

Needs Assessment Framework:

University Hospitals [UH], based in Cleveland, Ohio, is one of the nation's leading healthcare systems and the second-largest hospital system in the Northeast Ohio region (University Hospitals, 2021). They house a Heart and Vascular Institute and provide cardiac rehab programs in ten of their main, regional, or community hospitals (University Hospitals, 2021). Although stress management is listed as a small part of the program, according to several of the cardiac rehab program education centers, it only consists of some short videos and no experiences or local resources.

The population I plan to target include individuals of various races, ethnicities, and cultures in Northeast Ohio region who have had a first cardiac episode. This project will be in collaboration with University Hospitals, Cleveland, and will use one of the local hospital rehabilitation centers as a project base. The assessment will inform whether a more comprehensive stress management program for cardiac rehab at the 10 UH facilities with cardiac rehab programs will assist in speeding recovery, preventing a secondary cardiac episode, and increasing overall prognosis in conjunction with a traditional cardiac rehab program. The short-term goal is to insert CAM interventions and resources that focus on stress management into the cardiac rehab program at UH, Cleveland to encourage a stronger focus on stress as an exacerbation of secondary cardiac episodes. The goal is to create a procedure change in the cardiac rehab curriculum to include a greater stress management portion. According to the National Institute of Mental Health (NIMH, n.d.), learning how to cope with stress is vital for long-term health. Also, stress can adversely affect one's ability to cope using healthy lifestyle habits that can decrease heart disease risk (American Heart Association [AHA], 2014).

This population has had a wake-up call with a first heart attack or other cardiovascular diagnosis and is going through a rehab program to recover and hopefully prevent further complications or increased cardiovascular disease. They are motivated and required to complete the cardiac rehab program subscribed by their physician. They may be temporarily weak physically but can regain strength and have a high quality of life. They may previously have had unhealthy lifestyle habits that contributed to disease while also some genetic factors. They need the most comprehensive rehab program, involving physical, emotional, social, and psychological aspects with resources and generalizable activities to have the best possible outcomes.

The assessment will involve a diverse organizational team of patients, healthcare practitioners, cardiac rehab specialists, stress management specialists, psychiatrists, CAM practitioners, and healthcare leadership. In this assessment, the population needs will be identified by collecting both primary and secondary data through several sources. First, I will collect primary data about the effects of the current stress management program by conducting different focus groups from graduates of the cardiac rehab program at UH based on age, sex, and ethnicity. Collected primary data in focus groups will include the self-reported understanding of stress and how it affects cardiac rehabilitation, personal effects of the current stress management cardiac rehab program, use of stress management techniques by patients, and how they feel the program could better include strategies for stress management. Interviews will also be conducted with key informants from the hospital: hospitals' presidents, cardiopulmonary managers, cardiac rehab managers, psychiatrists, social workers, and philanthropists of hospital programming. These interviews will collect expertise in the areas of cardiac rehab, stress management, mental health, and procedures and policies. A set of specific questions will be utilized to reduce the time needed for interviews and will be flexible to recognize the busy and

various schedules of interviewees. If it proves difficult to schedule these interviews due to other obligations of the key informants, we could use the Delphi Technique so they can answer questions on their own time.

Secondary data will be collected using national, state, and local health existing data, including data from the UH healthcare system as well as peer-reviewed journal articles. Data utilized will involve numbers and extent of stress management programs within cardiac rehab programs nationally as well as at the state level and locally. Collecting data on numbers and outcomes of secondary cardiac episodes after completion of a cardiac rehab program and analyzing in relation to stress management programs will be useful. Analyzing past research involving the effects of stress management techniques on perceived and measured stress, the effects of stress on heart disease, and general effects of cardiac rehab programs involving lifestyle changes affected by stress.

The levels of influence measured will include individual, interpersonal, environmental, and organizational. Results of measurements will be analyzed mainly via people's stories from the focus groups, main themes from interviews and focus groups, problems identified with the current stress management program, and comparing statistics for secondary episodes with stress management strategies. The findings will be presented to the key informants and all who participated in interviews via in-person and online presentations as well as a write-up of findings in everyday language for the participants' information. The data found will be used to identify the need for a CAM-focused stress management program as part of a total cardiac rehabilitation program.

References

American Heart Association. (2014, June 17). *Stress and heart health*.

<https://www.heart.org/en/healthy-living/healthy-lifestyle/stress-management/stress-andheart-health>

National Institute for Mental Health. (n.d.). *I'm so stressed out: Fact sheet*.

<https://www.nimh.nih.gov/health/publications/so-stressed-out-fact-sheet>

University Hospitals. (2021). *Cardiovascular rehabilitation at university hospitals helps patients return to an active lifestyle*.

<https://www.uhhospitals.org/forclinicians/specialties/heartand-vascular/centers-and-programs/cardiovascular-and-pulmonary-rehabilitationcenter/cardiovascular-rehabilitation-program>