Epworth HeartSmart Program

2014 Activity Review
HeartSmart Program – 2014 Activity Review

Cardiac Nurse Nanci Thurston coordinated Epworth’s 2014 HeartSmart Cardiac Rehabilitation Programs.

Nanci may be contacted on 0419 541 192 or (03) 9426 6625

During 2014 the HeartSmart activities included:

1. Obtaining and processing ‘Outpatient Cardiac Rehab Referral Forms for all Epworth patients who have undergone cardiac procedures/surgery, contacting them by both mail and telephone inviting them to either (a) enroll in one of Epworth’s 4 Cardiac Rehabilitation Programs of either 3 or 6 weeks duration; OR (b) be referred to a similar cardiac rehabilitation program closer to their home.

2. Weekly involvement in a cardiac pre-admission clinic. Provides an opportunity to discuss with patients the importance of attending cardiac rehabilitation sessions.

3. Conducting 3 x 1 hour discharge education sessions at Richmond each week for in-patients and their families regarding the importance of undertaking a cardiac rehabilitation program and what to expect when they get home.

4. Organising and conducting 4 x 2 1/2 hr weekly cardiac rehabilitation sessions at Richmond and Box Hill throughout the year.

5. Maintaining effective relationships and communication with the various cardiology specialists and nursing staff at Epworth Richmond and Epworth Eastern Box Hill.

6. Maintaining effective relationships and communications with Cardiac Rehabilitation Professionals / Program Managers working in health care facilities throughout Australia.

7. Organising and hosting a range of fundraising and communication activities to benefit past and present HeartSmart participants including the very successful Annual HeartSmart Cycling Challenge and Christmas Reunion Luncheon.

8. Coordinating a team of volunteer helpers while meeting the demands of a very heavy logistics and administrative load throughout the year.

9. Attending Victorian Cardiac Rehabilitation Conference and the 2014 Australian Cardiac Rehabilitation Conference in Sydney as well as the Quite Seminar

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SECTION 1: THE METHODOLOGY

Epworth’s HeartSmart Program commenced in 1993. In that year 161 cardiac patients participated in the program – one of the first of its type launched in Victoria. After taking up the role of coordinator in mid-1996, Nanci Thurston expanded the program in 1998 with the introduction of a 3-week evening ‘Fast Track’ program designed specifically for patients who received a PCI/stent rather than cardiac surgery. In 2005 a third version of the 6-week program was offered at Epworth Eastern bringing the program to 4 sessions per week throughout the year where it has remained due to the limited resources available. Since its inception 22 years ago, annual participation has fluctuated over the years finally culminating in a total of 425 enrollments in 2014 – the highest ever.
Best practice in cardiac rehabilitation is to offer the opportunity to participate in the HeartSmart program to every person after a cardiac event at either Epworth Richmond or Eastern hospitals, or alternatively to be referred elsewhere to undertake another suitable rehabilitation program closer to their home. The cardiac procedures/surgery that will benefit from a HeartSmart invitation are Valve Surgery; CAGS; Core Valve; and PCI/Stents/ Scaffolds and Acute Myocardial Infarctions. Patients undergoing some other related procedures also participated in HeartSmart during 2014.

Invitations to participate in a HeartSmart (or other) cardiac rehabilitation program are offered in five ways.

1. The invitation is made to patients and their family/support members at the cardiac pre-admission clinic that is conducted weekly at Richmond.
2. Each cardiac patient at Epworth Richmond receives a post-procedure visit in the ward by a HeartSmart volunteer, themselves usually a past cardiac patient, who stresses the value of cardiac rehab as a significant contributor to the speed with which patients will recover.
3. Each surgical in-patient at Richmond is strongly encouraged to attend one of the three discharge education sessions that the HeartSmart coordinator conducts each week. Family members are also encouraged to attend this briefing. A carefully prepared information pack is distributed to patients at this time.
4. A written invitation is mailed to each patient’s home address following discharge together with a HeartSmart brochure emphasizing the value and benefits of cardiac rehabilitation.

5. The HeartSmart coordinator spends many hundreds of hours each year making follow up phone calls to each past patient seeking to either enroll them directly in one of the 4 HeartSmart programs or arrange a referral to another cardiac rehabilitation provider closer to their home.

The objective is to positively encourage cardiac patients to appreciate the benefits of undertaking a cardiac rehab program and to ensure they are successfully enrolled in a program. While there are a number of patients who either ignore or decline our invitation, we believe that in 2014 we achieved a reasonable level of success.

