

Patient experience of physiotherapy input on a specialist heart failure unit

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Background

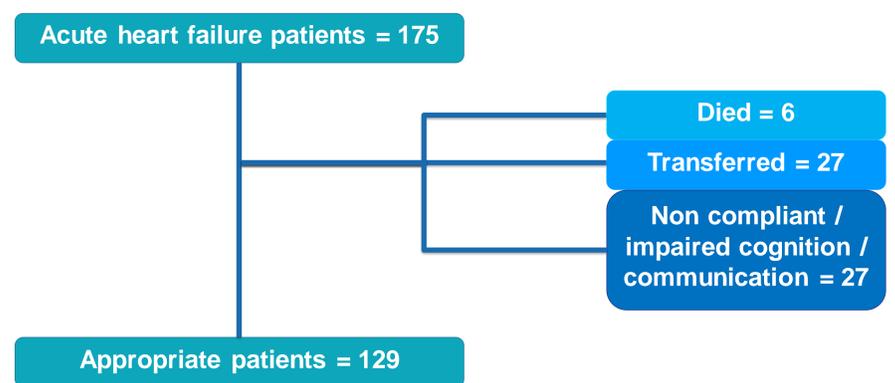
Acute heart failure is the most common cause of admissions for patients aged 65 and over in the UK and is frequently associated with adverse effects on quality of life. In the United Kingdom, NICE Guidelines for heart failure recommend review of all acute heart failure admissions by a specialist heart failure team. Heart failure care is recommended to be delivered by a multidisciplinary team, incorporating education, and advocating self-management and patient centred care.

With this in mind, and the assistance of £1.45m CQUIN and CCG funding, in 2016 St George's Hospital London (SGH) opened a specialist 11 bedded heart failure unit to cohort acute heart failure patients with the aim of improving outcomes in quality of life, 30 day readmission rates, and mortality. As heart failure is often associated with marked reductions in quality of life and high levels of debility, a full time highly specialised physiotherapist was funded to work on the unit as part of the multidisciplinary specialist team.

Traditionally patients admitted for offloading with IV medications at SGH would not be seen by a physiotherapist if they were already at their baseline mobility, or not seen until after the IV treatment was completed. Failing to provide a physiotherapy review of these patients until after they have completed their IV's puts them at high risk of deterioration in terms of functional ability and/or exercise tolerance. The aim of this project was to assess the impact of exercise education and early physiotherapy intervention on patient experience when admitted to a specialist heart failure unit.

Methods

Between June 2016 and January 2017, 69 patients (57% of appropriate patients) completed an anonymous physiotherapy experience survey on discharge from the heart failure unit. Surveys were either collected on the ward on day of discharge, or via post after discharge home (response rate 30%). The survey was a combination of multiple choice answers as well as having an option to provide written comments. Simple analysis of survey results was completed to evidence patient experience.

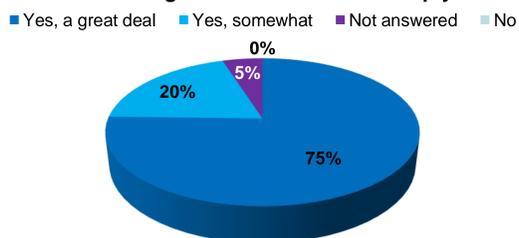


Results

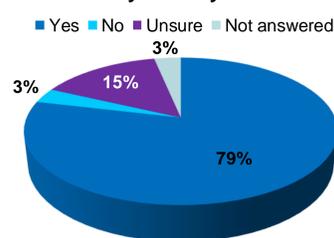
Of the patients surveyed, 88% saw a physiotherapist on the heart failure unit. Of those seen (n=61), 95% felt they had a better understanding of how exercise could help their condition after input by the physiotherapist.

79% of responders felt physiotherapy helped them during their stay, with a further 15% unsure and 3% did not feel physiotherapy helped them. 30% of patients seen by a physiotherapist would not have expected to see a physiotherapist during their stay.

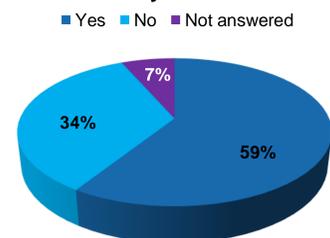
Did the physiotherapist give you a good understanding of how exercise can help you?



Do you feel the physiotherapist helped you during your stay?



Did the physiotherapist set specific goals with you?



92% felt the physiotherapist respected them at all times, and 87% felt their views were somewhat or completely taken into account by the physiotherapist. 59% of responders reported the physiotherapist set specific goals with them during their stay, with 34% reporting no goals were set.

75% were seen by a physiotherapist most days (41%) or every now and then (34%) with only 8% of respondents feeling this was not enough. Analysis of patient written responses indicates themes of patient empowerment through self-management and exercise, as well as personalisation of care aimed at recovery and improving quality of life.

"Without being melodramatic, it has helped immensely and changed my thoughts on physical activity"

"I had detailed discussions which helped to frame my thoughts on exercise and activity"

"Top class. Took into consideration my poor vision and hearing nicely"

"It was helpful to know that one can do much. Thank you for all the information"

"I was pleased to discover that physiotherapist's advice was readily available during and for after my stay at St Georges, assisting me to a full recovery"

Conclusion

The results indicate physiotherapy input was well received by patients admitted to the SGH heart failure unit. Almost all patients surveyed felt they had a better understanding of how exercise could help their condition on discharge. This will assist this particular patient group to self-manage their condition and improve long term quality of life. Keeping in line with patient centred care the survey indicated input was respectful and took into account the views of the majority patients. Input on the whole was deemed to be helpful and sufficient for patients. The patient group who will benefit most from exercise education are thought to be the higher level patients not previously seen traditionally at SGH who are returning to an active lifestyle after a significant deterioration in their exercise tolerance. An area to move forward with is to set clear patient centred goals to assist with patient motivation. Longer term assessment of quality of life should also be considered along with assessment of long term carryover of knowledge gained and how it has assisted with patient's lifestyle change and self-management. Inclusion of physiotherapy representation in the multidisciplinary team treating patients hospitalised with acute heart failure should be considered when planning and commissioning services for this patient group.

