#### **The Power of the Patient**

## My Jigsaw BC (before condition)



My life was going really quite well

### My Jigsaw AD (after diagnosis)



Big messed up jigsaw puzzle

#### **Corner Pieces**



My corners pieces were: survival, belief, attitude and knowledge

### The Edges



My edges were informed opinions around my belief, attitude and knowledge

#### **Colour Combos and Pictures**



My jigsaw was formed by using my experience of life, recognising what would work and what wouldn't

#### **Missing Pieces**



I was always on a mission to find the missing pieces, the gaps in my knowledge to achieve normality just like before

#### **Research and HOPE**



I tried to acquire my missing pieces through research around the facts and a real belief in HOPE. I never gave up.

### The Bionic Jigsaw Man



I became a new person. My experiences, desires and my sheer drive shaped me into a new person. Putting together my jigsaw has shaped my thoughts, direction and given me the results I wanted.

### What were my challenges?

- Dealing with my mortality it felt real
- Dealing with my uncertainty I felt out of control
- Dealing with my loneliness Nobody to help with my psychological challenges
- No support network No visible group to help
- How do I manage when my nurse or cardiologist isn't there?

# An opportunity

#### To address all those challenges and more



This is a positive word

### The Power of the Jigsaw



So thinking bigger picture, what would happen if we assimilated my ideas?

# Many Patients, Many Perspectives are a Powerful Tool



Power of collaborationPower of peer to peer learningPower of the patient voicePower of leadershipPower of ownership



#### What do we stand for?

- Mission
  - We give HOPE to heart failure patients and their families by **involving them in their own** care and advocating for them, giving them a voice. We don't tell them
- Aims
  - Building Awareness
  - Giving HOPE and HELP
  - Giving patients and families a **voice**
- Objectives
  - Increase awareness of the condition
  - Working to ensure people have the best and most appropriate toolkit for self management
  - Actually making a difference rather than just talking about it. Patient driven Advocacy



#### What do we do?

- Support
  - Patient information, heart buddy etc
- Advocacy
  - NHS, NICE, Academic, Political, Industry
- Self Management
  - Suite of products
  - Globally crowd sourced
  - Coaching and development of soft skills (Engagement)
- Access
  - Working toward total patient access for parity of care
- Awareness
  - Patient designed and patient led
  - Network of patient educators local, national, international (expert creation)
- Partnership
  - Develop with, not to HCP's to ensure information is in "patient speak"
  - Work with Industry and Academics to **add value** into their work

#### **Our Patient Educators**

#### Meet Andrew one of our Patient Educators



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### Examples of patient involvement (awareness)









### Examples of patient involvement (selfmanagement)

#### AN EVENING WITH THE PUMPING MARVELLOUS PATIENT EDUCATORS

#### WITH SPECIAL GUEST ANGELA GRAVES

East Lancashire's own Heart Failure Queens Nurse who is retiring from service in September 2014

The evening will also include an evening meal and an opportunity to have a roundtable discussion with the Pumping Marvellous Patient Educators, who are heart failure patients from all parts of the country. They help the charity with giving HOPE to heart failure sufferers and their families.

No slides and computers this is all about you

DATE: 11TH SEPTEMBER TIME: 5.30PM - 8.00PM VENUE: JAMES HARGREAVES SUITE, BURNLEY FOOTBALL CLUB

**RSVP TO JACKIE LOWRIE ON 01254 358094** 



# H.O.P.E.

A Patient's Story ...

### Examples of patient involvement (advocacy)



## Examples of patient involvement (partnership)

East Lancashire Hospi

#### Palliative Care & Advanced Heart Fa



#### Classification Of Heart Failure Syr New York Heart Associati

In order to determine the best course of therapy, physician: the stage of heart failure according to the New York Heart / (NYHA) functional classification system. This system relates everyday activities and the patient's quality of life.

#### Class I: Asymptomatic

No limitations of ordinary physical activity. Ordinary activity does undue fatigue, dysphoea, palpitation or angina.

#### Class II: Mild

Comfortable at rest. Slight or moderate limitation of physical activ Ordinary physical activity results in symptoms.

#### Class III: Moderat

Although comfortable at rest, marked limitation of physical activit ordinary activity causing symptoms.

#### Class IV: Severe

Symptoms at rest. Inability to carry on any physical activity withous symptoms or cardiac insufficiency.

Severity applies to the symptoms not necessarily to prognosis. Less than ordinary physical activity is defined as climbing one flight of stairs or wa







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### How does this fit into the Global Picture?

#### It's the same wherever you are



# Take home messages for building a successful Heart Failure Patient Group

- Build character into your brand
- Clearly define your aims and objectives
- Be patient led, recruit motivated people
  - Make sure patients and carers come up with the ideas, just police them
  - Reward involvement
- Understand your universe
  - HCP relationships
  - Industry relationships
- Invent and innovate and I mean really innovate
- Identify solutions not problems, look in to the problem

## Take home messages for building a ccessful Heart ⊂ lure Patient Group

Don't eat an elephant at once

Be known to DELIVER tangible results

Don't be afraid to look outside the health economy some of the best ideas come from other industries e.g. Apple, Amazon, Ebay etc

Be an excellent communicator and learn from others

Understand the power of digital