Cardiac Event Follow-Up - 2014 Outcomes

In 2014 a total of 1488 Epworth cardiac patients were identified as being eligible for enrolment in a cardiac rehabilitation program. The HeartSmart team received 1042 (i.e. 70.0% of 1488) Outpatient Cardiac Referral Forms from the relevant wards following patient discharge. Recently introduced changes in the discharge procedure will hopefully see the rate of Referral Form receipt in HeartSmart office rise closer to the desired level of 100% in the coming years.
The following chart reflects the numbers of referrals received relative to the number of interventions/surgeries conducted. The opportunity for improvement lies with referrals from the “Interventional” group of patients (PCI/stent/scaffold) at both Eastern and Richmond hospitals.

Of the 1488 eligible Epworth cardiac procedure patients, 425 enrolled directly in one or other of the 4 HeartSmart Programs as shown in the following chart:
It is interesting to note that the Tuesday afternoon Epworth Eastern HeartSmart Program is the most popular of the 3 six session programs, attracting 37.9% of the full program HeartSmart enrollments. This fact probably speaks to the popularity of the Box Hill location offering inexpensive car parking (approx. $7/day) compared with the congested Richmond site where 2½ hours of daytime street parking (local 2 hour limits) is either quite inconvenient while the Epworth in-house parking is expensive.

The Epworth HeartSmart program is presented in two versions comprising either three or six sessions.

The HeartSmart Fast Track Program is a shorter three-session program designed specifically to benefit people who have had angioplasty, stents or scaffolds. The program is conducted from 6:30 – 9:00 of a Tuesday evening at the Epworth Richmond facility. The three sessions offered are:

- Week 1: Understanding your heart – Cardiac Nurse
- Week 2: Nutrition and heart health – Dietitian
- Week 3: Managing your medications - Pharmacist
  plus a discussion on emotional health – Psychologist.

The 6-week HeartSmart Program is offered three times each week throughout the year, twice at Richmond (Wednesday and Thursday mornings) and once at Eastern Box Hill (Tuesday afternoons). Participants can join the program at any time in the rolling 6-session cycle. The program, which is suitable for all people who have undergone a cardiac procedure/surgery, welcomes a family member / support person to attend cost free. The topics covered are:

- Week 1: Understanding your heart – Cardiac Nurse
- Week 2: Nutrition and heart health - Dietitian
- Week 3: Managing your medications – Pharmacist
  (and) Exercise makes the difference - Physiotherapist
- Week 4: Label reading for heart health – Dietitian
- Week 5: Emotions and the heart - Psychologist
- Week 6: Recognising the signs and symptoms – Ambulance Victoria
  (and) Guest Speaker – Mike Smith: A personal experience

At every session the cardiac nurse monitors each participant’s progress while hour of light exercise coordinated by a physiotherapist follows the formal presentation session.

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SECTION 2: THE MANPOWER

The coordinator of Epworth’s HeartSmart Program has a loyal team of committed volunteers who help enable the program to operate effectively.

All the Epworth volunteers are recruited, vetted and overseen by the Manager, Volunteer Services (Mrs Frances Yucedag). Once recruited on behalf of HeartSmart, volunteers are assigned a particular role by the coordinator to suit their skills, experience and regular availability.

The types of roles filled by volunteers during 2014 included:

1. In patient visiting in the wards
2. HeartSmart session set-up and related attendance administration
3. Extensive administrative support for all programs including:
   - Preparing weekly mail-outs to eligible post-discharge patients
   - Preparing hand-out folders for patients & family members
   - Maintaining database records & publishing monthly measures
   - Confirming and submitting claim forms to the Billings section
   - Maintaining office and general operational supplies
   - Supporting fundraising efforts (Bike Ride & Christmas Luncheon)

A cameo of the main volunteer roles is shown below:

1. **Patient Visiting**: Long-term volunteers Kaye and Colleen attend on separate days to visit all eligible patients in the ward to share their own experience as a patient and stress the value of undertaking a cardiac rehabilitation program. They maintain records of those visited and alert the coordinator to any particular needs / requirements that may arise in their friendly discussions with patients and their family members.

Kaye

Colleen
2 **HeartSmart Session Set-Up & Admin:** HeartSmart’s 4 program sessions each week ideally require two volunteers to take responsibility for the setting up of the meeting room and patient monitoring equipment, greeting patients and family members on arrival, recording details in an accurate and timely manner and issuing name tags. At the conclusion of the formal session the volunteers tidy the meeting room, store equipment and complete all outstanding administration relating to the session attendees.

