



# FoNS Improvement Insights

## Your Past is Our Future: A Service Improvement Project Evaluating Patient Adherence to a Healthy Lifestyle Post Discharge from Cardiac Rehabilitation

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### Project background

Cardiac rehabilitation (CR) is acknowledged as a cost effective treatment for individuals with ischemic heart disease resulting in reduced morbidity and mortality. However there is little research evidence that evaluates those interventions aimed at improving adherence or compliance in CR. A restricted literature review by the CR team provided the following themes associated with long term adherence to lifestyle change; prescribed medication, dietary changes, increased physical activity and smoking cessation. These elements formed the basis for a service improvement project, evaluating individual patient adherence to a healthy lifestyle one to three years post discharge from the CR service.

### Aim and objectives of the project

The aim of the project was to evaluate patient adherence to a healthy lifestyle post discharge from cardiac rehabilitation. To achieve this aim the objectives of the project were to:

- Explore and understand current practice
- Gather and review individual patient feedback using focus groups and questionnaires
- Use evaluative data to review current service provision
- Facilitate changes to improve future care and practice

### Key activities and outcomes from the project

100 discharged patients were sent letters inviting them to a patient and relative feedback day. The focus of the day was to facilitate individuals to provide feedback on their experiences and journeys and compliance/adherence to a healthy lifestyle one to three years post CR discharge. The use of focus groups and questionnaires were employed to gather data on the day (n=55).

#### • Focus groups

Five focus groups involving patients and relatives were led by independent facilitators for approximately one hour. Discussions focused on the impact of CR post discharge, the individual experience of CR and how it could have been improved and further ideas for service improvement. Members of the CR team were not present at the focus groups.

#### • Healthy heart questionnaire

On completion of the focus groups, participants were given time to complete a healthy heart questionnaire. This focused on three main topics; activity, diet and medications that enabled an examination of the current knowledge and individual's adherence to lifestyle advice previously given during CR. Following the focus groups and questionnaires, updated CR information was provided in the form of education stands and patient information packs as part of the day.

The results from this project show that at around twelve months post discharge, individual patients appear to be adhering to the lifestyle modifications required following their cardiac event. Despite this were several areas where patient knowledge of risk factors could be improved upon e.g. misunderstandings about safe alcohol consumption, meeting intended targets for a healthy diet and the need for warm up activities prior to taking exercise.

Of a number of service improvements identified, the importance of additional psychological support for not only the patient but also their close family members was of significant concern and under represented with the current service. On recognising this, the service is currently considering a "Patient Perspective" educational talk run by former patients who will voluntarily return to the service to offer additional support to current patients. The overwhelming cooperation and feedback during this project has highlighted that although there are several areas for service improvement, there was a consensus that the current service provides a very high standard of care and support.

### Implications for practice:

- Facilitation of the patient/relative feedback day was a great success for participants and the CR service
- It would have been beneficial to have conducted a pilot study on the use of the healthy heart questionnaire as there was a variation in the numbers of completed questions in each questionnaire
- Testing individual patient knowledge whilst providing displays of CR information may have impacted on answers provided on current behaviour
- Those attending the patient/relative feedback day may have been those who have already modified their behaviour and not a true representation of all individuals who attend a CR programme

A full project report including references can be accessed from: <http://www.fons.org/library/report-details.aspx?nstd=12470>

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