams provides a secure system with a large capacity suitable for our delivery.

The entire Cardiac Team came onboard with the delivery of the service.

- Patients were identified and a process was followed as they came into the service for enrolling them on the seven-week course of lifestyle talks.
- A timetable was set up for 12 months to include all eligible staff to deliver talks.
- Workshops were provided to multi-disciplinary teams (MDT) to ensure all staff were confident in delivering a talk via MS Teams.
- Lifestyle talks were then rolled out across the service and went live on 6 July 2021.

To date we have completed one full cycle of lifestyle talks delivered by each speciality within the service.

Attendance for each virtual lifestyle talk has been less than originally expected. To ascertain why, a member of the administration team has contacted a selection of those who did not attend. Reasons given were:

- No access to laptop to join the talk
- Busy lifestyle
- Forgot
- Internet connection
- Fell asleep.

We did attempt feedback via Meridian questionnaires being emailed out after each talk, however, data was not easy to obtain or distinguish what was relevant to the virtual format.

What we learned and what's next

We learned that being able to offer the educational programme enhances the patients experience within the Cardiac Rehabilitation Service.

To continue to improve the education programme and make sure the service is sustainable and processes are efficient, we will:

- Look at the invitation process
- Look at the reminder process
- Invite clinicians and administration to experience sessions to increase awareness
- Re-assess staffing levels of sessions
- Explore the possibility of how to obtain feedback specific to the virtual lifestyle talks, as Meridian does not seem compatible in these circumstances
- Update the KCHFT website.