Without the essential support of these volunteers, it would not be possible for the HeartSmart coordinator to conduct the sessions alone. Additional paid staff would be required.

3 **Administrative Support:** HeartSmart has become entirely dependent on volunteers for its extensive requirement for administrative support.

The specifics of HeartSmart’s ongoing administrative requirements may be summarised as follows:

1. To ensure the ongoing supply and availability of all printed materials that are distributed to HeartSmart participants before, during and after their hospitalisation.

2. To confirm eligibility of each patient as being suitable to undertake a cardiac rehabilitation program, and then prepare, pack and mail a personalised letter of invitation to each potential participant. In addition a listing of relevant details for each invitee is prepared to assist the HeartSmart coordinator who contacts each person by telephone to follow up our invitation.
3. To enter new patient booking data into the iPM system.

4. To maintain accurate records of all acceptances, complete HeartSmart enrolment procedures and record all relevant data in the iPM Clinical Appointment system so appropriate details are reflected in the participant's medical record.

5. To ensure that an individual's session attendance or absence data is accurately recorded in the iPM system and matched against their planned 3 or 6-week participation in the HeartSmart program.

6. To ensure that individual attendances are accurately matched with the signed paperwork required by the various private health insurance funds before they will make a refund payment on behalf of their member. The voluntary management of this process resulted in more than $200,000 being recouped by Epworth in 2014.

7. To maintain and manage an Excel database of information relating to either HeartSmart participation or one of the four outcomes of Epworth's invitation to participate in a cardiac rehab program. These outcomes are either the successful Referral of our past patient to a 3rd party cardiac rehab provider elsewhere in Australia, a Decline or Ignoring of the invitation or noting those who have previously completed a cardiac rehab program.

**OFFICE ADMINISTRATIVE SUPPORT**

Ray

Ross

Florence

Tony
SECTION 3: THE MEASURES - Part A - 2014

Throughout 2014 four monthly measures were published on notice boards in cardiac wards. Each month’s measurement poster took the form shown below:

### HEARTSMART ACTIVITY REPORTING FULL YEAR - 2014

- **Cardiac Discharge Education**
- **2014 Cardiac Referral Activities**
- **2014 HeartSmart Participants by Procedure & Month of 1st Attendance**
- **Discharge Details received by HeartSmart & Eligible Cardiac Surgeries & Interventions Completed - 2014**

While the four measures tracked each month during the year reflect the undulating nature of the demand for the HeartSmart program the following observations can be made:

1. **Attendance at the 3 x weekly Cardiac Discharge Education** sessions conducted by the HeartSmart coordinator became increasingly well attended during the year. In all, 600 people participated in these important briefing sessions.

2. **A great deal of the Coordinator’s time each week has to be devoted to the administrative tasks relating to the follow up of past-patients to either enroll them in one of the 4 HeartSmart sessions conducted each week or arranging referrals to other providers.** The chart **2014 Cardiac Referral Activities** reflects the consistent 35-40 new enrollments each month in HeartSmart (n=425 in total) as well as the number of referrals to other providers (n=708), those who specifically declined the invitation (n=167), those ignoring all our efforts to contact them (n=77) while 90 past patients had completed a rehab program previously and decided...
3. **The HeartSmart Participants by Procedure** chart reflects the majority of participants enroll in the program following either a PCI/stent (n=164) or CAGS (n=102) procedure. The full breakdown of procedures is reported in the chart on page 2 of this report.

4. Of continuing concern are the results reported in the fourth chart **Discharge Details Received by HeartSmart** which reflects the 2014 shortfall between the copies of a patient’s discharge/referral form and the actual number of eligible cardiac procedures (PCI, CAGS, AVR MVR etc.) conducted at Epworth’s Richmond and Eastern hospitals.

A recently revised Outpatient Cardiac Rehab Referral procedure requires the discharging nurse to obtain the patient’s consent to refer them for cardiac rehab, and where agreement is obtained, to make such a referral. The final step is to ensure a copy of the patient’s referral form is scanned / faxed to the HeartSmart coordinator so each patient can be followed up after being discharged home.

