

# Case Study – User empowerment

## Castle Hill Cardiac Support Team



Better Skills  
Better Jobs  
Better Health

Patients who have had some form of coronary heart disease, and their carers, have been involved in the development of the CHD framework from its inception. In July 2004, they were invited to test some of the draft units from phase 2 within the context of their contact with their medical practitioners. During discussions it was recognised that the Castle Hill Cardiac Support Team was supporting patients with heart conditions and their carers.

### The situation

Initially one of the criteria of becoming a member of the Castle Hill Cardiac Support Team was that we had to have had some cardiac surgery and therefore have the marks on our chests. It fondly became known as ‘The Zipper Club’. The Support Team has been running for a number of years. We go and talk to the patients as they find out that they are about to have surgery, and support the carers before, during and after surgery. The new patients always find it comforting to know that we have already been through what they are facing and have lived to tell the tale.

### The aim

We wanted to review the units to identify any units we could adopt as part of our activities within the Support Team or to identify any units which might support us and the medical practitioners in our work with the patients.

### The action

Rekha Wadhvani, the *Skills for Health* technical consultant on the project, came up to Hull and gave a presentation to four of us (Roy Barcoe, Ann Barcoe, Les McMullen and Marjorie McMullen). Roy has been a patient for over 10 years, while Ann has had angina for the last four years. Les McMullen was diagnosed with silent angina about a year ago and his wife Marjorie has had angina for the last 15 years. Because of this we felt we would be able to look at the units from both a patient’s as well as a carer’s perspective. We agreed to review the following units:

CHD EE1	Enable individuals to understand and reduce the risk of CHD
CHD HB1	Recognise indications of heart conditions and take appropriate action
HCS I2	Receive patients and carers
HCS I14	Advise and counsel patients to facilitate management of condition and treatment plan

## **The results**

We felt the units were set out in a logical order and were easy to understand by non-medical people like us.

There is a lot of variation in the provision of care services to patients not only across the country but within each region as well. We often meet patients from different hospitals who have been provided with physiotherapy and relaxation support from one hospital while patients from another hospital didn't receive the same aftercare service. The standard of service also varies from hospital to hospital. Matters are improving as a cardiac nurse from the British Heart Foundation visits some patients at home.

The units should help with equalising a standard of quality throughout the sector which will support both carers and patients towards a faster recovery.

## **The future**

We would like to take the units to our cardiac nurse who may be able to build upon the content of the units and provide relevant information to the patients and carers at our monthly meetings. We would also like to link the unit CHD EE1 (*Enable individuals to understand and reduce the risk of CHD*) to the work we are already doing and provide extra advice to patients and their carers.

## **Contact details**

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