

Volume 15, 27 May 2015

Publisher: Uopen Journals

URL: <http://www.ijic.org>

Cite this as: Int J Integr Care 2015; Annual Conf Suppl; [URN:NBN:NL:UI:10-1-117079](https://nbn-resolving.org/urn:nbn:nl:ui:10-1-117079)

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Poster Abstract

## One Stop Shop Health Behaviour Change Programme for Cardiac Failure Patients, Improves Overall Health and Wellbeing

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### Abstract

**An introduction:** (comprising context and problem statement) The Consultant Cardiologist highlighted that a large proportion of his patients attending the Heart Function Clinic presented with a number of modifiable risk factors, which if dealt with could improve their quality of life. He recognized that he could not treat the condition alone (medical model) but had to treat the patient as a whole (holistic model), with family involvement where possible. This involved integrated care and partnership working, (right care, by right person, at right time), with the Health and Wellbeing Advisor's (HAWA), helping patients to address their lifestyle issues, thus freeing up clinician time.

**Short description of practice change implemented:** Patients attending the Heart Function Clinic are referred to the Health and Wellbeing Clinic by the Consultant Cardiologist or Specialist nurse, if they feel the patient would benefit from participating in the programme for alcohol, tobacco, weight or mental health issues and meet the criteria.

**Aim and theory of change:** To demonstrate the effectiveness of delivering health behaviour change interventions to patients with pre existing heart disease

**Targeted population and stakeholders:** Patients attending the Heart Function Clinic, Family members, Health and Wellbeing Advisor, Consultant Cardiologist and Specialist nurse.

**Timeline:** In September 2012, NHS Ayrshire & Arran commenced delivery of the Health and Wellbeing (HAW) Programme in Cardiology. Over a year, 60 patients participated in the programme.

**Highlights:** (innovation, Impact and outcomes) The 31 patients who attended 3 or more appointments were invited to participate in the evaluation. 22 patients took part in the telephone interviews, 3 of which were the wives who joined the Programme to support their husband.

- 91% said they had learned something new about living healthy lifestyles.
- 77% said Programme had made them feel better, reasons being physical comfort, from weight loss, increased sense of happiness and feeling relaxed.
- 73% reported significant improvement in their quality of life

- Almost 70% said their health had improved as a result of the Programme and almost half said their doctor had confirmed health improvement
- 77% reported their spouse/children had made lifestyle changes.
- 73% viewed Programme as good or excellent

The programme offered patients the opportunity to be seen by the HAWA while at an existing appointment, or at a venue suitable to them. It also allowed patients to decide what issues they would like to address as a priority, (as opposed to the issue they were referred with), and set their own goals.

**Comments on sustainability:** The initial pilot has been extended and now includes patients attending the chest pain clinic. The long term vision is to embed this service within existing clinics by training Cardiology staff to deliver the Health and Wellbeing programme.

**Comments on transferability:** The model has been used to expand delivery of the health and Wellbeing programme to patients with Respiratory Disease and Rheumatoid Arthritis.

**Conclusions:** (comprising key findings) The Programme has successfully supported people to make health behavioural changes. It has further impacted on the health of carers and family members demonstrating the programme to be preventative and anticipatory care in action.

The programme has proven itself to be clinically and financially effective as patients are able to be seen in their own community and some patients now require to see their consultant less frequently due to the improvement in their clinical symptoms.

**Discussions:** An unanticipated development in the programme was the decision to allow spouses and other family members to become involved. Family members are now encouraged to participate in the programme to support the patient and promote a family approach

**Lessons learned:** It was initially envisaged that most patients referred would be newly diagnosed with heart failure. However, many of these patients said that they needed to come to terms with their condition before contemplating making any changes to their lifestyle. Therefore, targeting of individuals who are in a stable condition, appears to have more positive outcomes.

## Keywords

keep well; health checks; cardiology; heart failure

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## PowerPoint presentation

<http://integratedcarefoundation.org/resource/icic15-presentations>