5. An issue of concern is that, rather than approaching the desired level of 100%, the 2014 compliance rates for receipt of Rehab Referral Forms by the HeartSmart coordinator for each class of cardiac procedure (Intervention/PCI or Surgical) were as follows:

   a) For Eastern Cardiac Surgeries 109/200 (54%) forms received  
   b) For Eastern Cardiac Interventions 94/178 (53%) forms received  
   c) For Richmond Cardiac Surgeries 420/524 (80%) forms received  
   d) For Richmond Cardiac Interventions 419/586 (72%) forms received

There is an opportunity to increase the rate of Referral Form returns toward the National Heart Foundation’s best practice level of 100% where every eligible cardiac patient is effectively followed up after a relevant procedure.
6. Program Completion Rates

The Fast-Track 3 Session program of a Tuesday evening again achieved the best all-session completion rate (91.2%) of the 4 programs offered each week during 2014.

Completing a cardiac rehabilitation program is defined as attending either 2 or all 3 of the Fast-Track sessions, or 5 or 6 sessions of the more comprehensive 6 week program. The 3 week program has been specifically designed to meet the needs of intervention (PCI/stent/scaffold) patients, whereas those people undergoing cardiac surgery are positively encouraged to participate in a 6-session cardiac rehabilitation program such as HeartSmart.
SECTION 3: THE MEASURES – Part B: 5 Year Retrospective

The HeartSmart administrative volunteers have been consistently compiling detailed data for the 5 years from 2010 to 2014, and in some cases longer. This allows some annual performance comparisons to be made with the following measures being of relevance.

1. Participation by Gender

It is interesting to note that annual participation in the HeartSmart program has grown from 285 people in 2010 to 425 in 2014, an increase of 49%. This growth has been achieved without any additional professional resources being assigned to the program. Logic suggests that, given the static level of resourcing, the quality of individual attention given to patients will have been adversely affected when comparing the 2014 situation to those existing in 2010.

2. Participation by Home Locality

A patient’s home locality has been classified as either being “Local” (within approx 10Km of either Epworth Richmond or Eastern hospitals); within the wider “Melbourne Metro” area or “Regionally” elsewhere in Victoria or interstate.
While the respective proportions for each of the three categories were not significantly different for the years 2010 - 2014, it is interesting to note the change across the five-year cohort thus:

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2014</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives Locally</td>
<td>61%</td>
<td>74%</td>
<td>+13%</td>
</tr>
<tr>
<td>Lives Wider Melbourne Metro</td>
<td>21%</td>
<td>16%</td>
<td>-5%</td>
</tr>
<tr>
<td>Lives Regionally</td>
<td>18%</td>
<td>11%</td>
<td>-7%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100%</td>
<td>100%</td>
<td>--</td>
</tr>
</tbody>
</table>

This shows that in 2014 a greater proportion of the HeartSmart participants lived ‘locally’ compared with the situation in 2010. Given that HeartSmart participation has grown from 284 in 2010 to 425 in 2014, it suggests our Epworth cardiac patients are less inclined to travel the distances required to participate in one of our four HeartSmart programs. As mentioned previously, the difficulties associated with local car parking may well be a contributing factor in the decline of HeartSmart participants living further afield.

3. HeartSmart Program Attendance Profiles (%)

The administrative volunteers record session attendances by enrolled participants to facilitate the required financial claims to be made on the various private health funds. Consequently we can track participation / program completion rates for both the three 6 session programs and the 3 session ‘Fast Track’ program which is designed especially for cardiac ‘Intervention’ patients. The data for both types of program is shown below:
It can be seen (above) that, for the three 6 session programs (Epworth Eastern, Richmond Wednesday and Thursday mornings) the completion rate (i.e. those attending all 6 scheduled sessions) has been slowly improving year by year since 2010. In 2014 65.3% (203 of the 311 six-session enrolments) completed the full six sessions.

It is interesting to note that the comparable 2014 figure for completion of all three sessions of the Fast Track program was (90/114) a creditable 79.6%.

4 Time Lag From Discharge to HeartSmart Commencement (Days)

Several Private Health Funds impose a range of time limits on the number of days that can elapse after discharge by which the cardiac patient must commence a rehabilitation program if it is to be eligible for reimbursement. Consequently it is important to track these timings so emphasis can be placed on the expedient enrollment and commencement of participants in the HeartSmart (or other) cardiac rehab program. The following chart shows the fluctuating situation for HeartSmart participants over recent years, noting the performance improvement made since 2012.
Follow Up Procedures Including Referral to other Rehab Providers

The current Epworth patient discharge procedure requires completion of an Outpatient Referral Form and forwarding a copy to the HeartSmart coordinator. Upon receipt, the coordinator will contact the person (as described) and either enroll them into HeartSmart or arrange a referral to another cardiac rehabilitation provider closer to the person’s home. For a variety of reasons’ some patients will specifically decline our invitation to participate, others simply ignore it while there are others who will have completed a rehab program previously.

