



AHRQ's Initiative To Increase Use of Cardiac Rehabilitation



Affinity Group: Coping with Staffing Challenges in Today's Cardiac Rehabilitation Programs

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Welcome and Background

Welcome and greetings from TAKEheart, AHRQ and CDC

Update on status of TAKEheart:

- ❖ Resumption of TAKEheart cohort 1 scheduled for spring, 2021 but planning activities will begin this November
- ❖ Ongoing offerings of affinity group sessions on priority topics for the learning community. Events are open to anyone but participants are encouraged to join the TAKEheart Learning Community at: <https://takeheart.ahrq.gov/join-takeheart>
- ❖ TAKEheart website remains available with added information and links to COVID-19 resources (<https://takeheart.ahrq.gov/coronavirus>)

Today's Event

- ❖ Background: TAKEheart affinity groups (AG) provide forums for participants to learn from and share with each other on priority topics. Everyone **LEARNS**, everyone **SHARES**, everyone **SUPPORTS**.
- ❖ Purpose of Today's Call:
 - ❖ Continue process of learning and sharing with each other
 - ❖ Focus of today's conversation: explore how CR programs are responding to staffing challenges in supporting the needs of their patients, staff and bottom lines
- ❖ Format: Moderated panel discussion using the chat and polling features to dialogue with participants and allow peer-to-peer

Today's Experts



Moderator

Hicham Skali, MD, MSc

TAKEheart Principal Investigator,
Associate Director of the Cardiac Rehab
Program at Brigham and Women's
Hospital, Division of Cardiovascular
Medicine

Panelists

Sherri Brandhorst, BSN, Kadlec Regional Medical
Center, Richland, WA

Kathe Briggs, MS, CEP, FAACVPR, East Alabama
Medical Center, Opelika, AL

Stacey Greenway, MA, Vidant Medical Center,
Greenville, NC

Tina Miller, MS, Frederick Health Hospital,
Frederick, MD

Loren Stabile, MS, FAACVPR, Lifespan
Cardiovascular Institute, Miriam and Newport
Hospitals, Providence, RI

Audience Question 1

Question 1: What best describes the current status of your hospital's CR program?

Please select your answer here



Remember to click **SUBMIT** when complete

Audience Question 2

Question 2: Looking ahead, how likely is it that your program may need to reduce your level of onsite operations at some point before the end of the year due to a resurgence of COVID-19 in your area?

Please select your answer here



Remember to click **SUBMIT** when complete

Audience Question 3

Question 3: CR programs vary with respect to how much data they can access and use to track patient referrals, CR program enrollment and CR program completion. What describes your program's use of this type of data?

Please select your answers here



Remember to click **SUBMIT** when complete

Today's Discussion Categories

❖ Adjustments to staffing in today's CR programs

Current Staffing Situations

-How staffing has changed since before the COVID-19 pandemic

Staffing Adjustments to Maximize Efficiency and Effectiveness

-Adjusting staff hours and schedules
-Engaging staff in different activities
-Other staffing adjustments to cope with changes/constraints

Ensuring Staff Feel Supported and Can Support their Patients

-Staff support
-Maintaining strong connections with patients

Current Staffing Situation

- ❖ **Tell us about the current staffing situation in your program and how it's changed since COVID-19 became an issue.**



Audience Input

- ❖ **Please use the chat to share a staffing strategy that you have used to cope with a current staffing challenge.**



Staffing Adjustments to Maximize Efficiency and Effectiveness

- ❖ **What changes are you making to staff hours or schedules to maximize staffing efficiency and effectiveness?**



Staffing Adjustments to Maximize Efficiency and Effectiveness

- ❖ **What changes are you making to the activities you assign to your staff to maximize their efficiency and effectiveness?**

Staffing Adjustments to Maximize Efficiency and Effectiveness

- ❖ **What other adjustments are you making to cope with ongoing staffing constraints (temporary staff, flexing staff across units, strategies to cope with staff temporarily unavailable to illness or required quarantine)?**

Ensure Staff Feel Supported

- ❖ **What are you doing to ensure your staff continue to feel supported and are able to maintain strong connections with your CR patients?**



Resources Mentioned in Today's Event

- ❖ Dr. Paul Oh's Cardiac College
 - ❖ <https://www.healthuniversity.ca/EN/CardiacCollege/Pages/learn-online.aspx>
- ❖ Cardio Smart- American College of Cardiology
 - ❖ <https://www.cardiosmart.org/>
- ❖ Henry Ford- Home Based Cardiac Rehabilitation
 - ❖ <https://www.henryford.com/services/cardiology/support/cardiac-rehab/home-based-cardiac-rehabilitation>
- ❖ American Heart Association Support Network
 - ❖ https://supportnetwork.heart.org/?utm_source=Heart.org+Widgets+October+2015+Refresh&utm_medium=widget&utm_campaign=SupportNetwork

Affinity Group Wrap-Up

- ❖ **Next call:** Date and topic to be announced shortly
- ❖ **Continue discussions** of key topics with peers at: <https://takeheart.ahrq.gov/collaboration>
- ❖ **Today's slides** and an event summary will be emailed to event participants and posted online at: <https://takeheart.ahrq.gov>
- ❖ Please **complete the popup feedback questions** so we can see what worked well and where we can improve.