Following through on this administrative referral activity consumes a very substantial portion of the coordinator’s time and effort each week in addition to the contribution of volunteers. The following table depicts the outcome of these referral activities in 2014 and recent years. *

The following chart shows the outcomes by month of Epworth’s overall cardiac patient follow-up by the HeartSmart coordinator during 2014.
It is interesting to note in the following table the relative outcomes over the past 5 years of HeartSmart’s follow up activities. While we were most successful ever in enrolling people into HeartSmart (n=425), the overall workload relating to external referrals was somewhat modified in 2014 compared with the previous year due to a modified discharge procedure.

<table>
<thead>
<tr>
<th>Outcome of Follow-Up</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Externally</td>
<td>552</td>
<td>540</td>
<td>607</td>
<td>790</td>
<td>708</td>
</tr>
<tr>
<td>Declined Invitation</td>
<td>467</td>
<td>339</td>
<td>351</td>
<td>160</td>
<td>167</td>
</tr>
<tr>
<td>Ignored Invitation</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>139</td>
<td>77</td>
</tr>
<tr>
<td>Past Participant</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>113</td>
<td>90</td>
</tr>
<tr>
<td>Missing Data</td>
<td>85</td>
<td>15</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Follow Up Sub-Totals</td>
<td>1104</td>
<td>894</td>
<td>958</td>
<td>1202</td>
<td>1042</td>
</tr>
<tr>
<td>PLUS: HeartSmart Participants</td>
<td>284</td>
<td>387</td>
<td>380</td>
<td>391</td>
<td>425</td>
</tr>
<tr>
<td>TOTAL ANNUAL CONTACTS</td>
<td>1388</td>
<td>1281</td>
<td>1328</td>
<td>1593</td>
<td>1467</td>
</tr>
</tbody>
</table>

* It will be noted that not all the current outcome information was collected in earlier years.
SECTION 4: THE MONEY

The HeartSmart program generates funds in two ways. First by submitting claim forms to participants private health fund for reimbursement for their attendance, and second, by Epworth Medical Foundation organising the annual HeartSmart cycling challenge.

HeartSmart volunteers arrange for every rehab participant to sign a private health fund reimbursement claim form each time they attend their program. This implies that either three (for the Fast Track program) or six of these forms have to be signed, dated and collated for timely presentation to the Billing Department by HeartSmart volunteers.

The following chart shows the amounts invoiced each week during 2014 for the HeartSmart programs conducted at Richmond and Epworth Eastern.

In 2014 a total of $201,636 was invoiced to various private health funds in respect to their member’s participation in one of the HeartSmart cardiac rehabilitation programs.

The funds recouped from private health funds in 2014 represented an increase of 11.8% over the previous year. The income received in recent years is shown in the following table:

<table>
<thead>
<tr>
<th>HeartSmart Program</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Epworth Eastern (1 Program)</td>
<td>$45,429</td>
<td>$48,892</td>
<td>$48,370</td>
<td>$63,853</td>
<td>$64,969</td>
</tr>
<tr>
<td>Epworth Richmond (3 Programs)</td>
<td>$66,601</td>
<td>$99,273</td>
<td>$118,172</td>
<td>$116,491</td>
<td>$136,667</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>$112,130</strong></td>
<td><strong>$148,165</strong></td>
<td><strong>$166,542</strong></td>
<td><strong>$180,344</strong></td>
<td><strong>$201,636</strong></td>
</tr>
</tbody>
</table>
In addition to the income from health funds, the HeartSmart coordinator promotes and participates in the HeartSmart Cycle Challenge, which is held over approximately 10 days in February each year. Riders seek financial sponsorship and the additional income is managed through the Epworth Medical Foundation. In the past five years the following funds have been raised on behalf of, and earmarked for the benefit of the HeartSmart program:

<table>
<thead>
<tr>
<th>Cycle Challenge</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsorship Funds Generated</td>
<td>$30,000</td>
<td>$54,186</td>
<td>$32,066</td>
<td>$115,662</td>
<td>$54,872</td>
</tr>
</tbody>
</table>

When we combine the income from the health fund rebates and the sponsorship / donations supporting the Cycle Challenge, the total of $256,508 represents an increase of 80.5% over the $142,130 raised in 2010, the year of the first HeartSmart Cycle Challenge. A significant improvement over a 4-year period.

It is of interest to note the most recent HeartSmart Cycle Challenge in February 2015 raised a further $123,799 for the benefit of HeartSmart and cardiac services.

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SECTION 5: THE MOMENTUM – Progress Made & Future Plans

Achievements: In 2014 a number of milestones were achieved, including:

1: The highest ever level of overall HeartSmart enrollments (n=425)

2: 1042 cardiac patients were followed up after discharge with 708 being referred to external rehab providers while the balance (n=334) either declined rehab, ignored our invitation or had participated previously

3: 353 in-patients accompanied by 247 of their family members attended one of the Cardiac Pre-Discharge Education Sessions conducted 3 times weekly at Epworth Richmond by the HeartSmart coordinator.

4: A total of $201,636 was generated for Epworth through participant’s private health fund reimbursements, and when added to the $54,872 raised by the HeartSmart Cycle Challenge gives a total income of $256,508 for 2014.

5: In conjunction with Epworth’s Manager of Volunteer Services, a dedicated band of volunteers contributed in excess of 2,000 hours of support to HeartSmart in a variety of roles, representing a value to Epworth of an (estimated) minimum of $56,000 based on the value of an administrative manager’s annual salary.

5: There were a total of 1488 cardiac patients who underwent a variety of procedures at Epworth for which cardiac rehabilitation is relevant. Of these 1042 (70.0%) were individually followed up/referred for cardiac rehab (including some to the HeartSmart program).

6: A number of very complimentary feedback letters from HeartSmart participants have been received by the Epworth CEO Alan Kinkade during the year. One of a number of those received follows as an example:

“Dear Mr Kinkade,

After having heart surgery at Epworth in October 2014 I somewhat reluctantly enrolled in the HeartSmart program in November. I was completely surprised at how beneficial it was.

I just wished to express my gratitude for this program and all the wonderful work and enthusiasm Nanci Thurston and her team puts in.

Every one of the six lectures was very informative and the hour long aerobic workout in the gym saw me healing quickly and built my confidence.

The camaraderie with other recovering patients was also extremely helpful in that you realized you weren’t on your own and that we are in the same situation.

Again thank you for having the foresight to offer this program – all attendees I spoke to were of the same opinion.

Yours faithfully”
(Name withheld)
Opportunities Ahead: Given the significant achievements of 2014, there remain a number of opportunities for the further development of Epworth’s HeartSmart programs in the coming year:

1: With 1488 eligible cardiac patients having been treated at Epworth in 2014, and only 425 of them enrolling in HeartSmart, there is an opportunity to increase the number of patients attending our program. Increasing patient participation in HeartSmart would not only improve our level of complete patient care but also render a financial benefit to Epworth by way of increased income from private health fund reimbursements.

2: Given the number of patients we refer externally (708 in 2014) there is an opportunity, indeed a need, to more effectively follow these patients up to confirm they have in fact undertaken the external program, and understand the degree to which they benefit from the program. A new initiative that could facilitate such work would be the appointment / assignment of an additional cardiac nurse to undertake such research, preferably as part of a Masters Degree program with a relevant educational institution. The findings could be published thus further enhancing Epworth’s reputation as a leading Australian cardiac facility.

3: Given the value of emphasizing Epworth’s positive reputation in the wider community, it would be beneficial to produce and distribute a brief video/DVD program to underscore both the value of undertaking a cardiac rehabilitation program, and also emphasise and promote the specialist service offered by the Epworth HeartSmart program. Such a production could easily involve past participants which in turn would further contribute to Epworth’s obligations in meeting the National Safety and Quality Health Service (Standard 2) requirement for ‘Partnering With Consumers”. Such a production could readily be distributed incorporated into the patient admission/ discharge procedures as well as being posted on our Intranet and External websites. This would allow people to view the material in the comfort of their homes with their family / support members who, in many instances, are the prime movers in encouraging patients to undertake a cardiac rehab program.

4: In conjunction with the video/DVD initiative above, our cardiac rehabilitation follow up procedures would be substantially enhanced by the availability of a Smartphone Application which would be built around cardiac themes in a similar manner to the “Bublove” maternity care ‘App” that has been produced by Epworth Freemasons. We understand this initiative has proved extremely popular and been very beneficial to both expectant and post-partum mothers throughout Australia.

Report prepared by Ross Baxter (HeartSmart volunteer) and approved by the HeartSmart Coordinator.